Enhertu® (fam-trastuzumab deruxtecan-nxki) – New indication

- On April 5, 2024, Daiichi Sankyo and AstraZeneca announced the FDA approval of Enhertu (fam-trastuzumab deruxtecan-nxki), for the treatment of adult patients with unresectable or metastatic HER2-positive (IHC 3+) solid tumors who have received prior systemic treatment and have no satisfactory alternative treatment options.
    - This indication is approved under accelerated approval based on objective response rate (ORR) and duration of response (DOR). Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial.
- Enhertu is also approved for the treatment of HER2-positive metastatic breast cancer, HER2-low metastatic breast cancer, HER2-mutant unresectable or metastatic non-small cell lung cancer, and HER2-positive locally advanced or metastatic gastric cancer.
- The approval of Enhertu for the new indication was based on three trials: DESTINY-PanTumor02, DESTINYLung01, and DESTINY-CRC02. These studies included 192 adult patients with previously treated unresectable or metastatic HER2-positive (IHC 3+) solid tumors. The major efficacy measure in all three of the studies was confirmed ORR and an additional efficacy measure was DOR.
    - The efficacy results are summarized in the table below.

Efficacy parameter	DESTINY-PanTumor02	DESTINY-Lung01	DESTINY-CRC02
Confirmed ORR (95% CI)	51.4% (41.7, 61.0)	52.9% (27.8, 77.0)	46.9% (34.3, 59.8)
Median DOR, months (range)	19.4 (1.3, 27.9+)	6.9 (4.0, 11.7+)	5.5 (1.3+, 9.7+)

- Enhertu carries a boxed warning for interstitial lung disease and embryo-fetal toxicity.
- The recommended dosage of Enhertu for solid tumors is 5.4 mg/kg given as an intravenous infusion once every 3 weeks (21-day cycle) until disease progression or unacceptable toxicity.
    - Refer to the Enhertu drug label for dosing for all its other indications.