IBCL-460 Subcutaneous Epcoritamab With Rituximab + Lenalidomide (R^2) in Patients With Relapsed or Refractory (R/R) Follicular Lymphoma (FL)

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IBCL-429

Prevalence of B-Cell Chronic Lymphoproliferative Disorders at a Large Tertiary Care Center in India

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Context: Chronic lymphoproliferative disorders (CLPD) are a heterogeneous group of diseases characterized by uncontrolled production of lymphocytes that cause monoclonal lymphocytosis, lymphadenopathy, bone marrow infiltration, and specific immunophenotypic profile. CLPDs are relatively uncommon in Asian populations, constituting around 2% of all leukemias. The frequency of CLPDs shows geographical variations owing to distinct genetic or environmental factors that play a role in the development of these diseases. **Objective:** To determine the frequency and distribution of various B-cell CLPDs (B-CLPDs) diagnosed at a large tertiary care center in north India. **Design, Setting, and Participants:** We conducted a retrospective analysis of all patients diagnosed with B-CLPD at the All India Institute of Medical Sciences, New Delhi, between the years 2015 and 2019 to determine the prevalence, frequency, and distribution of B-CLPD in our patient population. The diagnosis of B-CLPD was based on morphologic and immunophenotypic criteria proposed by the World Health Organization (WHO) in 2008. **Results:** A total of 439 patients were diagnosed with B-CLPD at our center with a median age of 57 years, and male:female ratio was 2.5:1. Chronic lymphocytic leukemia (CLL)/small lymphocytic leukemia was the most common form, constituting 58.31% of all. Other B-CLPDs identified in our cohort were follicular lymphoma (FL) 13.43%, mantle cell lymphoma (MCL) 6.83%, marginal zone lymphoma 6.37%, lymphoplasmacytic lymphoma/Waldenström macroglobulinemia 2.51%, mucosa-associated lymphatic tissue lymphoma 2.05%, hairy cell leukemia 1.59%, prolymphocytic leukaemia 0.68% and rest 8.6% were B-CLPD unclassified. **Conclusions:** This is one of the largest studies from India. CLL is the most common B-CLPD followed by FL and MCL. **Keywords:** IBCL, CLPD, India, CLL, B-Cell, prevalence

IBCL-460

Subcutaneous Epcoritamab With Rituximab + Lenalidomide (R^2) in Patients With Relapsed or Refractory (R/R) Follicular Lymphoma (FL): Update from Phase 1/2 Trial

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Context: R/R FL is associated with a poor prognosis and remains incurable; thus, better treatment options are needed. Epcoritamab is a subcutaneously administered CD3xCD20 bispecific antibody that has shown substantial antitumor activity in R/R FL. **Objective:** Evaluate safety and efficacy of epcoritamab with R^2 in patients with R/R FL in arm 2 of a phase 1/2 open-label trial (EPCORE NHL-2; NCT04663347). **Patients:** Adults with R/R CD20+ FL were included. As of December 1, 2021, 30 patients (median age, 68 y) had enrolled. **Interventions:** Patients received subcutaneous epcoritamab (QW, cycle [C] 1–3; Q2W, C4–9; Q4W, C≥10 up to 2 y) + R^2 for 12 cycles of 28 d. Step-up dosing and corticosteroid prophylaxis were required. **Results:** Of the 30 patients (epcoritamab 24 mg, n=3; 48 mg, n=27), 21 (70%) had stage IV disease and 20 (67%) had FLIPI scores 3–5. Median (range) number of prior lines of therapy was 1 (1–5), 30% had primary refractory disease, and 40% had disease progression within 24 mo after starting first-line treatment. At a median (range) follow-up of 5.1 mo (0.8–12.3), 25 patients (83%) remained on treatment; 5 patients discontinued treatment due to progression (n=2), AEs (n=2), or consent withdrawal (n=1). Common treatment-emergent AEs (TEAEs) of any grade (G) included infections (57%), injection-site reactions (50%), constipation (37%), fatigue (37%), and neutropenia (37%). CRS events occurred in 15 patients (50%; G1–2 43%, G3 7%), primarily in C1. All CRS events resolved; 3 patients were treated with tocilizumab, and 1 patient discontinued treatment due to CRS. One patient experienced G2 ICANS. No fatal TEAEs occurred. Overall response rate for the 27 evaluable patients was 100%; 93% had a complete metabolic response (CMR) and 7% had a partial metabolic response by PET-CT. As of the data cut, the longest duration of response was 7.0+ mo and ongoing. **Conclusions:** Subcutaneous epcoritamab + R^2 exhibits promising efficacy, including a high CMR rate, in patients with R/R FL. The safety profile was consistent with prior data. Updated data will be presented. **Funding:** This study was funded by Genmab A/S and AbbVie. **Keywords:** IBCL, bispecific, follicular lymphoma, hematologic malignancy, non-Hodgkin lymphoma, Phase I/II