

Padcev® (enfortumab vedotin-ejfv) – Expanded indication

- On July 9, 2021, <u>Seagen and Astellas Pharma announced</u> the regular FDA approval and expanded indication for <u>Padcev (enfortumab vedotin-ejfv)</u>, for the treatment of adult patients with locally advanced or metastatic urothelial cancer (mUC) who:
 - Have previously received a programmed death receptor-1 (PD-1) or programmed death-ligand 1 (PD-L1) inhibitor and platinum-containing chemotherapy, or
 - Are ineligible for cisplatin-containing chemotherapy and have previously received one or more prior lines of therapy.
- Padcev was previously approved via accelerated approval for the treatment of adult patients with locally advanced or mUC who have previously received a PD-1 or PD-L1 inhibitor, and a platinumcontaining chemotherapy in the neoadjuvant/adjuvant, locally advanced or metastatic setting.
- The FDA decision to convert accelerated approval to regular approval was based on data from EV-301, an open-label, randomized study in 608 patients with locally advanced or mUC who received prior treatment with a PD-1 or PD-L1 inhibitor and platinum-based chemotherapy. Patients were randomized to receive Padcev on days 1, 8 and 15 of a 28-day cycle or investigator's choice of chemotherapy. The major efficacy measures were overall survival (OS), progression free survival (PFS), and overall response rate (ORR).
 - Median OS was 12.9 months and 9.0 months for Padcev and chemotherapy, respectfully (hazard ratio [HR] 0.70, 95% CI: 0.56, 0.89; p = 0.0014).
 - Median PFS was 5.6 months and 3.7 months for Padcev and chemotherapy, respectfully (HR 0.62, 95% CI: 0.51, 0.75; p < 0.0001).
 - ORR was 40.6% and 17.9% for Padcev and chemotherapy, respectfully (p < 0.0001).
- Additionally, the efficacy of Padcev was evaluated in Cohort 2 of EV-201, a single-arm, multi-cohort study in 89 patients with locally advanced or mUC who received prior treatment with a PD-1 or PD-L1 inhibitor, and were cisplatin ineligible and did not receive platinum in the locally advanced or metastatic setting.
 - ORR was 51% (95% CI: 39.8, 61.3). Median duration of response was 13.8 months (95% CI: 6.4, not estimable).
- The recommended dose of Padcev is 1.25 mg/kg (up to a maximum of 125 mg for patients ≥ 100 kg) administered as an intravenous infusion over 30 minutes on days 1, 8 and 15 of a 28-day cycle until disease progression or unacceptable toxicity.



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