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Fred Hutchinson Cancer Center
University of Washington School of Medicine

Consent to take part in a research study:

A Pilot Study of Loncastuximab Tesirine in Specific Populations of Relapsed/Refractory B-Cell Malignancies

RG1122400

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Important things to know about this study.

You are invited to participate in a research study. The purpose of this research is determine the effectiveness of loncastuximab tesirine in populations of B-cell malignancies.

People who agree to join the study will be asked to attend up to 10 visits over the course of 30 weeks. The study involves physical examinations, blood draws, bone marrow biopsies/aspirates, study drug infusions, and PET/CT scans.

We do not know if loncastuximab tesirine will help treat B-cell malignancies, and it could even make your condition/disease worse. Loncastuximab tesirine could cause side effects such as infections and other risks, described below in this form.

You do not have to join this study. You can choose to receive standard methods to treat your B-cell malignancy instead of participating in this study. We will give you details about the purposes, procedures, risks and possible benefits related to this study. We will explain other choices that you have. We will also give you any other information that you need in order to make an informed decision about joining this study.

Following is a more complete description of this study. Please read this description carefully. You can ask any questions you want to help you decide whether to join the

Fred Hutch IRB
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10/2/2024

study. If you join this study, we will give you a signed copy of this form to keep for future reference.

We invite you to join this research study.

We invite you to join this research study because you have a relapsed or refractory B-cell malignancy. Up to 40 people will join this study.

Research is not the same as treatment or medical care. The purpose of a research study is to answer scientific questions.

You do not have to be in the study. You are free to say "yes" or "no", or to drop out after joining. If you say "no," you would have no penalty or loss of benefits. Whatever you decide, your regular medical care would not change.

Why are we doing this study?

We are doing this study to examine whether or not loncastuximab tesirine is effective in people with relapsed or refractory B-cell malignancies.

We are studying loncastuximab tesirine, which is FDA approved for diffuse large B-cell lymphoma, but being investigated for other B-cell malignancies, as in this trial.

In this study, we want to learn what effects, good or bad, loncastuximab tesirine has on people with relapsed or refractory B-cell malignancies. If you join this study, we would watch carefully for any side effects you may experience.

What research tests, procedures, and treatments are done in this study?

If you join this study, we would do these tests and procedures at different times during the study:

- **Medical history.** You will be asked questions about your medical history. This includes ongoing medical conditions you have and drugs you are taking.
- **Physical examination.** Physical exams will assess your overall health status and include measuring your vital signs. This includes temperature, heart rate, breathing rate, and blood pressure. Your weight and your height will also be recorded. You will also be asked how easily you perform daily activities.
- **Routine laboratory tests.** Blood samples will be taken for routine tests. About 3 teaspoons of blood will be taken at visits which require blood draws, and your blood will be tested for levels of certain components to see if it is safe for you to receive treatment. Urine will be collected for analysis.
    - Research Laboratory tests: About 2 teaspoons of blood will be taken for other research testing. The results will not be reported in your medical record.
- **Pregnancy test.** If you are a female who could become pregnant, you will have a pregnancy test. A blood or urine sample will be taken for this test.
- **Tumor imaging.**

Fred Hutch IRB
Approved
10/2/2024

  - Positron emission tomography (PET) scan. PET is another imaging technique. It produces a 3-dimensional picture of processes going on at the cellular level in the body. A whole-body PET may be done if there is known/suspected radiographically measurable disease.
- **Bone marrow aspirate and biopsy.** Bone marrow aspiration and biopsy may be done to see if your cancer has spread to the bone marrow. For the bone marrow aspirate, a sample of bone marrow cells is taken by a needle inserted into a bone in your body. For biopsy, a small piece of bone is removed. These tests are done under local anesthesia.

After you have finished taking loncastuximab tesirine you would enter the **follow-up** part of the study. We would do these tests and procedures:

- **Physical examination.** Physical exams will assess your overall health status and include measuring your vital signs. This includes temperature, heart rate, breathing rate, and blood pressure. Your weight and your height will also be recorded. You will also be asked how easily you perform daily activities.
- **Routine laboratory tests.** Blood samples will be taken for routine tests. About 3 teaspoons of blood will be taken at visits which require blood draws, and your blood will be tested for levels of certain components to see if it is safe for you to receive treatment.
  - Research Laboratory tests: About 2 teaspoons of blood will be taken for other research testing. The results will not be reported in your medical record.
- **Tumor imaging.**
  - Positron emission tomography (PET) scan. PET is another imaging technique. It produces a 3-dimensional picture of processes going on at the cellular level in the body. A whole-body PET may be done if there is known/suspected radiographically measurable disease.
- **Bone marrow aspirate and biopsy.** Bone marrow aspiration and biopsy may be done to see if your cancer has spread to the bone marrow. For the bone marrow aspirate, a sample of bone marrow cells is taken by a needle inserted into a bone in your body. For biopsy, a small piece of bone is removed. These tests are done under local anesthesia.

Study Calendar

Procedures	Screening (-42 days)	Cycles 1 and 2 (+/- 3 days per visit)	Interim visit (between Cycle 2 day 15 and Cycle 3 Day 1)	Cycles 3 through 6 (+/- 3 days per visit)	Remission Status visit (4-6 weeks after Final Cycle ± 7 days)	Off-Study visit (12 weeks after Final Cycle ± 14 days)	Long-term follow-up
Informed Consent	X						
Medical History	X						
Physical Exam	X	X		X	X	X	
Vital Signs	X	X		X			
Tumor Imaging	X		X		X		
Bone Marrow Biopsy/Aspirate	X				X		
Blood Draws	X	X		X	X	X	
Urine Test	X						
Pregnancy Test (if applicable)	X						
Post-Study Disease Status					X	X	X
Study Drug Administration		X		X			

Fred Hutch IRB
Approved
10/2/2024

How long would you stay in this study?

If you join this study, you would stay in this study about 48 months.

You would receive loncastuximab tesirine for about 5 months. After that, you would have follow-up exams in the office or clinic 4-6 weeks after you stop treatment, 12 weeks after you stop treatment, and then as determined by your treating physician during long-term follow-up.

Doctors could take you out of this study at any time. This would happen if:

- They think it is in your best interest not to continue in the study.
- You are not able or willing to follow study procedures.
- The whole study is stopped.

If you withdraw from the study for any reason, previously collected information would remain in the study records and would be included in the analysis of results. This information could not be removed from the study records.

Long-term follow-up means keeping track of someone's medical condition for a long time. If you join this study, we would call you to see how you are doing. We would also ask your doctor to send a copy of your medical records. This information will help us learn about the long-term effects of loncastuximab tesirine.

You do not have to be in long-term follow-up. You could say "yes" or "no". Either way, you could still join this study. If you drop out of the study, you would be asked if we could call you at 4-6 weeks after you stop treatment, 12 weeks after you stop treatment, and during long-term follow-up.

If you choose not to join long-term follow-up, you would not be contacted regularly, and we would not ask your doctor to send medical records, but we might still need to contact you for some other reason.

What are the side effects (risks)?

In this part of the consent form, we describe the side effects we expect from the tests and treatments in this study. Loncastuximab Tesirine could cause side effects we do not know about yet. We carefully watch everyone in the study for side effects.

If you join this study, we would tell you if we discover new side effects that could affect you.

Potential Risks of Loncastuximab Tesirine

The following are some possible side effects of loncastuximab tesirine:

Common side effects (some may be serious), occurring in >20% of patients include:

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Approved
10/2/2024

- Changes in certain blood or laboratory tests of liver function, including increase of a liver test called gamma-glutamyltransferase (GGT)
- Decrease in blood cells including red blood cells (cells that carry oxygen through the body), neutrophils (a type of white blood cell that fights infection), and platelets (cell particles that help the blood clot)
- Feeling like you have to throw up (nausea)
- Feeling tired (fatigue)
- Increase in blood sugar level (hyperglycemia)
- Increased risk of infection
- Muscle or joint pain
- Rash and skin reaction, including increased sensitivity of the skin to sunlight (see below for details)
- Swelling in your arms and legs and/or weight gain (peripheral edema)

Occasional side effects (some may be serious) that have been observed in 4-20% of patients include:

- Constipation
- Difficulties in breathing (dyspnea)
- Fluid build-up around your lungs (pleural effusion) , symptoms of which include chest pain, shortness of breath and breathing difficulty
- Severe or life-threatening infection
- Stomach (abdominal) pain

Rare side effects (some may be serious) that have been observed <4% of patients include:

- Changes in your kidney function
- Fatal lung infection (pneumonia)
- Fever with low neutrophils (febrile neutropenia)
- Fluid build-up around your heart (pericardial effusion)

Possible side effects based on animal studies with unknown frequency in humans include:

- Decrease in testicle size and reduced production of sperm

Exposure to sunlight during treatment with loncastuximab tesirine can cause skin reaction or rash. During treatment with loncastuximab tesirine and for 15 weeks afterwards, avoid or limit your exposure to sunlight, including sunlight through glass, such as buildings or vehicle windows and artificial sunlight such as sunlamps or tanning beds. Use sun protection measures such as sunscreen and wear a wide-brimmed hat and loose-fitting clothes that cover your skin while out in sunlight.

Fred Hutch IRB
Approved
10/2/2024

Loncastuximab tesirine is intended to be given into the vein. If the drug escapes from the vein and gets into the surrounding tissues, it may cause irritation, swelling, pain, or tissue damage, which may be severe.

You should not take loncastuximab tesirine if it is known that you might be sensitive or allergic to any parts of the study drug. If you get loncastuximab tesirine and do have an allergic reaction, the study doctor may give you medications before and/or after your next infusions to help prevent this from happening again.

You will be closely monitored for these and any other side effects during the study. It is not possible to predict all the side effects that could happen when taking loncastuximab tesirine, so you might have side effects other than the ones listed above. If you have any of the side effect listed above, or any other symptoms, you should inform your study doctor.

Pregnancy Risks

It is unknown if loncastuximab tesirine may involve risks to pregnant women, to an unborn child (an embryo or a fetus), or to children of nursing women. For this reason, if you are pregnant, trying to become pregnant, or nursing a child, you cannot enter the study. Also, as mentioned above, men who take loncastuximab tesirine may have a decrease in sperm production.

Women of childbearing potential are required to have a negative pregnancy test at study entry and periodically throughout the study. You are a woman of childbearing potential if you are capable of having a child. Women of childbearing potential must use effective medically acceptable birth control from the time of giving informed consent until at least 10 months after the last dose of loncastuximab tesirine. Women who become pregnant while on study will no longer receive study medication.

Effective medically acceptable birth control methods include:

- hormonal contraception (some birth control pills, a vaginal ring, injectable or implantable birth control)
- Intrauterine devices and intrauterine hormone releasing systems
- sterilization of male partner (vasectomy)
- not having sexual intercourse, when this is the preferred and usual lifestyle of the participant.

The following are not considered effective medically acceptable birth control methods: progesterone-only birth control pills which do not inhibit ovulation, barrier methods (for example, condoms, diaphragm, or cervical cap with or without spermicidal foam, cream, or gel), periodic abstinence (such as calendar, symptothermal, and post ovulation), withdrawal (coitus interruptus), lactational amenorrhea method, and spermicide-only.

The study doctor will discuss appropriate birth control methods with you.

Men whose sexual partners can bear children must use a condom from the time of the first dose of study treatment until at least 7 months after the last dose of loncastuximab tesirine.

Fred Hutch IRB
Approved
10/2/2024

All pregnancies, including pregnancies in female partners of male study participants, that occur during the study must be reported to the study doctor immediately upon learning of the pregnancy.

Radiation risks

Some of the tests that you will have in this research study will expose you to radiation. Everyone receives a small amount of radiation every day called "background radiation". This radiation is natural and comes from space, air, water, soil, and the food you eat. Each year you are exposed to about 3 milliSieverts (mSv) of this background radiation. A milliSievert is a unit of radiation dose. There is minimal risk to your health from the amount of radiation you will receive in this study. The usual lifetime risk of getting cancer is 42%. For every 10 mSv you receive, your risk may increase 0.1%. If you have more procedures that expose you to radiation, your risk will go up. For comparison, the estimated radiation dose from each of these tests is listed below:

18-FDG PET/CT Scan: 19 mSv

Other possible side effects

Blood Draws
Blood draws may cause pain, bleeding, and/or bruising. You may faint and/or get an infection. Infection rarely happens. There may be redness and irritation at the place where the needle enters your vein.

What are the benefits?

We do not know if this study would help you. We are testing the study therapy to see its effects on people with certain B-cell malignancies. You might get better if you receive the study therapy, but your condition could stay the same or even get worse. We hope the information from this study will help other people with certain B-cell malignancies in the future.

You have other choices besides this study.

You do not have to join this study. You are free to say "yes" or "no". Your regular medical care would not change if you decide to say "no".

You have other choices for treatment. Each of these choices has risks and benefits. You should talk to your doctor or healthcare provider about these choices.

Other choices include: Standard of care treatment, another research study, or no treatment.

Enrollment in this study may exclude you from other research studies.

Fred Hutch IRB
Approved
10/2/2024

Protecting Privacy as an Individual and the Confidentiality of Personal Information

If you join this study, some people or organizations might need to look at your medical records and research records for quality assurance or data analysis. They include:

- Researchers involved with this study.
- ADC Therapeutics (the provider of Loncastuximab Tesirine) and their agents.
- Institutional Review Boards (IRB), including the Fred Hutchinson Cancer Center IRB. An IRB is a group that reviews the study to protect the rights and welfare of research participants.
- Fred Hutchinson Cancer Center and University of Washington.
- US National Institutes of Health, National Cancer Institute, Office for Human Research Protections, Food and Drug Administration, and other regulatory agencies as required.

We will do our best to keep personal information confidential. But we cannot guarantee total confidentiality. Personal information may be given out if required by law. For example, we are required to report certain sexually transmitted diseases and HIV infection. We also have to report suspected abuse or neglect of children and vulnerable adults. Workplace safety rules may require health workers to contact you about lab tests. Or a court may order study information to be disclosed. Such cases are rare.

We will not use personal information in any reports about this study, such as journal articles or presentations at scientific meetings.

If you join this study, information about your participation would be made part of your permanent medical record. This information would include a copy of this consent form. If an insurance company or employer or anyone else were authorized to see your medical record, they would see a copy of this consent form.

Would we pay you if you join this study?

There is no payment for being in this study. Travel reimbursement may be available. Talk to the study staff for more information.

Would you have extra costs if you join this study?

If you join this study, you or your insurance company would have to pay for the costs of standard treatment in this study.

You would not be billed for:

- The cost of Loncastuximab Tesirine.

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Approved
10/2/2024

- Any research testing done on your tissue or blood solely for the purposes of this research study.

If Loncastuximab Tesirine is approved as a treatment while this study is still going on, you or your insurance company might have to pay for the study treatment in order to complete this study.

What if you get sick or hurt after you join this study?

For a life threatening problem, call 911 right away or seek help immediately. Contact your study doctor when the medical emergency is over or as soon as you can.

For all other medical problems or illness related to this research, immediately contact your study doctor. They will treat you or refer you for treatment. You or your health insurance will have to pay for the treatment. There are no funds to pay you for a research-related injury, added medical costs, loss of a job, or other costs to you or your family. State or national law may give you rights to seek payment for some of these expenses. You do not waive any right to seek payment by signing this consent form.

You or your insurer will be billed for treatment of problems or complications that result from your condition or from standard clinical care.

You would not lose any legal right to seek payment for treatment if you sign this form.

What will my information and/or tissue samples be used for?

Your information and tissue samples (such as blood and tumor cells) will be used for the purposes of this study and to understand blood and tumor markers that may predict effectiveness of this treatment, or better understand B-cell malignancies.

Tumor samples from before treatment and in case of any repeat biopsies on study, and blood (plasma samples) before, during, and at the end of treatment, may be used.

During this study, if the researchers learn new information that could possibly be important to your general health or to you disease or condition, they will not be able to share that information with you because the tests are investigational.

Your rights

- You do not have to join this study. You are free to say “yes” or “no”.
- If you get sick or hurt in this study, you do not lose any of your legal rights to seek payment by signing this form.
- During the study, we might learn new information that you need to know. For example, some information may affect your health or well-being. Other

Fred Hutch IRB
Approved
10/2/2024

information might make you change your mind about being in this study. If we learn these kinds of information, we would tell you.

- If you join this study, you would not have to stay in it. You could stop at any time (even before you start). Your regular medical care would not change. You would have no penalty for stopping, but it would be better not to join the study if you think that you would change your mind later.

- If you decide to drop out, we would want you to tell the study doctor. The doctor could tell you about the effects of stopping the study therapy. You and the doctor could talk about the follow-up care and testing that would help the most.

- Before you leave the study, the doctor might ask you to continue in the long-term follow-up part of the study.

A description of this clinical trial will be available on *http://www.ClinicalTrials.gov*, as required by U.S. Law. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

Your responsibilities

If you join this study, you would have some responsibilities.

- Follow the schedule of study visits and procedures.
- Take study medications as directed.
- Prevent pregnancy.
- Tell us about side effects.

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10/2/2024

For more information

If you have questions or concerns about this study, you can talk to your doctor anytime. Other people you could talk to are listed below.

If you have questions about:	Call:
This study (including complaints and requests for information)	(206) 606-6546 (Dr. Stephen Smith)
If you get sick or hurt in this study	(206) 606-6546 (Dr. Stephen Smith)
Your rights as a research participant	206-667-5900 or email irodirector@fredhutch.org (Director of Institutional Review Office, Fred Hutchinson Cancer Center) 206-543-0098 (Human Subjects Division, University of Washington)
Your bills and health insurance coverage	(206) 606-1377 (Patient Financial Services, Fred Hutchinson Cancer Center)

Emergency number (24 hours): (206) 598-6190

Read each question and think about your choice. When you decide on each question, please circle **YES** or **NO**.

Do you agree to donate your blood samples, tissue, and information to study this treatment regimen, while on this trial?

(circle one)

YES **NO**

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10/2/2024

Signatures

Please sign below if you:

- have read this form (or had it read to you);
- had the opportunity to ask any questions you have;
- had the opportunity to discuss the research with the person obtaining consent; and
- agree to participate in this study.

Participant:

Printed Name	Signature	Date

If you were a witness for a participant who was not able to read this written consent form, sign below to indicate (1) you were present at the consent discussion in person, (2) you witnessed the verbal presentation of the written consent form, and (3) the participant had the opportunity to ask questions and agreed to take part in the study.

Impartial Witness:

Printed Name	Signature	Date

Researcher's statement

I have discussed the research study, including procedures and risks, with the person signing above. A copy of the signed consent form will be given to the participant.

Person obtaining consent signature:

Printed Name	Signature	Date

Protocol: RG1122400
Current consent version date: 09/24/2024
Previous consent version date: 08/07/2023
Copies to: Researcher's file
Subject
Subject's medical record