



## The 65th ASH Annual Meeting Abstracts

## POSTER ABSTRACTS

## 653.Multiple Myeloma: Prospective Therapeutic Trials

**Long-Term Outcomes from the Phase 3 OCEAN (OP-103) Study: Melflufen and Dexamethasone (Dex) Versus Pomalidomide (Pom) and Dex in Relapsed Refractory Multiple Myeloma (RRMM)**

Fredrik Schjesvold, MD PhD<sup>1</sup>, Meletios A. Dimopoulos, MD PhD<sup>2</sup>, Sosana Delimpasi<sup>3</sup>, Pawel Robak<sup>4</sup>, Daniel Coriu, PhD<sup>5</sup>, Wojciech Maciej Legiec, MD<sup>6</sup>, Ludek Pour, MD<sup>7</sup>, Ivan Spicka<sup>8</sup>, Tamas Masszi<sup>9</sup>, Vadim Anatolievich Doronin, MD<sup>10</sup>, Jiri Minarik, MD PhD<sup>11</sup>, Galina Salogub<sup>12,13</sup>, Yulia Alexeeva<sup>14,15</sup>, Antonio Lazzaro<sup>16</sup>, Vladimir Maisnar<sup>17</sup>, Gabor Mikala, MD PhD<sup>18</sup>, Stefan Norin, MD PhD<sup>19</sup>, Marcus Thuresson<sup>20</sup>, Anna Bergan<sup>19</sup>, Jakob Obermüller<sup>19</sup>, Roman Hajek, MD<sup>21</sup>, Maria-Victoria Mateos<sup>22</sup>, Paul G. Richardson, MD<sup>23</sup>, Pieter Sonneveld, MD PhD<sup>24</sup>

<sup>1</sup>KG Jebsen Center for B Cell Malignancies,, University of Oslo, Oslo, Norway

<sup>2</sup>Department of Clinical Therapeutics, National and Kapodistrian University of Athens, School of Medicine, Athens, Greece

<sup>3</sup>General Hospital Evangelismos, Athens, Greece

<sup>4</sup>Medical University of Lodz, Lodz, Poland

<sup>5</sup>Carol Davila University of Medicine and Pharmacy, Bucharest, Romania

<sup>6</sup>St. John of Dukla Oncology Center of Lublin Land, Department of Hematology and Bone Marrow Transplantation, Lublin, POL

<sup>7</sup>Department of Internal Medicine, University Hospital Brno, Brno, Czech Republic

<sup>8</sup>Charles University Hospital Kralovske Vinohrady, Prague, Czech Republic

<sup>9</sup>Department of Internal Medicine and Hematology, Semmelweis University, Budapest, Hungary

<sup>10</sup>Department, State Budget Healthcare Institution of Moscow, City Clinical Hospital #40 of Moscow Healthcare Department, Moscow, Russian Federation

<sup>11</sup>Department of Hemato-Oncology, Faculty of Medicine and Dentistry, Palacky University and University Hospital Olomouc, Olomouc, Czech Republic

<sup>12</sup>V.A. Almazov National Medical Research Centre, St. Petersburg, Russian Federation

<sup>13</sup>V.A. Almazov Chemotherapy of Oncohematology Diseases and Bone Marrow Transplantation Department #2, St. Petersburg, Russian Federation

<sup>14</sup>V.A. Almazov National Medical Research Centre, Saint Petersburg, RUS

<sup>15</sup>V.A. Almazov Chemotherapy of Oncohematology Diseases and Bone Marrow Transplantation Department #1, St. Petersburg, Russian Federation

<sup>16</sup>Division of Hematology and Bone Marrow Transplant Center, Hospital Guglielmo da Saliceto, PIACENZA PC, ITA

<sup>17</sup>4th Department of Medicine - Haematology, Charles University Hospital, Hradec Králové, CZE

<sup>18</sup>South-Pest Central Hospital, National Institute for Hematology and Infectious Diseases, Budapest, Hungary

<sup>19</sup>Oncopeptides AB, Stockholm, SWE

<sup>20</sup>Oncopeptides AB, Stockholm, Sweden

<sup>21</sup>Department of Hematooncology, University Hospital Ostrava, Ostrava, Czech Republic

<sup>22</sup>Institute of Cancer Molecular and Cellular Biology, University Hospital of Salamanca, Salamanca, Spain

<sup>23</sup>Dana-Farber Cancer Institute, Boston, MA

<sup>24</sup>Department of Hematology, Erasmus MC Cancer Institute, Rotterdam, Netherlands

**Background/Introduction:** Melphalan flufenamide (melflufen) is a first-in-class peptide-drug conjugate that targets aminopeptidases resulting in rapid release of alkylating agents inside tumor cells. Based on the phase 2 HORIZON study and supported by the phase 3, randomized, controlled OCEAN study, melflufen was approved in Europe for use in patients (pts) with triple-class refractory RRMM with  $\geq 3$  prior lines of therapy (LoTs) and without prior autologous stem cell transplantation (ASCT) or with a time to progression (TTP)  $> 36$  mo after prior ASCT. In the OCEAN study (NCT03151811), melflufen + dex showed superior progression-free survival (PFS) compared with pom + dex (6.8 vs 4.9 mo; hazard ratio [HR]: 0.79;  $P=0.032$ ); PFS benefit in the melflufen + dex group was mainly driven by pts who had not received prior ASCT. Overall survival (OS) trended in favor of melflufen + dex in pts without prior ASCT and favored pom + dex in pts with prior ASCT (Schjesvold et al.



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Figure 1. Overall Survival in the ITT Population

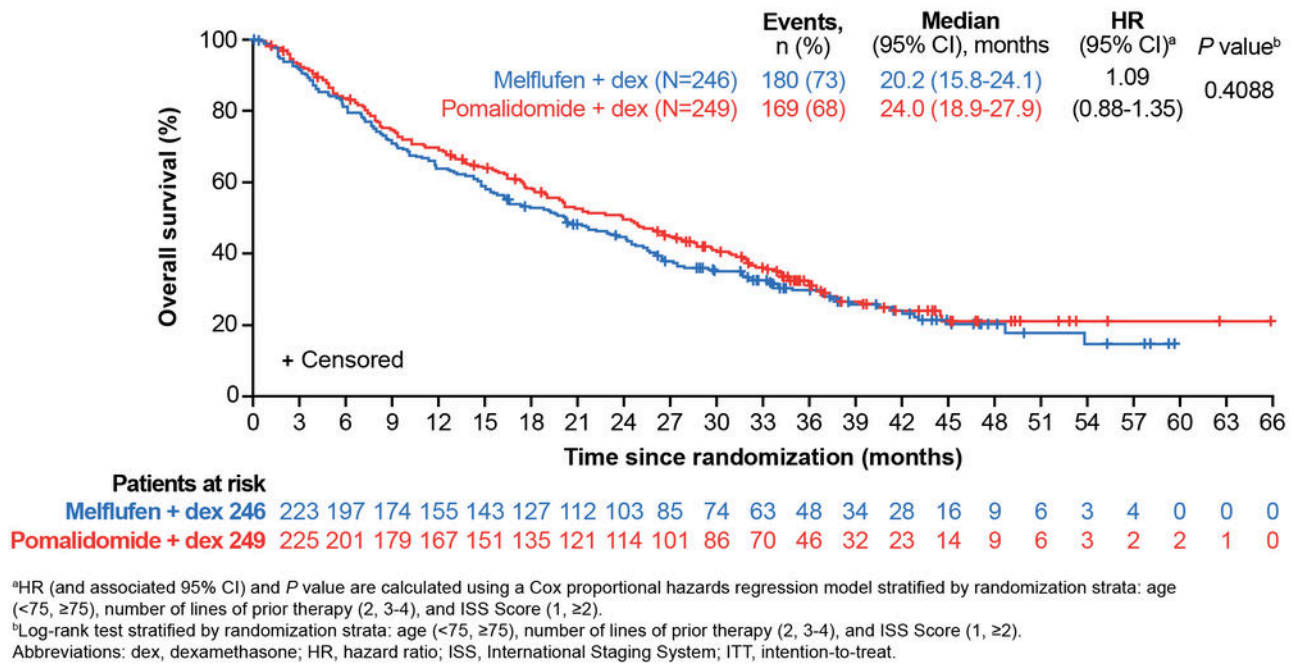


Figure 2. Overall Survival in Patients Without ASCT or Time to Progression >36 Months after ASCT

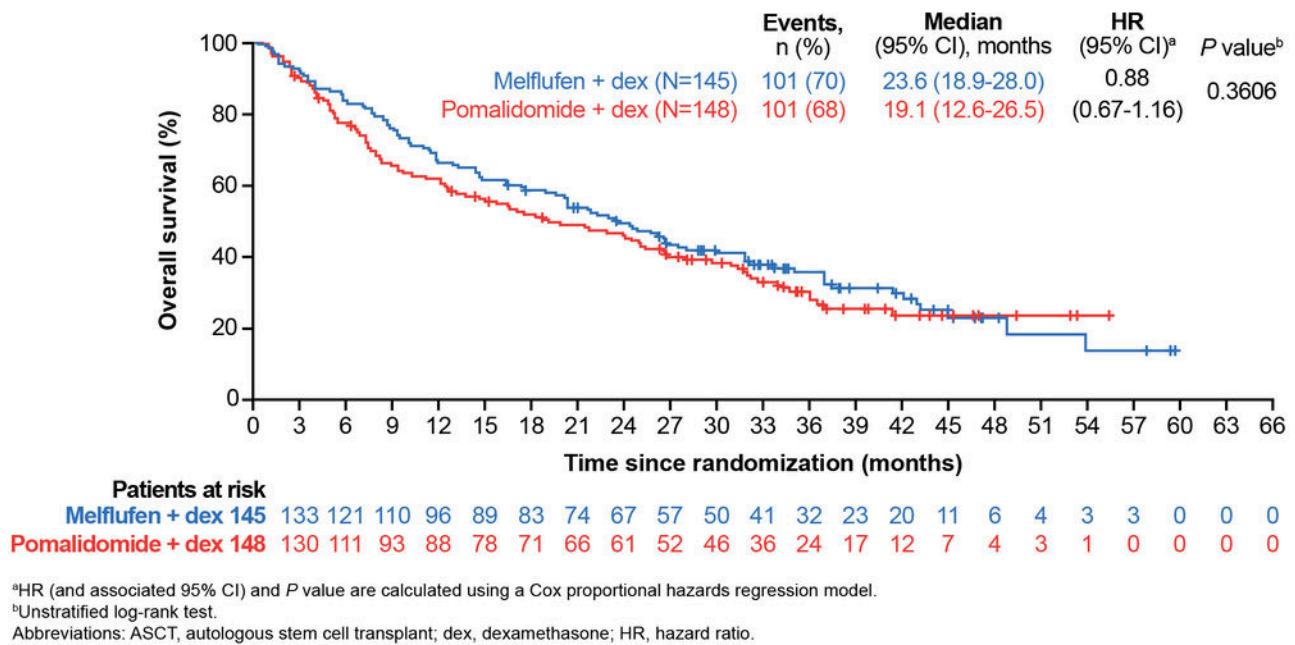


Figure 1

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