Cancer Research Consortium of West Michigan
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FAST FACTS

S1937 - A Phase III Randomized Trial of Eribulin (NSC #707389) with Gemcitabine Versus Standard of Care (Physician's Choice) for Treatment of Metastatic Urothelial Carcinoma Refractory to, or Ineligible for, Anti PD1/PDL1 Therapy.

ELIGIBILITY CRITERIA

Disease Related Criteria

1. Participant must have predominant histologically and cytologically proven urothelial carcinoma in a metastatic site.

2. Participant must have evidence of metastatic urothelial carcinoma based on CT orMRI within 28 days prior to registration.

3. Participant must have had progression of disease following prior therapy at the discretion of the treating investigator.

4. Participants must not require immediate CNS-specific treatment, in the opinion ofthe treating investigator if they have active brain metastases (defined as new or progressive brain metastases) or leptomeningeal disease.

Prior/Concurrent Therapy Criteria

1. Participant must have had prior systemic therapy in metastatic setting* that:

    a. Included enfortumab vedotin

    Any systemic therapy provided in adjuvant, neoadjuvant, or chemoradiation settings for urothelial carcinoma can be considered to be in metastatic setting, if the last day of treatment was within 12 monthsprior to the diagnosis of metastatic disease.

    b. Included a PD1/PDL1 antibody

    NOTE: Under the discretion of the treating physician, participants who are not candidates for PD1/PDL1 antibody systemic therapy are allowed.

2. Participant must have completed any planned surgery or radiation therapy prior toregistration.

3. Participant must not have unresolved toxicities from prior surgeries or radiation therapy > Grade 1 at the time of registration.

Clinical/Laboratory Criteria

1. Participant must be ≥ 18 years of age.

2. Participant must have Zubrod Performance Status 0-2 (see Section 10.0).

3. Participant must have history and physical examination within 28 days prior to registration.

4. Participant must have complete blood count (CBC), complete metabolic panel including liver function tests, and LDH obtained within 28 days prior to registration.

5. Participant must have adequate kidney function as evidenced by measured or calculated creatinine clearance ≥ 20 mL/min within 28 days prior to registration.

$$\text{Calculated creatinine clearance} = \frac{(140 - \text{age}) \times \text{wt (kg)} \times 0.85 \text{ (if female)}}{72 \times \text{creatinine (mg/dl)}}$$

6. Participant must have adequate hepatic function documented by either AST or ALT ≤ 3 x IULN within 28 days prior to registration. If both AST and ALT are performed,both must be ≤ 3 x IULN. For participants with liver metastases, AST or ALT mustbe ≤ 5 x IULN.

7. Participant must be on effective anti-retroviral therapy and have undetectable viralload at their most recent viral load test and within 6 months prior to registration if they are known to have human immunodeficiency virus (HIV)-infection.

8. Participants must have undetectable HBV viral load within 28 days prior to registration if participant has known chronic hepatitis B virus (HBV) infection.

9. Participants with a known history of hepatitis C virus (HCV) infection must have anundetectable HCV viral load within 28 days prior to registration.

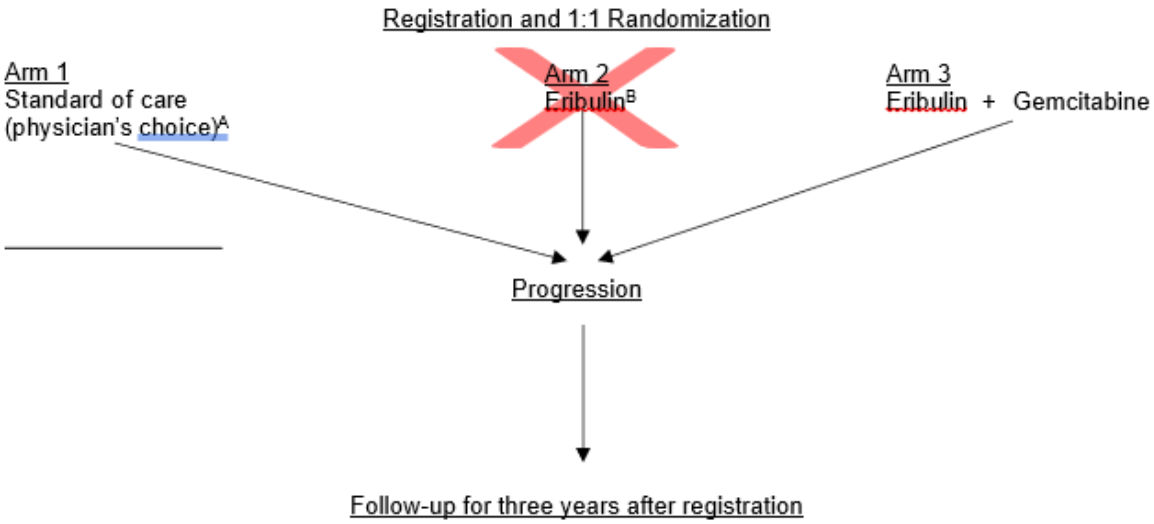
10. Participants may have a prior or concurrent malignancy provided the natural history or treatment does not have the potential to interfere with the safety or efficacy assessment of the investigational regimen per the opinion of the treating investigator.

11. Participants must not be planning to take strong or moderate CYP3A or CYP2C8 inhibitors or inducers if randomized to Arm 1 and SOC regimen chosen is Paclitaxel or Docetaxel. Participants receiving strong or moderate CYP3A or CYP2C8 inducers must discontinue use at least 2 weeks prior to randomization.

12. Participant must not have a known history of QTc prolongation.

13. Participants must not be pregnant or nursing due to the risk of harm to a fetus or nursing infant. Women and men of reproductive potential must have agreed to use an effective contraceptive method for the course of the study and 6 months (females) or 3.5 months (males) after the last dose. A woman is considered to beof "reproductive potential" if she has had menses at any time in the preceding 12 consecutive months. In addition to routine contraceptive methods, "effective contraception" also includes heterosexual celibacy and surgery intended to prevent pregnancy (or with a side-effect of pregnancy prevention) defined as a hysterectomy, bilateral oophorectomy or bilateral tubal ligation. However, if at anypoint a previously celibate participant chooses to become heterosexually active during the time period for use of contraceptive measures outlined in the protocol, he/she is responsible for beginning contraceptive measures.

SCHEMA



[A]Regimen choices are listed in Section 7.1.
[B]**Effective with the distribution of Revision #3, Arm 2 (eribulin) is permanently closed to accrual.**