



# Promotion Centre Léon Bérard

Portfolio études onco sarcomes - Juin 2021



# REGOSTA

A Randomized Phase II, placebo-controlled, multicenter study evaluating the efficacy and safety of regorafenib as maintenance post first-line treatment in patients with bone sarcomas

Centre porteur: Centre Léon Bérard

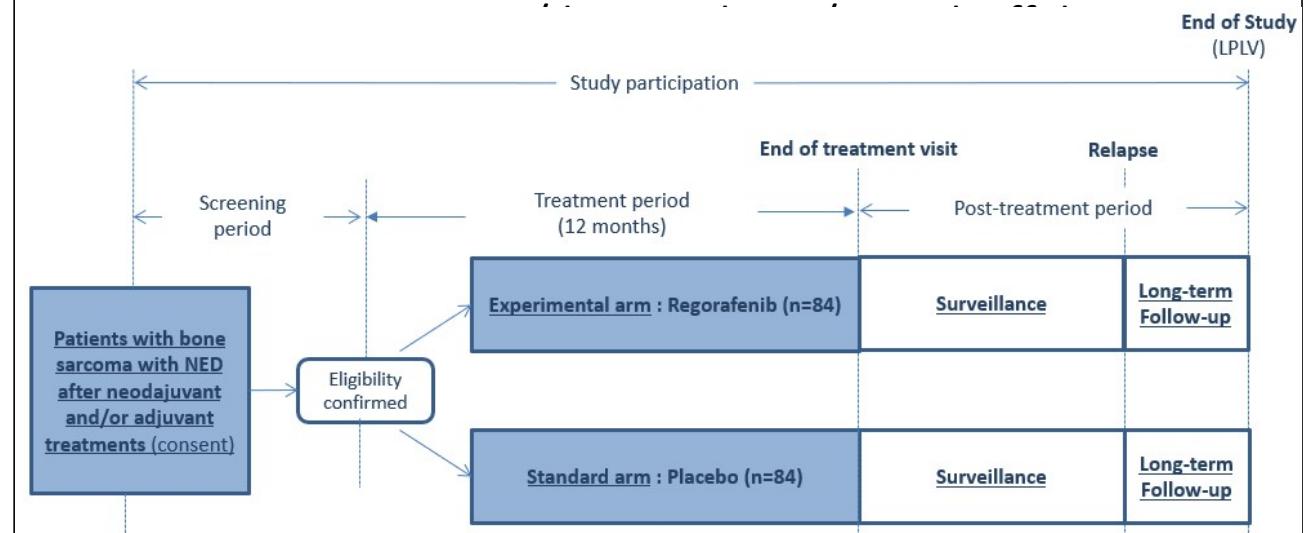
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## Centres participants

- Centre Léon Bérard, Lyon
- Hôp. Jean Minjoz, Besançon
- Institut de Cancérologie Lucien Neuwirth, Saint Priest en Jarez
- CHU la Timone, Marseille
- Institut Curie, Paris
- Institut Bergonié, Bordeaux
- Centre Oscar Lambret, Lille
- Institut de Cancérologie de Lorraine, Vandoeuvre-lès-Nancy
- Institut de Cancérologie de l'Ouest, Saint-Herblain
- IUCT, Toulouse
- Gustave Roussy, Villejuif
- APHP, Hôp. Cochin
- Institut de Cancérologie de Montpellier
- Institut de Cancérologie Strasbourg Europe
- CHRU Strasbourg
- CHU Poitiers (à déclarer)

## Molécules, schéma de traitement

- **Randomization 1:1 to receive either REGORAFENIB or PLACEBO** during 12 months, as maintenance therapy, after completed neoadjuvant and adjuvant chemotherapy
- Stratification on Risk factor : High Risk vs Low Risk



**Indication** : en situation de maladie (localisée/métastatique) invisible - non mesurable, après la fin de la chimiothérapie adjuvante

## Principaux critères d'inclusion

- Histologically confirmed diagnosis of **Osteosarcoma** (conventional-intramedullary/central High grade, small cell, telangiectatic or high-grade surface OS),
- **Bone sarcoma** other than Ewing sarcoma, chondrosarcoma, chordoma)
- Availability of FFPE block
- **CONFIRMED Complete remission of NO EVIDENCE of disease** (after complete resection of mets for met disease)
- Prior treatment for **localized or metastatic** disease for OS or other Bone Sarcoma should include the following : Neoadjuvant chemotherapy (with histological response), Local procedure and (complete surgical resection or radiotherapy if tumor unresectable), Adjuvant chemotherapy
  - Age  $\geq 16$  years\*\*,
- ECOG PS  $\leq 2$  (Karnofsky  $\geq 70\%$  for  $< 18$  yrs)

## Endpoints , Statistics

**Primary end-point : RFS**

**Secondary end-points :** Time to Treatment Failure (TTF), Overall Survival, Quality of Life (EORTC QLQ-C30), tolerance profile (NCI-CTC AE version 5), Compliance to study treatment

**RFS at 3yrs at 55% ( $H_0$ ),  $\alpha = 5\%$  (2-sided),**

**HR= 0.50,  $H_1 = 74.6\%$**

A total of 66 events would have 80% power to show a significant improved RFS

66 events required to perform analysis,

➔ in total total 168 patients to be included : 84 in arm A/ 84 in am B

# *Etat d'avancement*

## **Etat du recrutement**

- Nombre de patients inclus : 7
- Nombre de patients restant à inclure : 168
- Fermeture prévue le : 11.02.2023 (First patient + 36 months)

## **Problème/ Amendement à venir**

- **Amendement :**
  - Inclusion des patients de au moins 12 ans (actuellement âge de au moins 16 ans)
  - Ajout de sous-types histologiques (Ewing ...)