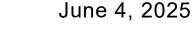
## **R&D Day** – PROSPECT Study Data Presentation –





Agenda



## PROSPECT Study (10:30-10:45)

Vice President, Medical Affairs, ONO PHARMA USA

Thomas Lechner, MSc. Ph.D.



**Closing** (10:45-10:55)

## **Corporate Officer / Executive Director, Clinical Development**

Tatsuya Okamoto

**Q&A Session** (10:55-11:15)

## **Cautionary Notes**



Forecasts and other forward-looking statements included in this document are based on information currently available and certain assumptions that the Company deems reasonable. Actual performance and other results may differ significantly due to various factors. Such factors include, but are not limited to:

- (i) failures in new product development
- (ii) changes in general economic conditions due to reform of medical insurance system
- (iii) failures in obtaining the expected results due to effects of competing
- products or generic drugs
- (iv) infringements of the Company's intellectual property rights by third parties
- (v) stagnation of product supply from the delay in production due to natural disasters, fires and so on
- (vi) onset of new side effect of post-licensure medical product and,
- (vii) currency exchange rate fluctuations and interest rate trend.

Information about pharmaceutical products (including products currently in development) included in this document is not intended to constitute an advertisement of medical advice.

Tirabrutinib for the treatment of relapsed or refractory primary central nervous system lymphoma: efficacy and safety from the phase II PROSPECT study





# The PROSPECT study was a phase II, open-label, multicenter, US-based study of tirabrutinib in patients with r/r PCNSL

The first efficacy and safety findings from the PROSPECT study support tirabrutinib monotherapy as a potentially effective treatment option for patients with r/r PCNSL

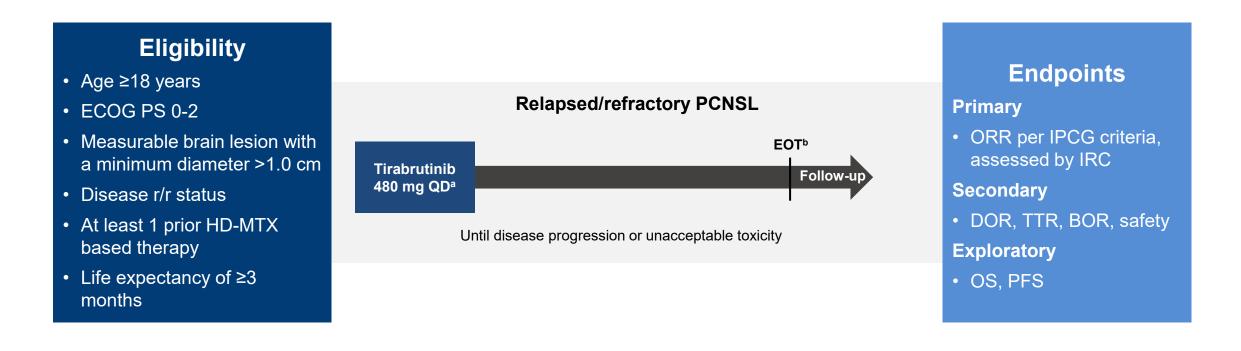
## **PROSPECT: Background**



- Primary central nervous system lymphoma (PCNSL) is a rare, aggressive form of non-Hodgkin lymphoma localized to the central nervous system<sup>1,2</sup>
- In the relapsed/refractory setting, treatment options are limited, standard of care is not well established, and prognosis is poor<sup>1,2</sup>
  - There are no currently approved drug therapies for PCNSL in the United States or European Union
- Bruton's tyrosine kinase (BTK) is a regulator of the B-cell receptor pathway, and BTK inhibitors (BTKi) have been investigated for the treatment of B-cell lymphomas<sup>2,3</sup>
- Tirabrutinib is a potent, highly selective second-generation BTKi<sup>4,5</sup>
  - Approved for PCNSL in Japan, Taiwan, and South Korea based on a phase I/II study conducted in Japan<sup>2,4,5</sup>
- <u>Here we report results from the PROSPECT study (NCT04947319) conducted in the United States<sup>6</sup></u>

1. Grommes C, DeAngelis LM. J Clin Oncol. 2017;35:2410-2418. 2. Schaff L, et al. Leuk Lymphoma. 2024;65:882-894. 3. Shirley M. Target Oncol. 2022;17:69-84. 4. Narita Y, et al. Neuro Oncol. 2021;23:122-133. 5. Yonezawa H, et al. Neurooncol Adv. 2024;6(1):vdae037. 6. ClinicalTrials.gov. Accessed March 31, 2025. https://clinicaltrials.gov/ct2/show/NCT04947319



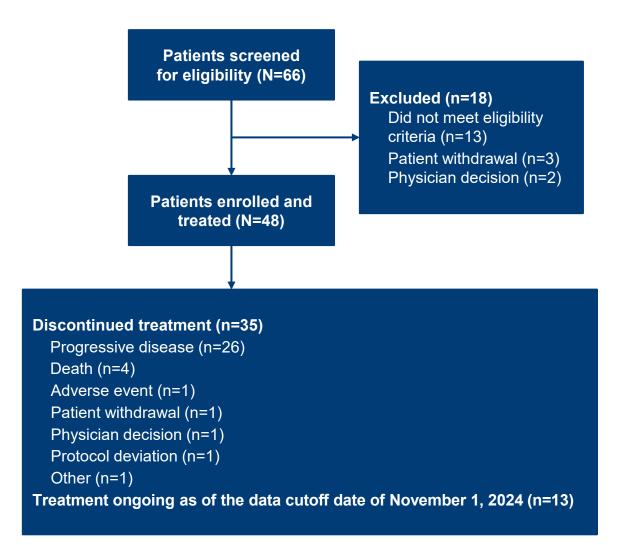


<sup>a</sup>Tirabrutinib is administered on an empty stomach at least 1 hour prior to eating or 2 hours after eating.

<sup>b</sup>EOT is defined as the date the investigator decides to discontinue tirabrutinib for each patient.

BOR, best overall response; DOR, duration of response; ECOG PS, Eastern Cooperative Oncology Group performance status; EOT, end of treatment; HD-MTX, high-dose methotrexate; IPCG, International PCNSL Collaborative Group; IRC, independent review committee; ORR, overall response rate; OS, overall survival; PFS, progression-free survival; QD, once daily; r/r, relapsed or refractory; TTR, time to response.

## **PROSPECT: Patient Disposition and Characteristics**



Characteristic	Tirabrutinib (N=48)
Age, median years (range)	65.5 (34-87)
Sex, male, n (%)	21 (44)
ECOG PS, n (%) 0 1 ≥2	9 (19) 30 (63) 9 (19)
KPS, median (range)	85 (50-100)
Prior treatment for PCNSL, n (%) Any medication Methotrexate Rituximab Cytarabine Radiotherapy Hematopoietic stem cell transplant	48 (100) 48 (100) 43 (90) 25 (52) 16 (33) 5 (10)
R/R status at most recent treatment, n (%) Refractory Relapsed Unknown	23 (48) 22 (46) 3 (66)
Number of prior treatments for PCNSL, n (%) 1 2 ≥3	30 (63) 10 (21) 8 (17)



## **PROSPECT: Overall Response Rate and Duration of Response**

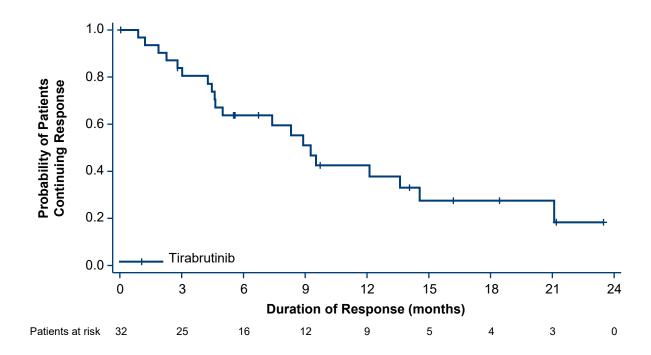
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#### **Primary Endpoint: ORR by IRC<sup>a</sup>**

		ORR by IRC	
		n (%)	95% CI
ORR (CR+CRu+PR)		32 (67)	52, 80
CRR (CR+CRu)		21 (44)	29, 59
	CR	13 (27)	15, 42
BOR	CRu	8 (17)	7, 30
	PR	11 (23)	12, 37
	SD	9 (19)	9, 33
	PD	6 (13)	5, 25
	NE	1 (2)	0, 11

- ORR by IRC = 67% (95% CI: 52, 80)
- CRR by IRC = 44% (95% CI: 29, 59)

#### **Duration of Response by IRC**



• Median DOR by IRC = 9.3 months (95% CI: 4.6, 14.6)

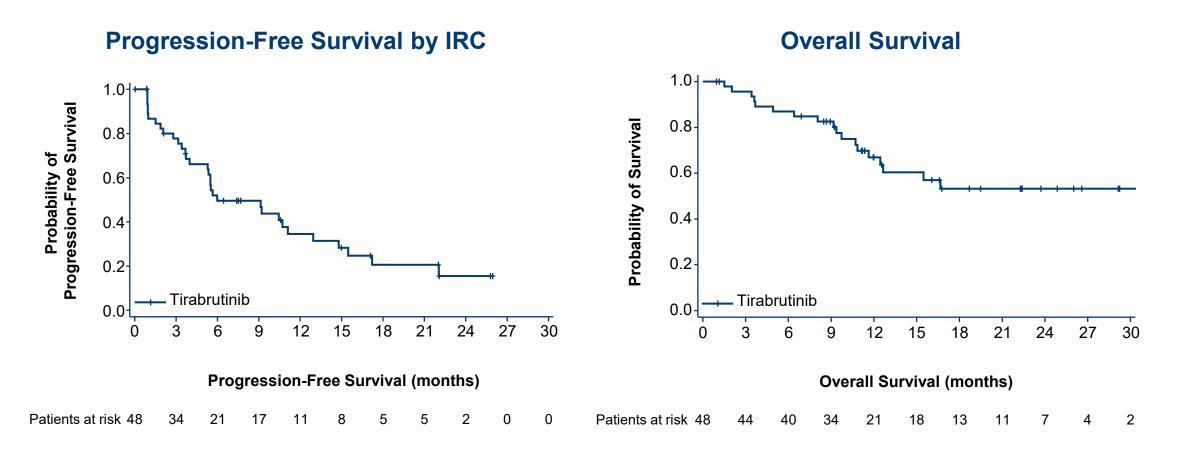
Median time to response by IRC = 1.0 months (range, 0.9-3.7)

<sup>a</sup>Response determined per IPCG criteria.

CR, complete response; CRR, complete response rate; CRu, unconfirmed complete response; NE, not evaluable; ORR, overall response rate; PD, progressive disease; PR, partial response; SD, stable disease.

## **PROSPECT: Progression-Free Survival and Overall Survival**





 Median PFS by IRC = 6.0 months (95% CI: 5.3, 11.1) Median OS = NR (95% CI: 12.5, NA)

## **PROSPECT: Adverse Events**



	Tirabrutin	ib (N=48)	TEAEs in ≥15% of Patients
TEAEs	Any grade, n (%)	Grade ≥3, n (%)	Fall Fatigue
Patients with ≥1 TEAE	47 (98)	27 (56)	Anemia Lymphopenia
Patients with ≥1 treatment-related TEAE	36 (75)	13 (27)	Headache Diarrhea Pruritus Rash
Patients with TEAEs leading to dose interruption Treatment-related	24 (50) 16 (33)	15 (31) 8 (17)	Nausea Dizziness Rash maculo-papular Vomiting
Patients with TEAEs leading to dose reduction Treatment-related	5 (10) 3 (6)	0 0	Neutropenia   Aspartate aminotransferase increased   Decreased appetite   Constipation
Patients with TEAEs leading to study withdrawal Treatment-related	5 (10) 1 (2)	4 (8) 1 (2)	Urinary tract infection Thrombocytopenia Hyperglycemia Hematuria Edema peripheral
Patients with serious TEAEs Treatment-related	21 (44) 5 (10)	17 (35) 5 (10)	Cough Contusion Alanine aminotransferase increased Confusional state
	Any grade, n (%)		Leukopenia Leukopenia
Patients with fatal TEAEs Treatment-related	2 (· 0		0 20 40 60 80 100 Percentage of Patients

• Tirabrutinib was well tolerated in this population, with a low incidence of cardiac events (<10%, all grade 1-2)

TEAE, treatment-emergent adverse event.

## **PROSPECT: Conclusions**



- PROSPECT was a phase II, open-label, multicenter, US-based study of tirabrutinib in patients with relapsed or refractory PCNSL
- Tirabrutinib demonstrated a high ORR, prolonged DOR, and reasonable PFS with a welltolerated side effect profile
- Expanding on experience in Japan, these first efficacy and safety findings from the PROSPECT study further support tirabrutinib monotherapy as a potentially effective treatment option for patients with relapsed or refractory PCNSL



#### We thank the patients and their families for making the PROSPECT study possible

We also thank the investigators and clinical trial teams who participated in the study

This study was funded by Ono Pharmaceutical Co. Ltd

## **PROSPECT: Lay Summary**



- Primary central nervous system lymphoma (PCNSL) is a rare tumor that occurs in the brain, spinal cord, and other parts of the central nervous system
- This kind of cancer can be treated with chemotherapy, but the cancer commonly comes back
- The PROSPECT study tested tirabrutinib, an experimental new medicine designed to treat PCNSL, in people whose cancer had come back after chemotherapy
- Two thirds of patients with PCNSL responded to tirabrutinib
- For patients experiencing side effects, their doctors managed these by lowering the amount of tirabrutinib or pausing the treatment with tirabrutinib
- The PROSPECT study showed that tirabrutinib may be a good treatment option for people with PCNSL

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