

Operational metrics for the ELAINE 2 study combining a traditional approach with a just-in-TIME model



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In the spring 2022, Sibel Blau, MD, President and CEO of the Quality Cancer Care Alliance Network and medical Director of Northwest Medical Specialties, worked with Matthew Cooney, MD, Vice President of Therapeutic Development at Tempus, to share how Sermonix Pharmaceuticals used a traditional patient recruitment approach with Tempus' clinical research network, called the Tempus TIME Trial Program®, to meet Sermonix's accrual goal for a phase 2 interventional study faster than anticipated.

ELAINE 2 (NCT04432454) included 29 patients with previously treated metastatic breast cancer with ER+/HER2- with acquired ESR1 mutation who were treated with Lasofoxifene 5 mg daily and Abemaciclib 150 mg twice daily.

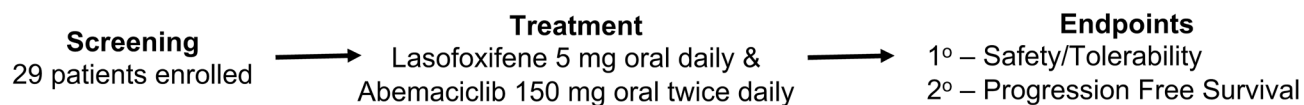
Dr. Blau presented this work at the 2022 ASCO Annual Meeting. In case you missed it, we are summarizing what you need to know below.



Matthew Cooney, MD

VP, Therapeutic
Development, Tempus

The ELAINE 2 Study Design



Inclusion Criteria

Postmenopausal women
Advanced or metastatic ER+/HER2- breast cancer
ESR1 mutations
Progression after 1st or 2nd lines hormone treatment
Largely 3 to 4L population;
Prior fulvestrant - 72%; Prior chemo - 50%

Additional Endpoints

- Clinical benefit rate (CBR)
- Objective response rate (ORR)
- Duration of response (DoR)
- Time to response
- Steady-state PK



Study period
9 Months



Sermonix
Pharmaceuticals



[ClinicalTrials.gov](https://clinicaltrials.gov/ct2/show/study/NCT04432454)
NCT04432454

Results presented ASCO 2022 Poster Discussion Monday June 6th 11:30AM-1:00PM: Abstract 1022

2022 ASCO
ANNUAL MEETING

#ASC022

PRESENTED BY:
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Twenty-nine participants enrolled in the ELAINE 2 study. The study's inclusion criteria were:

- Postmenopausal women with advanced or metastatic ER+/HER2- breast cancer
- ESR1 mutation and progression after first- or 2nd-line hormonal treatment
- Primarily third- to fourth-line patient populations

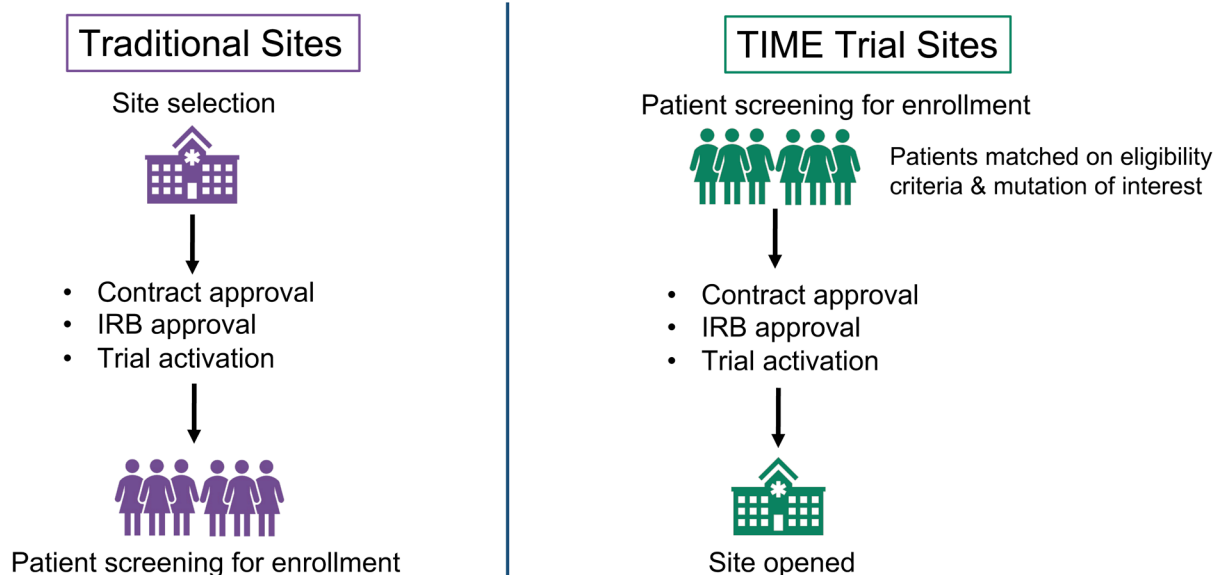
The patients' prior treatment:

- > 70% received a hormone therapy (fulvestrant)
- 50% of patients had prior chemotherapy before fulvestrant

The study's primary endpoints were safety and tolerability. Its secondary endpoint included progression-free survival.

[We invite you to review the full clinical trial data.](#)

Clinical Site Establishment for the ELAINE 2 Study



There were two different operational models for the ELAINE 2 study.

The first is the traditional academic medical center model. In this paradigm:

- A hospital or physician is first selected to participate in the study.
- Then, the prospective clinical trials team must successfully complete an extensive process of contractual approval, IRB approval, and trial activation.
- Patients are then screened for enrollment, generally only after the trial is open.

The second model is the Tempus TIME Trial Program. Tempus identifies patients across hundreds of U.S. hospitals for clinical trials. **As a result, Tempus can activate a new site for a patient in less than 14 days.**

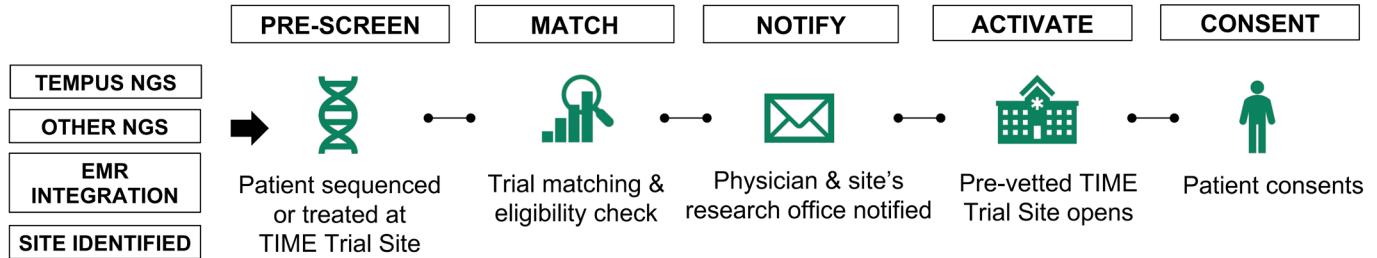
Participating Sites – TIME Trial & Traditional

- Mayo Clinic Jacksonville, FL
- Mayo Clinic Rochester, MN
- Ohio State University, OH
- MD Anderson Cancer Center, TX
- Cleveland Clinic, OH
- University of Alabama Birmingham, AL
- Northwest Medical Specialties, WA
- Oncology Consultants, TX
- St. Joseph Health Medical Group, CA
- Mary Crowley Cancer Research, TX
- Illinois Cancer Care, IL
- Yuma Regional Medical Center, AZ
- Beacon Medical Group, IN
- Compassionate Cancer Care Medical Group, CA
- New Jersey Cancer Care and Blood Disorders, NJ
- Hematology Oncology Associates of Fredericksburg, MD



In ELAINE 2, **TIME Trial sites were community-based oncology practices** and the traditional approach was academic medical centers.

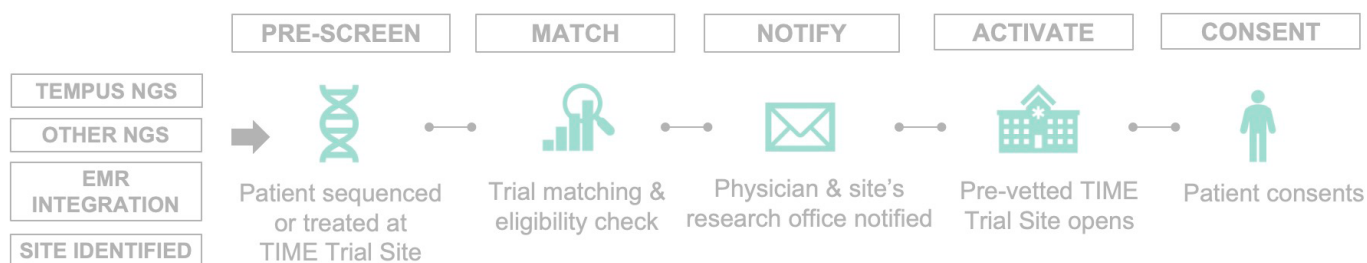
TIME Trial Operational Model



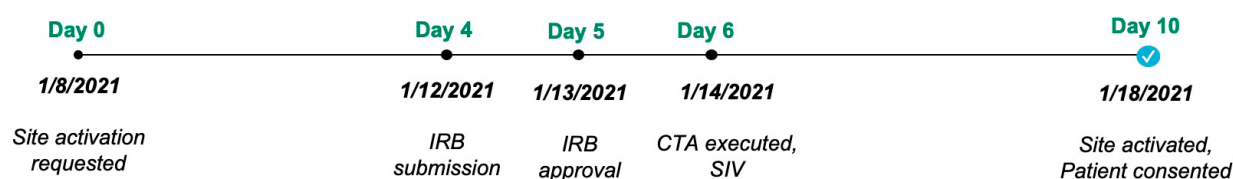
The TIME Trial Program is designed to achieve appropriate patient matching and rapid site activation. [The program has four key components:](#)

- Cancer patients are sequenced by Tempus or other labs and clinical data is abstracted.
- Tempus initially matches patients' clinical and molecular data to a trial's I/E criteria.
- Tempus notifies a TIME Trial site of a patient's match to a trial, so the patient can be further evaluated.
- After eligibility is confirmed, the patient is enrolled into trial at a TIME Trial site.

TIME Trial Operational Model



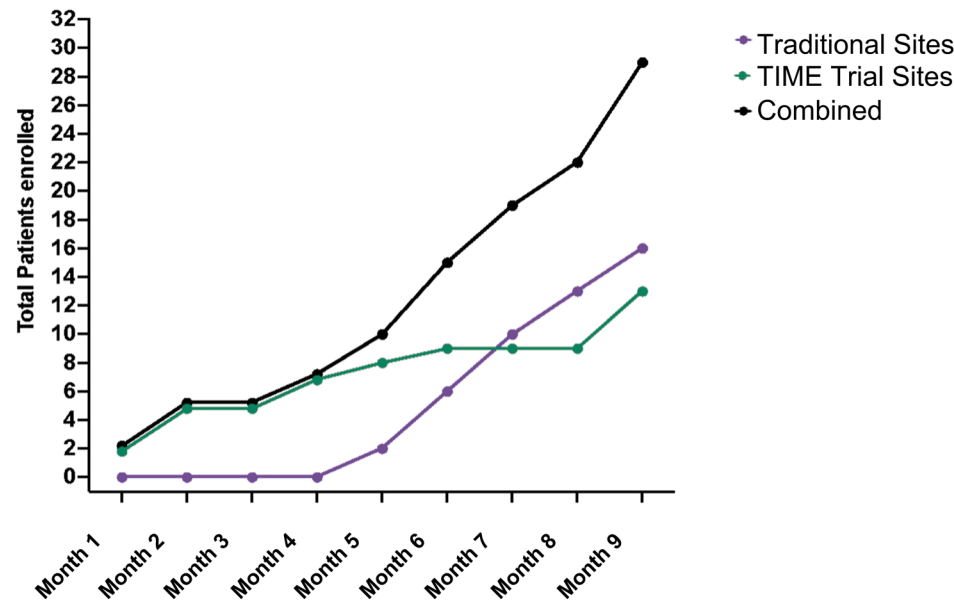
Example - Actual timeline of trial activation



One example of ELAINE 2 trial activation, included a TIME Trial site [opening within 10 business days](#):

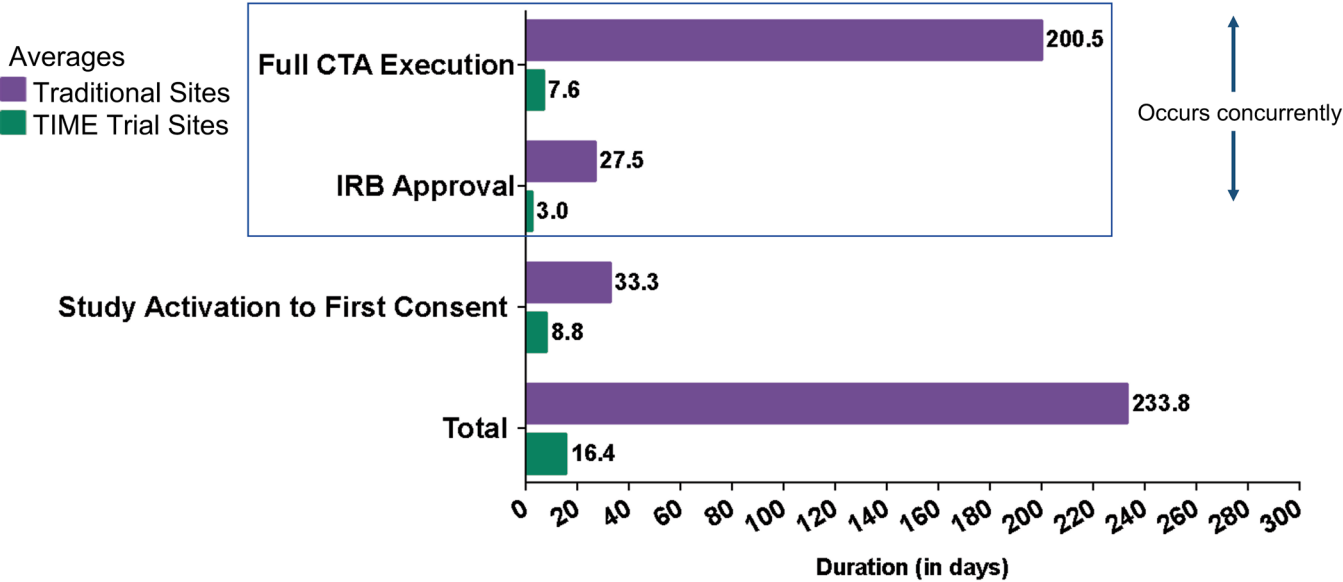
- Day 0: Tempus requested a practice to activate its site.
- Day 4: Tempus submitted the IRB.
- Day 5: The IRB was approved.
- Day 6: The site initiation visit occurred.
- Day 10: Tempus activated the site, and the site enrolled the first patient.

The ELAINE 2 Study Total Patient Enrollment



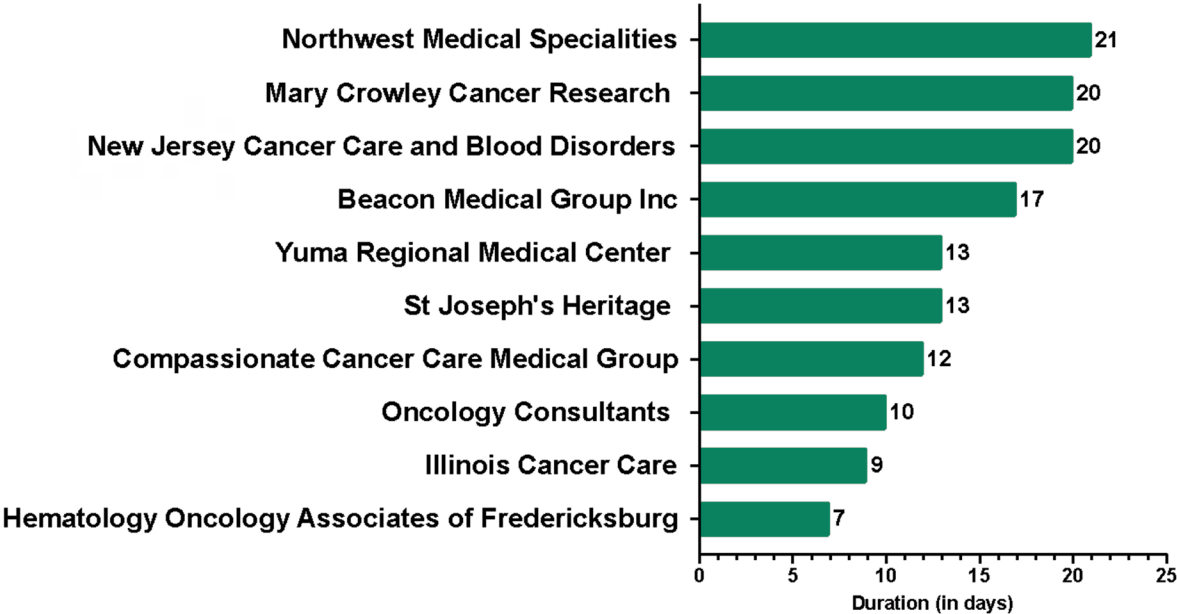
TIME Trial sites [opened four months earlier](#) and enrolled the first seven patients prior to any Traditional sites.

The ELAINE 2 Site Activation Timeline to First Consent



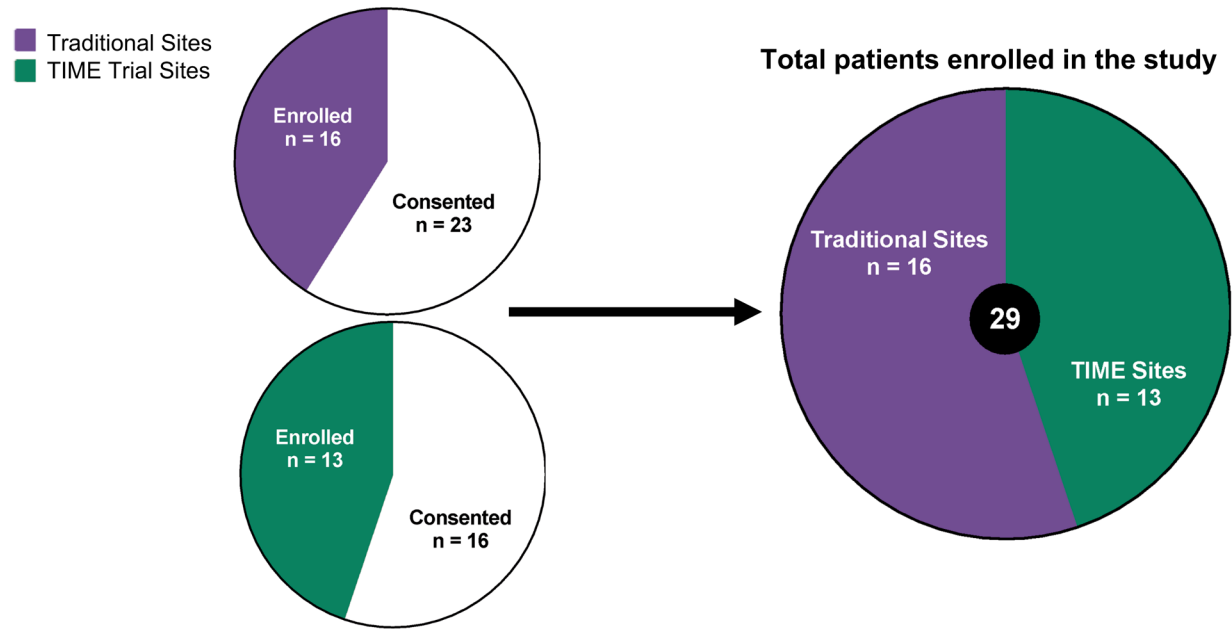
The site activation timeline through the first patient consent was 16 days for the TIME Trial Program, compared to 234 days for the traditional approach.

Activation Duration For The TIME Trial Sites



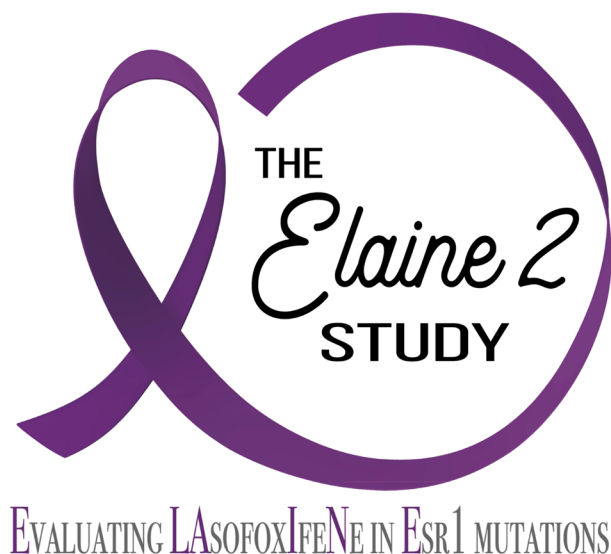
It took 7 to 21 days to activate each TIME Trial site.

The ELAINE 2 Study Consents And Enrollments



The number of patient consents were similar between the traditional academic medical center approach and the TIME Trial Program (23 vs.16 patients consented; 16 vs.13 patients enrolled).

The ELAINE 2 Study Key Takeaways



1. TIME Trial – Open first, enrolled first

TIME Trial sites opened and enrolled patients
~115 days before traditional sites

2. Traditional – Enrolled more

Traditional sites enrolled more patients than
TIME Trial sites

3. Traditional + TIME Trial



Higher number of patients enrolled

Reduction in overall trial enrollment duration

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Key takeaways from this ELAINE 2 study:

- TIME Trial sites opened and enrolled patients earlier.
- Both recruitment approaches enabled the clinical research sponsor to meet its accrual goal faster than anticipated.

Contact Tempus to discuss this important approach to patient recruitment with one of our clinical research experts.

Tempus is grateful to the team that led and contributed to this important clinical research.

Acknowledgements

Traditional Sites

- Halle Moore, MD (Cleveland Clinic)
- Mathew Cherian, MD (Ohio State University)
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- Ciara O'Sullivan, MD (Mayo Clinic)
- Alvaro Moreno-Aspitia, MD (Mayo Clinic- Jacksonville)
- Senthil Damodaran, MD (MDACC)

TIME Trial Sites

- Sibel Blau, MD (Northwest Medical Specialties, PLLC)
- Julio Peguero, MD (Oncology Consultants)
- Ian Anderson, MD (St. Joseph Health)
- Minal Barve, MD (Mary Crowley Cancer Research)



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TEMPUS

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Acknowledgements – TIME Trial & Traditional Sites

- Mayo Clinic Jacksonville, FL
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- Traditional Sites
- TIME Trial Sites

