# Molecular Analysis for Therapy Choice (MATCH)

# MATCH Treatment Subprotocol U: VS-6063 (defactinib) in Patients with Tumors with NF2 Loss

### Fast Facts

Treatment: VS-6063 (defactinib) 400 mg BID until progression or unacceptable toxicity. Drug is provided.

### Eligibility Criteria

- 1. Patients must fulfill all eligibility criteria outlined in Section 3.1 of MATCH screening protocol.
- 2. Patients must have a tumor that harbors an inactivating mutation in NF2. See Appendix III of this subprotocol for a list of the NF2 mutations and corresponding Levels of Evidence.
- 3. Patients must have an electrocardiogram (ECG) within 8 weeks prior to treatment assignment and must have no clinically important abnormalities in rhythm, conduction or morphology of resting ECG (e.g. complete left bundle branch block, third degree heart block).
- 4. Patients with known left ventricular dysfunction must have ECHO or a nuclear study (MUGA or First Pass) within 4 weeks prior to treatment assignment and must not have left ventricular ejection fraction (LVEF) < institutional lower limit of normal (LLN). If the LLN is not defined at a site, the LVEF must be > 50% for the patient to be eligible.

*NOTE:* Pre-treatment LVEF determination in patients without known left ventricular dysfuction is NOT otherwise required.

- 5. Patients must not have known hypersensitivity to VS-6063 (defactinib) or compounds of similar chemical or biologic composition.
- 6. Patients must not have a history of upper GI bleeding, ulceration, or perforation within 12 months prior to the first dose of study drug.
- 7. Patients must not have known history of Gilbert's Syndrome.
- 8. Patient must not have a known history of stroke or cerebrovascular accident within 6 months prior to the first dose of VS-6063 (defactinib).
- 9. Patients with history of hypertension should be adequately controlled (BP < 140/90) with appropriate anti-hypertensive therapy or diet.
- Patients must not have prior treatment with a FAK inhibitor (eg. VS-6063 (defactinib) or GSK2256098) and must not be participating or have participated in the COMMAND trial of maintenance therapy of VS-6063 (defactinib) vs. placebo, for mesothelioma.
- 11. Patients must not be using drugs or foods that are known potent CYP3A4 or CYP2C9 inhibitors or inducers (See Appendix II of this subprotocol).

#### Actionable Mutations for Sub-Protocol EAY131-U

1. NF2 is a tumor suppressor gene. Inactivating deleterious mutations could occur anywhere in the coding regions. Instead of listing all possible deleterious mutations, we have implemented a function in MATCHBOX that can identify any point mutations creating stop codons that will lead to premature truncations or any insertions/deletions causing frameshifts, which are predicted to result in a non-functional or absent protein. Variants, including missense mutations, were not included for eligibility if there was a lack of adequate evidence that such variants resulted in loss of function in NF2 gene.

## **Pre-Study Parameters:**

1. History/Physical, Weight, Vitals, Performance Status

- 2. CBC/Diff/Plts, CMP
- 3. Pregnancy Test
- 4. ECHO/Nuclear Study
- 5. Radiologic Evaluation
- 6. Concomitant Medication