INTerpath

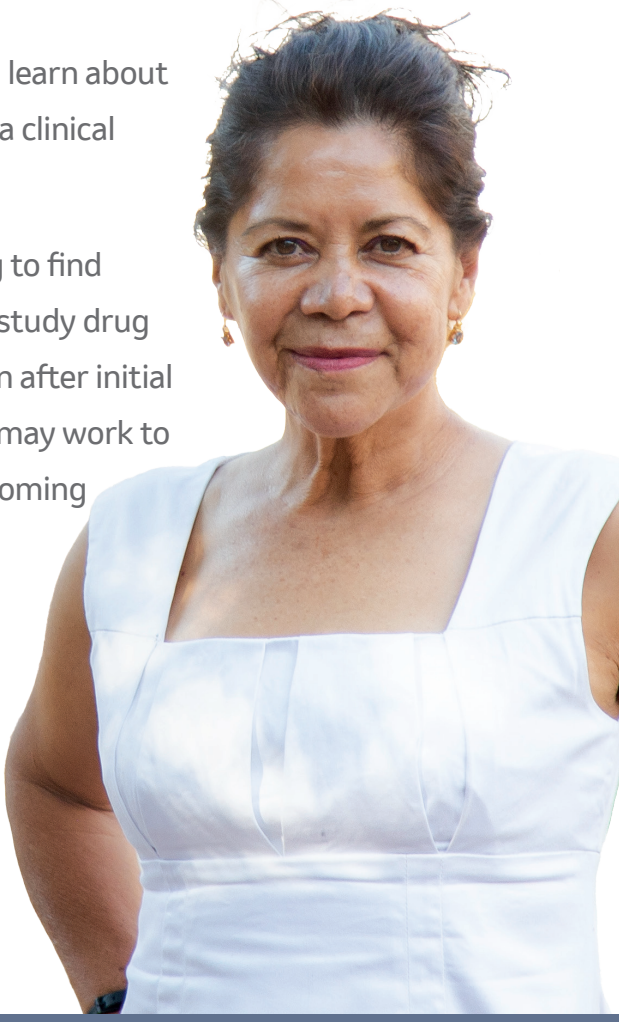
ONCOLOGY CLINICAL TRIALS

INTerpath 009

A clinical trial for
Early-Stage Non-Small Cell Lung Cancer (NSCLC)

In this brochure, you will learn about **early-stage NSCLC** and a clinical trial for this disease.

This clinical trial is trying to find out if an investigational study drug combination, when given after initial treatment and surgery, may work to help keep NSCLC from coming back or going to other areas in the body.



What is Early-Stage NSCLC?

There are two main types of lung cancer: non-small cell lung cancer and small cell lung cancer. About 8 out of 10 lung cancers are NSCLC. NSCLC is a fast-growing cancer that starts in your lungs and can spread to other organs. About 30% of newly diagnosed NSCLC cases are resectable, meaning the cancer can be surgically removed.

Not all lung cancers are treated the same way. Depending on the stage, which tells where your cancer is, the size, if and how far it has spread, and the results of tests on your cancer, the doctor will determine what treatment options are best for you.

What are the treatment options for early-stage NSCLC?

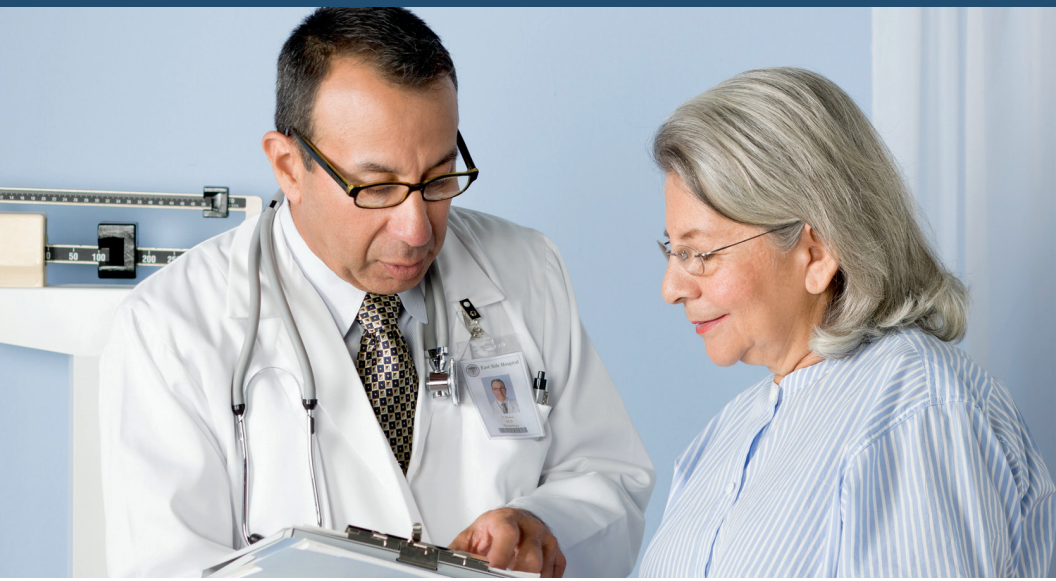
If you have early-stage NSCLC, your cancer care team will talk to you about treatment options.

Your options will depend on a few things:

- Your overall health
- The stage of your cancer
- The chance of the cancer coming back
- Side effects you may have from the treatment
- The chance of the treatment slowing down or stopping the cancer
- How long the treatment might help extend your life
- How much the treatment might help improve your symptoms

Your care team may offer you one or more of these options:

- **Local therapies** – treatment directed at the site of the cancer to destroy it
- **Targeted therapy** – treatment that works on specific cells to stop them from growing
- **Surgery** – removal of all or part of the cancer



- **Immunotherapy** – medicines that help your immune system fight the cancer
- **Chemotherapy** – medicine to kill cancer cells or stop them from growing
- **Radiation therapy** – treatment that uses beams of intense energy (like X-rays) to shrink or get rid of tumors. This would only be used to treat symptoms related to tumor growth.
- **Palliative care** – also called comfort care. This is special care to help ease pain and symptoms with a focus on the person's quality of life. This does not directly treat RCC, but it helps keep you as comfortable as possible
- **Clinical trials**, such as this one

Talk to your doctor about which treatment is right for you.

What is a clinical trial?

Clinical trials are research studies that help doctors find out if study drugs (alone or with other treatments) are safe and if they can help prevent, find or treat diseases or conditions. Clinical trials are carefully controlled research studies that are done to get a closer look at investigational treatments and procedures. Clinical trials are also called studies and both terms are used in this brochure to describe this clinical trial.

About this clinical trial

Why is this trial being done?

This trial is trying to find out if an investigational combination of study drugs, V940 plus pembrolizumab (pembro), may help to keep NSCLC from coming back or spreading to other areas of the body in patients with Stage 2, 3a, or 3b (N2)NSCLC. Researchers will also see what side effects may happen. This trial will compare V940 plus pembro to a placebo plus pembro. A placebo looks like a trial treatment, but it has no active ingredients.

This trial has three parts. The first part is the neoadjuvant part and occurs before surgery. The second part is the adjuvant part and occurs after surgery. The third part is the long-term follow-up part and occurs after the adjuvant part.

What are neoadjuvant and adjuvant treatments?

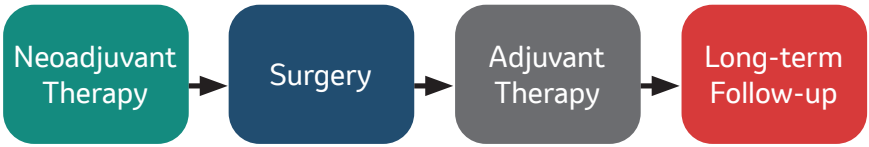
Neoadjuvant treatments are given before a main cancer treatment.

Adjuvant treatments are given after a main cancer treatment.

Both neoadjuvant and adjuvant treatments are meant to improve how well your main cancer treatment works. The main cancer treatment for early-stage NSCLC is surgery.

In this trial, the investigational drug combination of V940 and pembro is experimental and it is unknown if there are any benefits to receiving this investigational drug combinations in addition to the neoadjuvant, surgery, and adjuvant treatments.

Following the neoadjuvant and adjuvant parts, you may have ongoing scheduled visits during the long-term follow-up part. Long-term follow-up provides important information because this clinical trial is studying how well the study drugs work over-time to help to keep NSCLC from coming back or spreading to other areas of the body.



Who can join this trial?

To determine if you qualify to participate, there are certain rules you must meet to join:

- Have Stage 2, 3a, or 3b (N2)
- Be 18 years of age or older at the time of consent
- Be able to undergo surgery to remove the tumor
- Have not had other treatment for NSCLC

The study staff will do tests to see if you are able to join this trial. There may be other reasons why you cannot be in this trial. The study doctor or staff will discuss these with you as well as the possible benefits and risks of joining the trial.

What study drugs are being studied?

The trial is studying an investigational combination of study drugs. The study drugs being studied are:

- V940 (also known as mRNA-4157), in combination with pembrolizumab, both of which are types of **immunotherapy**
- **Placebo** with pembrolizumab
- Pembrolizumab has been approved by some health authorities to be used alone to treat certain stages and types of NSCLC after patients have had surgery and chemotherapy (chemo). It may not be approved in your country for your exact stage of NSCLC. It has not been approved for use with V940 to treat any type of cancer. V940 is experimental. It has been studied in clinical trials of other tumor types. However, it has not been approved to use alone or with pembro to treat any type of cancer.

Immunotherapy is a treatment that works with a person's immune system to fight disease, including some cancers. A **placebo** is something that looks like the study medicine but has no actual study medicine in it. The placebo for this study looks like V940.

Here is what researchers know or assume about how each study drug works on its own.

About V940

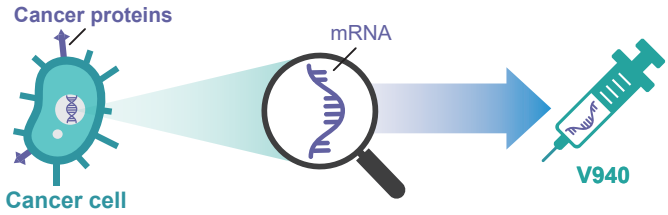
V940 is an investigational cancer therapy that has not been approved.

1. Every cancer has different mutations (changes) in its genes. V940 is made specifically for each person based on these gene mutations—in other words, it is individualized for each person.
2. Before a person gets V940, researchers find the cancer mutations by looking at the tumor. They then make mRNA to use in a dose of V940 made just for them (mRNA is genetic material that tells your body how to make proteins). The mRNA makes proteins that look like the cancer mutations.
3. When the person gets V940 as an injection into their muscle, the mRNA tells their body to make proteins that looks like the cancer mutations.
4. These proteins may help the immune system recognize and attack cancer cells with these mutations.

Another way to think about V940

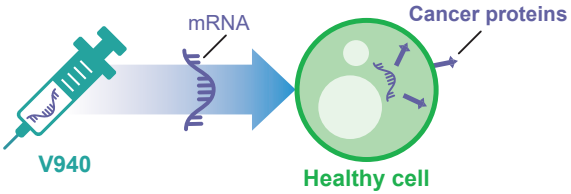
1

Researchers find gene mutations unique to a person's **cancer cells** that make **cancer proteins**. They then use these genes to make mRNA for **V940** that is unique to a person's cancer.



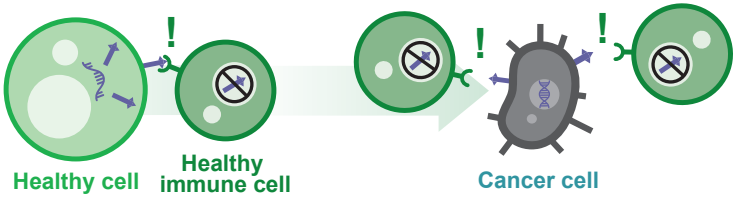
2

When **V940** gets in **healthy cells** in the body, the cells use the mRNA to make proteins like the **cancer proteins**.



3

The **cancer proteins** from the **healthy cells** may train **healthy immune cells** to find and attack the **cancer cells**.

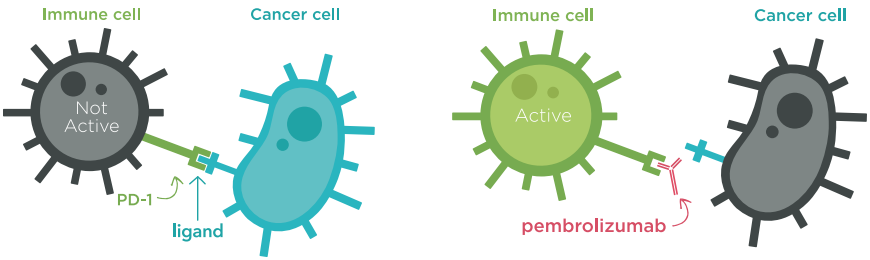


About pembrolizumab

1. A protein called PD-1 (on some of your immune system cells) sometimes binds with certain molecules called ligands (on some cancer cells)
2. When these bind, it turns off the immune system cell, which means it can't do its work to help protect you and attack cancer cells
3. This is where pembrolizumab comes in - this study drug binds with PD-1 and blocks PD-1 from binding with ligands
4. By blocking PD-1 from binding with ligands, pembrolizumab may help the immune system stay on so it can find and attack cancer cells

Another way to think about pembrolizumab

When PD-1 and ligands bind, it's like turning off the immune cell. This means that the immune cell will not do its work to attack cancer cells



If I join the trial, what treatment will I get?

If you meet all the study criteria, you will receive pembrolizumab plus chemotherapy before surgery in the neoadjuvant part.

After surgery, in the adjuvant part, you will be randomly assigned to 1 of the 2 groups. The study treatment you get depends on the group you are placed in:

- **Group 1** will get V940 (9 doses every 3 weeks after surgery) plus pembrolizumab (7 doses every 6 weeks)
- **Group 2** will get placebo (9 doses every 3 weeks) plus pembrolizumab (7 doses every 6 weeks after surgery)

You will have a:

- **50% chance of being in Group 1, and a**
- **50% chance of being in Group 2**

Neither you nor your study doctor will know which group you are in.

If I join, what will happen during trial visits?

You will visit the trial site on a regular schedule so that your doctors can see how the study drugs are working for you. During your trial visits, you might get:

- Tissue collection
- Physical exams
- Blood and urine (pee) tests
- Trial drugs
- Imaging scans, such as CT scans or MRIs

What tissue is collected and why?

If you are eligible and join the trial, the study doctor will ask you for tissue samples. Tissue, such as skin, hair, nails, blood, urine or tumors, are found in your body and are collected as they may help researchers understand diseases and find ways to prevent and treat them in people. For this study, your study doctor will collect tumor and blood tissue samples. These may be new tissue

samples, or they may ask to use tissue that was collected before. Tissue you provide for the study will be stored for research only and will continue to be tracked according to your study code number.

If a new tissue sample is collected for this study, the study doctor will explain how it will be collected and any risks. Some risks include:

- Low blood pressure
- Pain
- Bruising
- Redness
- Swelling
- Scarring
- Infection

There are also risks related to data privacy (please see frequently asked questions below) and the release of personal information from your health records.

Frequently asked questions about tissue collection

Will I find out the results of the research using my tissue?

This will depend on the reason for the tissue sample. You may see the results of your biomarker test (such as a biopsy or blood test) if it is required for you to join, or impacts your current participation in, the clinical trial. Results of tests performed only for research purposes will generally not be provided.

How is my privacy protected?

To protect your privacy, we take steps to limit the risk of anyone identifying you:

- We label your tissue with a number instead of your name
- We remove your name, address, phone number, social security number, date of birth and anything else that could directly identify you before researchers get access to your records or tissue sample.

If I agree to take part in the study, can I change my mind later?

Yes. You can change your mind about taking part in the trial at any time. Here's how:

1. Contact your doctor and tell them you do not want to be in the study anymore.
2. The doctor will contact the study Sponsor.

Tissue samples obtained up until the point of you withdrawing from the trial will continue to be retained to support the trial research.

If you join the study, your study doctor will need to stay in contact with you during the entire trial including the long-term follow-up part. More information about the study and the risks of joining will be provided as part of the informed consent process.

Study Team Contact Details:

Your questions and notes:

To learn more about this study,

talk to your study doctor, the contact below, or visit

www.merckoncologyclinicaltrials.com