Dear STTR Members,

Happy Thanksgiving. We are so grateful to work for faculty who dedicate their lives to cancer research and clinical care. To keep us all connected, here are several clinical trials across the Fred Hutch Cancer Consortium. We have over 13,000 community followers on social media and will highlight them there. If you have a specific patient you think would be interested in a trial, please refer them to the named faculty member or feel free to contact me personally.

Warmly,

Desert Horse-Grant & Team

FIND TRIALS ONLINE

www.seattlecca.org/clinical-trials/clinical-trials.cfm

Bladder Cancer

AN OPEN-LABEL, MULTICENTER, EXPANDED ACCESS PROGRAM FOR MPDL3280A IN PATIENTS WITH PD-L1-POSITIVE LOCALLY ADVANCED OR METASTATIC UROTHELIAL BLADDER CANCER AFTER FAILURE WITH PLATINUM-CONTAINING CHEMOTHERAPY

DR. EVAN YU

This is an open-label, multicenter, single-arm, expanded access program [EAP] designed to provide MPDL3280A to patients with PD-L1-positive locally advanced or metastatic UBC that has progressed during or following a platinum-containing regimen.
Brain Cancer

DOSE-INTENSIVE CHEMOTHERAPY IN COMBINATION WITH CHEMOPROTECTED AUTOLOGOUS STEM CELLS IN TREATING PATIENTS WITH MALIGNANT GLIOMAS

DR. HANS-PETER KIEM

This investigator-initiated phase I/II trial studies the side effects and the best dose of temozolomide when given together with radiation therapy, carmustine, O6-benzylguanine, and an autologous stem cell transplant in treating patients with newly diagnosed glioblastoma multiforme or gliosarcoma. Giving chemotherapy or radiation therapy before a peripheral stem cell transplant stops the growth of cancer cells and colony-stimulating factors helps stem cells move from the bone marrow to the blood so they can be collected and stored. Chemotherapy or radiation therapy is then given to prepare the bone marrow for the stem cell transplant. The stem cells are then returned to the patient to replace the blood-forming cells that were destroyed by the preimplantation chemotherapy and radiation therapy.

Breast Cancer

A RANDOMIZED PHASE II STUDY OF TRASTUZUMAB EMTANSINE (T-DM1) VS. PACLITAXEL IN COMBINATION WITH TRASTUZUMAB FOR STAGE I HER2-POSITIVE BREAST CANCER (ATEMPT TRIAL)

DR. VK GADI

Patients with small but aggressive HER2 positive tumors will be randomized to standard chemotherapy plus trastuzumab versus trastuzumab-emantansine. The overall goal is to de-escalate therapy for these women to have a chemotherapy option for management.

Colorectal Cancer

A TRIAL OF MAINTENANCE ADAPT THERAPY WITH CAPECITABINE AND CELECOXIB IN PATIENTS WITH METASTATIC COLORECTAL CANCER

DR. EDWARD LIN

This investigator-initiated phase II trial studies how well capecitabine and celecoxib with or without radiation therapy works in treating patients with colorectal cancer that is newly diagnosed or in metastatic disease previously treated with fluorouracil. Drugs used in chemotherapy, such as capecitabine, stop the growth of tumor cells, either by killing the cells or preventing cell division. Celecoxib may stop the growth of tumor cells by blocking enzymes needed for cell growth. Radiation therapy uses high-energy x-rays to kill tumor cells. Giving capecitabine and celecoxib together with radiation therapy may kill more tumor cells.
Head & Neck Cancer

**TRANSORAL SURGERY FOLLOWED BY LOW-DOSE OR STANDARD-DOSE RADIATION THERAPY WITH OR WITHOUT CHEMOTHERAPY IN TREATING PATIENTS WITH HPV POSITIVE STAGE III-IVA OROPHARYNGEAL CANCER**

**DR. EDUARDO MENDEZ**

This randomized phase II trial studies how well transoral surgery followed by low-dose or standard-dose radiation therapy works in treating patients with human papillomavirus (HPV) positive stage III-IVA oropharyngeal cancer. Radiation therapy uses high-energy x-rays to kill tumor cells. Drugs used in chemotherapy work in different ways to stop the growth of tumor cells, either by killing the cells, by stopping them from dividing, or by stopping them from spreading. Giving radiation therapy with chemotherapy may kill any tumor cells that remain after surgery. It is not yet known how much extra treatment needs to be given after surgery.

Lung Cancer

**GENETICALLY MODIFIED T CELLS IN TREATING PATIENTS WITH STAGE III-IV NON-SMALL CELL LUNG CANCER OR MESOTHELIOMA**

**DR. SYLIVA LEE**

This Investigator-Initiated trial represents the first collaboration between immunology researchers at the Fred Hutch and Seattle Cancer Care Alliance. This trial is exploring the safety and efficacy of treating patients with genetically modified T cells. This trial is for patients with either NSCLC or mesothelioma. Mesothelioma is a rare cancer and this is an exciting opportunity to investigate a possible role for immunotherapy in this disease with limited treatment options.

Ovarian Cancer

**A STUDY OF RUCAPARIB AS SWITCH MAINTENANCE FOLLOWING PLATINUM-BASED CHEMOTHERAPY IN PATIENTS WITH PLATINUM-SENSITIVE, HIGH-GRADE SEROUS OR ENDOMETRIOID EPITHELIAL OVARIAN, PRIMARY PERITONEAL OR FALLOPIAN TUBE CANCER (ARIEL3)**

**DR. ELIZABETH SWISHER**

Patients enrolled into this study will be stratified into 3 groups based on gene mutations identified in their tumor tissue. The purpose of this study is to evaluate patient response to maintenance treatment with rucaparib (PARP inhibitor) versus placebo. Response to treatment will be analyzed based on homologous recombination (HR) status of tumor samples. PARP inhibitors are a novel class of drugs that have proven activity in recurrent ovarian cancer. This trial is looking at improvement of survival with maintenance oral PARP inhibitor.
Pancreatic Cancer

**PEGPH20 PLUS NAB-PACLITAXEL PLUS GEMCITABINE COMPARED WITH NAB-PACLITAXEL PLUS GEMCITABINE IN SUBJECTS WITH STAGE IV UNTREATED PANCREATIC CANCER**

**DR. SUNIL HINGORANI**

This is a phase II study of the safety and treatment effect in 237 subjects (2:1 randomization, PAG:AG), preceded by two run-in phases (the first to assess safety and tolerability and a second to assess a new formulation of PEGPH20), 16 subjects total (randomized 3:1). This study is the first randomized study evaluating a novel approach of targeting the pancreas tumor stroma as an avenue to increase chemotherapy efficacy. The stroma targeting therapy, PEGPH20, undoubtedly is one of the most exciting and promising novel agents in pancreas adenocarcinoma at this time.

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Prostate Cancer

**A PILOT STUDY OF DOCETAXEL AND CARBOPLATIN FOR TREATMENT OF PATIENTS WITH METASTATIC, CASTRATION RESISTANT PROSTATE CANCER CONTAINING BIALLELIC INACTIVATION OF GENES IN THE BRCA1/2 PATHWAY**

**DR. HEATHER CHENG**

This is a pilot study of the combination of docetaxel and carboplatin in patients whose tumors are found to contain biallelic inactivation of genes in the BRCA1/2 pathway, including BRCA2, BRCA1 and ATM.

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Sarcoma

**A PILOT STUDY TO DETERMINE THE SAFETY OF GLA-SE IN PATIENTS WITH METASTATIC SARCOMA REQUIRING RADIATION FOR SUPERFICIAL**

**DRS. ROBIN JONES AND SETH POLLACK**

This investigator-initiated, pilot phase I clinical trial studies the side effects of toll-like receptor 4 (TLR4) agonist glucopyranosyl lipid A (GLA)-stable-emulsion (SE) when given together with radiation therapy in treating patients with sarcoma that has spread to other parts of the body or cannot be removed by surgery. TLR4 agonist GLA-SE may stimulate the immune system to kill sarcoma cells. Radiation therapy uses high energy x rays to kill tumor cells. Giving TLR4 agonist GLA-SE with radiation therapy may be a better way to treat sarcoma.

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FIND ADDITIONAL TRIALS ONLINE - www.seattlecca.org/clinical-trials/clinical-trials.cfm
Cancer Resources Database

A COMPREHENSIVE DATABASE OF NO- AND LOW-COST RESOURCES FOR PATIENTS, CAREGIVERS, FRIENDS AND FAMILY

In the age of social media, it’s not uncommon to see posts in our feeds of a friend, family member, or acquaintance diagnosed with cancer. We recognize that as patients or loved ones of those with cancer, it’s easy to feel overwhelmed and knowing where to go for resources can be challenging. Knowing this, our interns saw an opportunity to help and began thinking of ways in which STTR could make it easier for patients to get the support they need.

There are a tremendous number of wonderful organizations who seek to aid and support those dealing with cancer. However they can often be difficult and time-consuming to find. Our hope was that as an organization with time and resources, we were in a unique position to create something that would be able to serve cancer patients both locally and nationally.

If you would like to use this database in your patient care, searches can be printed out for patients or caregivers as a reference document.

We are open to suggestions of additional content or feedback on the ease of use of the web interface. Please email questions, comments and suggestions to STTRCancer@fredhutch.org.