

## Antitumor Effects with Lanreotide Autogel/Depot (LAN) in Patients with Metastatic Enteropancreatic (EP) Neuroendocrine Tumors (NETs): Interim Results of the CLARINET Extension Study

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**Background:** The CLARINET core study showed that the long-acting somatostatin analog LAN significantly prolonged progression-free survival (PFS) vs. placebo in patients with metastatic grade 1 or 2 (Ki-67 <10%) EP-NETs ( $p < 0.001$ ); median LAN PFS not reached during the 24-month study (vs. 18.0 months with placebo). We report safety and PFS data from the planned interim analysis of the single-arm (LAN) open-label extension (OLE; NCT00842348).

**Methods:** Patients entering CLARINET had: metastatic well/moderately differentiated non-functioning EP-NETs with Ki-67 <10%; no prior somatostatin analog or other medical therapy use in last 6 months; documented disease-progression status. Patients were randomized to LAN 120 mg (n=101) or placebo (n=103) every 28 days for 96 weeks or until death/progressive disease (PD; according to RECIST 1.0). Patients at continuing study centers could enter the OLE if they had: stable disease (SD) at core-study end *or* PD on core-study placebo. Primary OLE objective was safety; secondary OLE objective was to investigate further LAN efficacy.

**Results:** Eighty-eight CLARINET patients (LAN arm, n=41; placebo arm, n=47) had entered the OLE at interim analysis. At core-study enrollment, 96% of OLE patients had SD; 38% had pancreatic and 39% midgut primary tumors. Median LAN PFS (time from randomization in CLARINET to death/PD in either study) was reached in the OLE: 32.8 months. For patients with PD on CLARINET placebo, median time to further PD after switching to LAN in the OLE was 14.0 months. During the OLE, 27% who continued LAN vs. 40% who switched to LAN had treatment-related adverse events (TRAE). The most frequent TRAE was diarrhea. No new safety concerns were identified.

**Conclusions:** CLARINET OLE data suggest longer-term LAN treatment is well tolerated. The results also help indicate the longer-term benefits of LAN in EP-NET patients with SD, and suggest LAN has antitumor effects in EP-NET patients with PD.