CLINICAL TRIAL FACT SHEET
ENDEAVOR
ClinicalTrials.gov Identifier: NCT01568866

Phase III Study with Carfilzomib and Dexamethasone versus Velcade and Dexamethasone for Relapsed Multiple Myeloma Patients

**Trial Description:** A global, phase III, multi-center, randomized, open-label trial with more than 200 sites in approximately 25 countries for patients with multiple myeloma whose disease has progressed after at least one, but not more than three, prior therapeutic regimens. Target enrollment is 888 patients. Patients must not have primary refractory disease (that is, their best response to all prior therapies must have been better than stable disease or progressive disease). Patients are allowed to have received prior carfilzomib (Kyprolis™) or bortezomib (Velcade®) as long as they had at least a PR (partial response) to prior therapy with either drug, and at least a 6-month treatment-free interval since receiving either carfilzomib or bortezomib. Patients may receive maintenance therapy with drugs that are not in the proteasome inhibitor class (that is, neither carfilzomib nor bortezomib) during this 6-month treatment-free interval.

**Trial Objectives:**

**Primary:** To compare progression-free survival (PFS) in patients with multiple myeloma relapsed after 1 to 3 prior therapies treated with carfilzomib + dexamethasone or bortezomib + dexamethasone.

**Secondary:** Overall survival, overall response rate, duration of response, neuropathy events, health-related quality of life, safety and tolerability.

**Assigned Interventions:**

- Arm 1 (experimental arm): carfilzomib (Kyprolis) + dexamethasone
- Arm 2 (comparator arm): bortezomib (Velcade, either IV or SQ, but preferably by the same route of administration throughout treatment) + dexamethasone

**Key Inclusion Criteria:**

- Multiple myeloma with relapsing or progressing disease at study entry
- Patients must have evaluable multiple myeloma with at least one of the following (assessed within 21 days prior to randomization)
  - Serum m-protein ≥ 0.5 g/dL, or
  - Urine m-protein ≥ 200mg/24 hours, or
  - In patients without detectable serum or urine m-protein, serum free light chain (SFLC) > 100 mg/L (involved light chain) and an abnormal kappa/lambda ratio (> 4.1 or < 2.1), or
  - For IgA patients whose disease can only be reliably measured by serum quantitative immunoglobulin, qIgA must be ≥ 750 mg/dL (0.75 mg/dL)
- Patients must have documented ≥ PR to at least one prior therapy
- Patients must have received 1, but not more than 3, prior treatment regimens or lines of therapy for multiple myeloma (induction therapy followed by stem cell transplant and consolidation or/maintenance therapy will be considered as one line of therapy)
- Males and females ≥ 18 years of age
- Specific requirements are also included for liver, heart, bone marrow, and kidney function
- Female patients of child-bearing potential must have a negative serum pregnancy test within 21 days prior to randomization and agree to use an effective method of contraception during study and for 3 months after last dose; males must use an effective barrier method of contraception during study and for 3 months after last dose if sexually active with a female of child-bearing potential

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Key Exclusion Criteria:
- Multiple myeloma of IgM subtype
- Glucocorticoid therapy within 14 days prior to randomization
- POEMS syndrome
- Plasma cell leukemia or circulating plasma cells $\geq 2 \times 10^9/L$
- Waldenström’s Macroglobulinemia
- Patients with known amyloidosis
- Chemotherapy with approved or investigational anticancer therapeutics within 21 days prior to randomization
- Patients randomized or previously randomized in any other Onyx-sponsored phase III trial
- Focal radiation therapy within 7 days prior to randomization; radiation therapy to an extended field involving a significant volume of bone marrow within 21 days prior to randomization
- Immunotherapy within 21 days prior to randomization
- Major surgery (excluding kyphoplasty) within 28 days prior to randomization
- Active congestive heart failure, symptomatic ischemia, or conduction abnormalities uncontrolled by conventional intervention; myocardial infarction within 4 months prior to randomization
- Acute active infection requiring systemic antibiotics, antiviral (except for hep B surface antigen) or antifungal agents within 14 days prior to randomization
- Known HIV, hepatitis C, and/or hepatitis B (with exceptions)
- Patients with known cirrhosis
- Second malignancy within the past 3 years (with exceptions)
- Patients with myelodysplastic syndrome
- Significant neuropathy (Grades 3 to 4, or Grade 2 with pain) within 14 days prior to randomization
- Female patients who are pregnant or lactating
- Contraindication to any of the required concomitant drugs or supportive treatments
- Ongoing graft-versus-host disease
- Patients with pleural effusions requiring thoracentesis or ascites requiring paracentesis within 14 days prior to randomization

Recruiting Locations and Contacts:
Onyx Medical Information 877-ONYX-121 (877-669-9121) medinfo@onyx.com

United States  
California 
Central Coast Medical Oncology Santa Maria, California 93454  
Contact: medinfo@onyx.com  
Providence St. Joseph Medical Center Burbank, California 91505  
Contact: medinfo@onyx.com  
Colorado 
Colorado Blood Cancer Institute Denver, Colorado 80218  
Contact: medinfo@onyx.com  
Florida 
Medical Associate of Brevard (MAB) Oncology/Hematology Melbourne, Florida 32935  
Contact: medinfo@onyx.com  
Indiana 
Hematology Oncology of Indiana, PC Indianapolis, Indiana, 46260  
Maryland 
Center for Cancer and Blood Disorders Bethesda, Maryland 20817  
Contact: medinfo@onyx.com  
Associates in Oncology/Hematology, P.C. Rockville, Maryland 20850  
Contact: medinfo@onyx.com  
Ohio 
Gabrail Cancer Center Research Canton, Ohio 44718  
Contact: medinfo@onyx.com  
Christ Hospital Cancer Center Cincinnati, Ohio 45219  
Contact: medinfo@onyx.com  
Texas 
Scott & White Healthcare Temple, Texas 76508  
Contact: medinfo@onyx.com  
Australia 
The Alfred Hospital Melbourne, Victoria, Australia  
Contact: medinfo@onyx.com  
Calvary Mater Newcastle Waratah, New South Wales, Australia  
Contact: medinfo@onyx.com  
Belgium 
Ziekenhuis Netwerk Antwerpen Antwerp, Belgium  
Contact: medinfo@onyx.com  
Canada, New Brunswick 
Saint John Regional Hospital Saint John, New Brunswick, Canada  
Contact: medinfo@onyx.com  
Canada, Ontario 
Windsor Regional Hospital Windsor, Ontario, Canada  
Contact: medinfo@onyx.com  
France 
Hospital Claude Huriez Lille Cedex, Nord Pas-De Calais, France  
Contact: medinfo@onyx.com  
Centre Hospitalier Lyon Sud Pierre Bénite Cedex, France  
Contact: medinfo@onyx.com  
Centre Hospitalier de la Cote Basque Bayonne, Aquitaine, France  
Contact: medinfo@onyx.com  
New Zealand 
Auckland Clinical Studies Grafton, Auckland, New Zealand  
Contact: medinfo@onyx.com  
Christchurch Hospital Christchurch, New Zealand  
Contact: medinfo@onyx.com  
Middlemore Hospital Otahuhu, Auckland, New Zealand  
Contact: medinfo@onyx.com  
North Shore Hospital North Shore City, Auckland, New Zealand  
Contact: medinfo@onyx.com

Additional trial sites actively opening. Call the Hotline or check the IMF website for the most up-to-date listings