

ADVIGO 1016: Figitumumab (CP-751,871) (IGF-1R Inhibitor) plus Paclitaxel/Carboplatin vs. Paclitaxel/Carboplatin in First-line Therapy for Locally Advanced/Metastatic Non-Adenocarcinoma Non–Small Cell Lung Cancer (NSCLC)

<p>INTRODUCTION</p>	<ul style="list-style-type: none"> • Non-small cell lung cancer (NSCLC) is a difficult disease to treat, particularly in the metastatic setting. In these patients, the five-year survival rates are only two percent.¹ Despite decades of research and testing of numerous chemotherapy regimens, the prognosis for most patients with metastatic NSCLC remains poor. • Figitumumab is a selective fully human monoclonal antibody against the insulin-like growth factor-1 receptor (IGF-1R) pathway. It is believed that through this inhibition, figitumumab may block one of the key signaling pathways in cancer cells that leads to uncontrolled growth and survival of tumor cells. • The Insulin-like Growth Factor (IGF) pathway is a fundamental mechanism of cell survival. Activation of this pathway by the binding of the growth factor IGF-1 to the receptor IGF-1R, triggers a complex signaling cascade that stimulates cell growth, proliferation, differentiation and drives survival. • IGF-1R is increasingly recognized by the medical community as a relevant target for investigation in cancer research. Several other companies are pursuing this target with either monoclonal antibody or tyrosine kinase inhibitors. Figitumumab is the first IGF-1R compound to initiate a Phase III clinical trial. To date, more than 1,000 patients have participated in figitumumab clinical trials in multiple tumor types.
<p>RATIONALE</p>	<ul style="list-style-type: none"> • Based on the results of a Phase II study, Pfizer has initiated a Phase III clinical trial program for figitumumab in NSCLC, a disease with a significant unmet medical need.
<p>OBJECTIVES</p>	<ul style="list-style-type: none"> • Primary: <ul style="list-style-type: none"> ○ Determine whether the addition of figitumumab in combination with carboplatin plus paclitaxel prolongs survival (overall survival) in patients with locally advanced (Stage IIIB with pleural effusion) or metastatic (Stage IV or recurrent) NSCLC of non-adenocarcinoma histology (e.g. squamous, large cell, adenosquamous). • Secondary: <ul style="list-style-type: none"> ○ Assess progression-free survival in each arm ○ Evaluate the safety and tolerability of figitumumab in combination with carboplatin and paclitaxel ○ Assess the overall response rate in each arm ○ Assess health-related quality of life (HRQoL) outcomes and health status in both treatment arms
<p>STUDY DESIGN</p>	<ul style="list-style-type: none"> • Phase III, open-label, randomized (1:1), two-arm study <ul style="list-style-type: none"> ○ Arm A: Patients will receive figitumumab in combination with carboplatin and paclitaxel intravenously every 21 days for up to six cycles. Patients with stable disease or better may receive single-agent figitumumab after end of chemotherapy every 21 days for up to 17 cycles. ○ Arm B: Patients will receive carboplatin and paclitaxel intravenously every 21 days for up to six cycles.

For additional information, please visit: <http://www.pfizer.com/asco>.

SELECTED ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Selected Inclusion Criteria <ul style="list-style-type: none"> ○ Histologically confirmed NSCLC with a primary histology of squamous, large-cell, adenosquamous, or other variants of adenosquamous carcinoma ○ Advanced NSCLC with documented stage IIIB (with pleural effusion), stage IV or recurrent disease ○ No prior systemic therapy for advanced metastatic/recurrent NSCLC (except for adjuvant chemotherapy completed ≥ 12 months prior to randomization) ○ ECOG performance status score 0 or 1 ○ Stable treated or asymptomatic untreated brain metastasis ○ History of thrombosis and anticoagulation is allowed; no exclusion for hemoptysis • Selected Exclusion Criteria <ul style="list-style-type: none"> ○ NSCLC with a primary histology of adenocarcinoma, histological/cytological evidence of small-cell or carcinoid lung cancer, or unknown or unspecified (not otherwise specified) NSCLC histology ○ Previous or concurrent therapy with any IGF-1R inhibitor or growth hormone agonist or antagonist ○ Symptomatic central nervous system metastases ○ Uncontrolled hypertension, uncontrolled diabetes (HbA1c level $>8\%$), unstable angina, myocardial infarction or symptomatic congestive heart failure within past 12 months, or serious uncontrolled cardiac arrhythmia ○ Prior surgery or radiation therapy completed <3 weeks prior to randomization
NUMBER OF PATIENTS	<ul style="list-style-type: none"> • An estimated 820 patients will be enrolled from approximately 60 research sites in the United States and 120 ex-U.S. sites.
PATIENT ENROLLMENT INFORMATION	<p>For more information, contact the Pfizer Oncology Clinical Trial Information Services.</p> <ul style="list-style-type: none"> • Physicians interested in participating or referring a patient: <ul style="list-style-type: none"> www.pfizeroncology.com/clinicaltrials Please call toll-free (US) 1-800-528-6628 Outside the US: + 1-646-307-8070 E-mail: PfizerHPTrials@emergingmed.com • Patients interested in participating: <ul style="list-style-type: none"> www.pfizercancertrials.com Please call toll-free (US): 1-877-369-9753 Outside the US: +1-646-277-4066 E-mail: PfizerCancerTrials@emergingmed.com

¹ American Cancer Society. How is Non-Small Cell Lung Cancer Staged? Available at www.cancer.org. Accessed April 8, 2008.