

## FAST FACTS

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S1937 - A Phase III Randomized Trial of Eribulin (NSC #707389) with or without 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

1. Disease Related Criteria
  - a. Participant must have predominant histologically and cytologically proven urothelial carcinoma in a metastatic site.
  - b. Participant must have evidence of metastatic urothelial carcinoma based on CT or MRI within 28 days prior to registration.
  - c. Participant must have had progression of disease following prior therapy at the discretion of the treating investigator.
  - d. Participants must not require immediate CNS-specific treatment, in the opinion of the treating investigator if they have active brain metastases (defined as new or progressive brain metastases) or leptomeningeal disease.
  
2. Prior/Concurrent Therapy Criteria
  - a. Participant must have received previous systemic treatment for metastatic urothelial carcinoma with either a platinum-based chemotherapy regimen, systemic PD1/PDL1 immunotherapy, an antibody drug conjugate such as, enfortumab vedotin or sacituzumab govitecan (through standard of care or a clinical trial) . There is no limit to the number of prior regimens patient may have received for urothelial carcinoma.
    - i. If participant is a candidate for a platinum-based chemotherapy, then participant must have previously received a platinum-based chemotherapy.
    - ii. If participant is a candidate for immunotherapy, then participant must have previously received immunotherapy. If participant is not a candidate for immunotherapy, then participant either: (a) must have had prior anti PD1/PDL1 antibody therapy; OR (b) must have not been a candidate for anti PD1/PDL1 antibody therapy in the opinion of the treating physician.
    - iii. Participant is eligible if platinum based chemotherapy and/or anti PDL/PDL1 antibody therapy was provided in perioperative setting before or after radical cystectomy and if there is evidence of progression to metastatic disease within 12 months of the last dose of therapy. For instance, a patient treated with ddMVAC in neoadjuvant setting, then radical cystectomy followed by adjuvant pembrolizumab on AMBASSADOR trial will meet the requirement for prior/concurrent therapy if progression of disease occurs within 12 months of discontinuation of pembrolizumab.
  - b. Participant must have received any planned surgery prior to registration.
  - c. Participant must not have progressed within 3 months following last dose of gemcitabine.
  - d. Participant must not have unresolved toxicities from prior surgeries or radiation therapy > Grade 1 at the time of registration to registration.
  
3. Clinical/Laboratory Criteria
  - a. Participant must be  $\geq 18$  years of age.
  - b. Participant must have Zubrod Performance Status 0-2 (see [Section 10.0](#)).
  - c. Participant must have history and physical examination within 28 days prior to registration.
  - d. Participant must have complete blood count (CBC), complete metabolic panel including liver function tests, and LDH obtained within 28 days prior to registration.

- e. Participant must have adequate kidney function as evidenced by measured or calculated creatinine clearance  $\geq 50$  mL/min within 28 days prior to registration.  
Calculated creatinine clearance =  $(140 - \text{age}) \times \text{wt (kg)} \times 0.85$  (if female)  
 $72 \times \text{creatinine (mg/dl)}$
  - f. Participant must have adequate hepatic function documented by either AST or ALT  $\leq 3 \times$  IULN within 28 days prior to registration. If both AST and ALT are performed, both must be  $\leq 3 \times$  IULN. For participants with liver metastases, AST or ALT must be  $\leq 5 \times$  IULN.
  - g. Participant must be on effective anti-retroviral therapy and have undetectable viral load 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.
  - h. Participants must have undetectable HBV viral load within 28 days prior to registration if participant has known chronic hepatitis B virus (HBV) infection.
  - i. Participants with a known history of hepatitis C virus (HCV) infection must have an undetectable HCV viral load within 28 days prior to registration.
  - j. 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.
  - k. 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.
  - l. Participant must not have a known history of QTc prolongation.
  - m. 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 be of "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 any point 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.
4. Specimen Submission Criteria
- a. Participants must be offered the opportunity to participate in specimen banking as outlined in [Section 15.1](#).

**SCHEMA**

