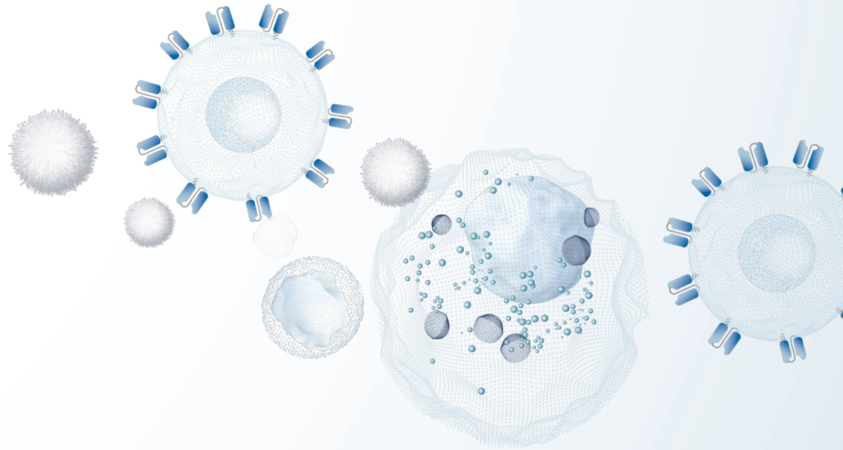
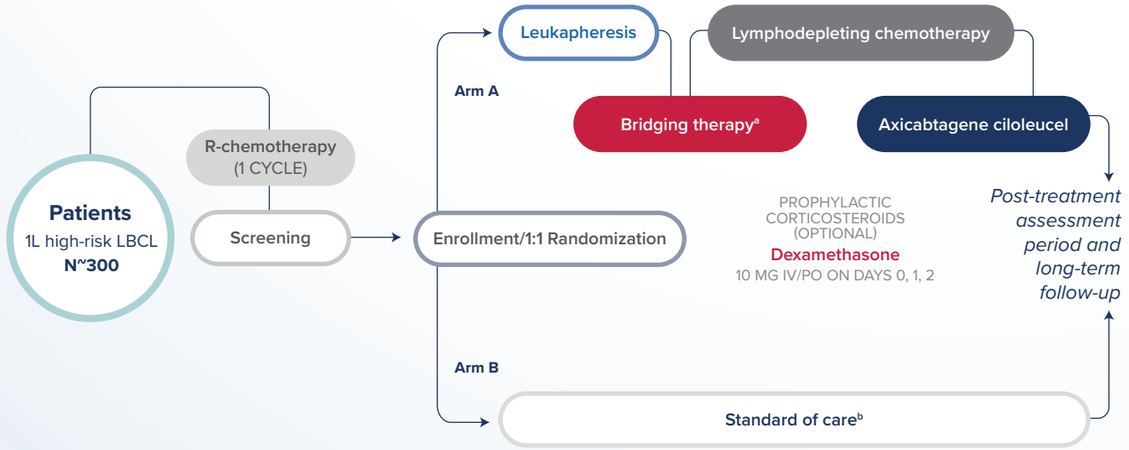
ClinicalTrials.gov Identifier: NCT05605899

# ZUMA-23: An Adaptive, Phase 3, Randomized, Open-Label, Multicenter Study to Compare the Efficacy and Safety of Axicabtagene Ciloleucel Versus Standard of Care Therapy as First-Line Therapy in Participants With High-Risk Large B-Cell Lymphoma



## Study Design[1,2]




[a]Bridging therapy with R-CHOP or DA-EPOCH-R will be administered during the cell manufacturing period. [b]Participants will receive the investigator's choice of either R-CHOP or DA-EPOCH-R for a total of 6 cycles (21-day cycle).

1L, first line; DA-EPOCH-R, dose-adjusted etoposide, prednisone, vincristine, cyclophosphamide, doxorubicin, and rituximab; IV, intravenous; LBCL, large B-cell lymphoma; PO, by mouth; R-CHOP, Rituximab plus cyclophosphamide, doxorubicin, vincristine, and prednisone.

## Endpoints[1,2]

### Primary Endpoint

- EFS[c]

### Key Secondary Endpoints

- PFS[c]
- OS

### Secondary Endpoints

- CR rate[c]
- AEs, SAEs, deaths and changes in safety laboratory values
- PROs/QoL

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[c]By blinded central assessment.

AEs, adverse events; CR, complete response; EFS, event-free survival; OS, overall survival; PFS, progression-free survival; PROs, patient-reported outcomes; QoL, quality of life; SAEs, serious adverse events.

**The safety and efficacy of these investigational agents and/or uses have not been established. There is no guarantee that they will become commercially available.**

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## Key Eligibility Criteria[1,2,a]

### Key Inclusion Criteria

- ≥18 years of age
- Histologically confirmed LBCL based on 2016 WHO classification by local pathology lab assessment, including the following:
  - DLBCL, NOS
  - HGBL (including HGBL with MYC and BCL2 and/or BCL6 rearrangements (DHL/THL) based on FISH analysis, and HGBL-NOS
  - Note: Transformed DLBCL from follicular lymphoma or from marginal zone lymphoma is eligible if no prior treatment with anthracycline-containing regimen
- High-risk disease defined as an IPI score of 4 or 5 at initial diagnosis
- Ann Arbor Stage III or IV disease
- Have received only 1 cycle of R-chemotherapy
- Adequate bone marrow, renal, hepatic, pulmonary, and cardiac function
- Females of childbearing potential must have a negative serum or urine pregnancy test

### Key Exclusion Criteria

- The following WHO 2016 subcategories by local assessment
  - T-cell/histiocyte-rich LBCL
  - Primary DLBCL of the CNS
  - Primary mediastinal (thymic) LBCL
  - B-cell lymphoma, unclassifiable, with features intermediate between DLBCL and classical Hodgkin lymphoma
  - Burkitt lymphoma
- Presence of malignant cells detected in the CSF, brain metastases, or a history of CNS involvement of lymphoma
- Presence of cardiac lymphoma involvement
- Any prior treatment for LBCL other than the 1 cycle of R-chemotherapy
- Patients positive for HIV
  - Note: Patients with a history of HIV and taking appropriate anti-HIV medications, with an undetectable viral load by PCR and a CD4 count >200 cells/µL are eligible to enroll

[a]Other protocol defined Inclusion/Exclusion criteria may apply.

BCL2/BCL6, B-cell lymphoma 2/6; CNS, central nervous system; CSF, cerebrospinal fluid; DHL, double-hit lymphoma; DLBCL, diffuse large B-cell lymphoma; FISH, fluorescence in situ hybridization; HGBL, high-grade B-cell lymphoma; HIV, human immunodeficiency virus; IPI, International Prognostic Index; LBCL, large B-cell lymphoma; MYC, Master Regulator of Cell Cycle Entry and Proliferative Metabolism; NOS, not otherwise specified; PCR, polymerase chain reaction; THL, triple-hit lymphoma; WHO, World Health Organization.



## Key Eligibility Criteria[1,2,a] (cont'd)

### Key Exclusion Criteria (cont'd)

- Patients with a history of acute or chronic active hepatitis B or C infection
  - Note: Patients with a history of treated hepatitis B or C infection and undetectable viral load are eligible to enroll
- Medical conditions likely to interfere with assessment of safety or efficacy of study treatment. Please refer to protocol for further details
- History of clinically significant cardiac disease within 12 months before enrollment
- History of any medical condition requiring maintenance systemic immunosuppression/systemic disease modifying agents within the last 2 years

**References**

1. Clinicaltrials.gov website. Accessed July 8, 2024. https://www.clinicaltrials.gov/study/NCT05605899
2. Data on file. Kite Pharma, Inc. 2022.

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