WEBVTT

NOTE duration: "01:01:33.226"

NOTE Confidence: 0.994584

 $00:00:01.280 \longrightarrow 00:00:02.800$ It's really pretty often that

NOTE Confidence: 0.994584

 $00:00:02.800 \longrightarrow 00:00:04.019$ we have experts

NOTE Confidence: 0.98760116

 $00:00:04.400 \longrightarrow 00:00:06.080$ from our own faculty who

NOTE Confidence: 0.98760116

 $00:00:06.080 \longrightarrow 00:00:07.200$ go around the world and

NOTE Confidence: 0.98760116

 $00:00:07.200 \longrightarrow 00:00:08.559$ give talks, and we never

NOTE Confidence: 0.98760116

 $00:00:08.559 \longrightarrow 00:00:09.920$ ask them to give talks

NOTE Confidence: 0.9876011600:00:09.920 --> 00:00:10.420 here.

NOTE Confidence: 0.99546045

 $00:00:11.440 \longrightarrow 00:00:13.039$ So we're trying to fix

NOTE Confidence: 0.99546045

 $00:00:13.039 \longrightarrow 00:00:13.780$ that problem.

NOTE Confidence: 0.9342831

 $00:00:14.719 \longrightarrow 00:00:16.805$ And so our speaker today

NOTE Confidence: 0.9342831

 $00:00:16.945 \longrightarrow 00:00:18.645$ is Ian Cropp.

NOTE Confidence: 0.99848354

00:00:19.265 --> 00:00:20.225 I think many of you

NOTE Confidence: 0.99848354

 $00:00:20.225 \longrightarrow 00:00:21.204$ know Ian.

NOTE Confidence: 0.97586846

00:00:21.744 --> 00:00:22.965 Ian came here,

 $00:00:23.585 \longrightarrow 00:00:25.125$ a month after I did,

NOTE Confidence: 0.99378186

00:00:25.585 --> 00:00:27.825 three years ago from Dana

NOTE Confidence: 0.99378186

 $00:00:27.825 \longrightarrow 00:00:28.325$ Farber.

NOTE Confidence: 0.99149805 00:00:29.825 --> 00:00:30.325 He NOTE Confidence: 0.99779046

00:00:31.320 --> 00:00:32.780 spent most of his life,

NOTE Confidence: 0.99363595

 $00:00:33.560 \longrightarrow 00:00:34.940$ up until about age,

NOTE Confidence: 0.9978245

00:00:35.320 --> 00:00:36.920 I don't know, somewhere in

NOTE Confidence: 0.997824500:00:36.920 --> 00:00:37.420 his

NOTE Confidence: 0.960174

 $00{:}00{:}37.800 \longrightarrow 00{:}00{:}40.200$ mid thirties at, Hopkins where

NOTE Confidence: 0.960174

 $00:00:40.200 \longrightarrow 00:00:41.239$ he went to college and

NOTE Confidence: 0.960174

 $00:00:41.239 \longrightarrow 00:00:42.520$ medical school and got his

NOTE Confidence: 0.960174

 $00:00:42.520 \longrightarrow 00:00:43.659$ PhD and trained,

NOTE Confidence: 0.99608403

 $00:00:44.120 \longrightarrow 00:00:45.239$ and then came to Dana

NOTE Confidence: 0.99608403

 $00:00:45.239 \longrightarrow 00:00:46.280$ Farber where he was a

NOTE Confidence: 0.99608403

 $00:00:46.280 \longrightarrow 00:00:46.780$ fellow

NOTE Confidence: 0.999384

 $00:00:47.265 \longrightarrow 00:00:48.565$ and stayed on the faculty

 $00:00:48.704 \longrightarrow 00:00:50.145$ for quite a number of

NOTE Confidence: 0.999384

00:00:50.145 --> 00:00:50.645 years.

NOTE Confidence: 0.99366087

 $00:00:51.185 \longrightarrow 00:00:53.184$ He he is a breast

NOTE Confidence: 0.99366087

 $00:00:53.184 \longrightarrow 00:00:54.165$ cancer expert,

NOTE Confidence: 0.88964236 00:00:55.184 --> 00:00:55.684 of, NOTE Confidence: 0.98733205

 $00:00:57.425 \longrightarrow 00:00:58.805$ known around the world.

NOTE Confidence: 0.9796658

 $00:00:59.750 \longrightarrow 00:01:01.030$ And for the purposes of

NOTE Confidence: 0.9796658

00:01:01.030 --> 00:01:01.750 today's talk,

NOTE Confidence: 0.9721699

 $00:01:02.390 \longrightarrow 00:01:03.289$ he's also,

NOTE Confidence: 0.99932814

 $00:01:03.989 \longrightarrow 00:01:06.390$ an expert in antibody drug

NOTE Confidence: 0.99932814

 $00:01:06.390 \longrightarrow 00:01:06.890$ conjugates.

NOTE Confidence: 0.99926573

 $00:01:07.590 \longrightarrow 00:01:08.250$ In fact,

NOTE Confidence: 0.92927253

 $00{:}01{:}08.709 \dashrightarrow 00{:}01{:}09.530$ he ran,

NOTE Confidence: 0.99869794

 $00:01:10.950 \longrightarrow 00:01:12.970$ the first phase one trial

NOTE Confidence: 0.98850346

 $00:01:14.145 \longrightarrow 00:01:16.305$ of the first antibody drug

 $00:01:16.305 \longrightarrow 00:01:17.744$ conjugate that was approved in

NOTE Confidence: 0.98850346

 $00:01:17.744 \longrightarrow 00:01:19.365$ solid tumors, and that was,

NOTE Confidence: 0.83997744

 $00:01:20.064 \longrightarrow 00:01:22.084$ TDM one now back,

NOTE Confidence: 0.99944

 $00:01:22.704 \longrightarrow 00:01:23.924$ a number of years ago.

NOTE Confidence: 0.8758477

 $00:01:24.545 \longrightarrow 00:01:25.024 \text{ So},$

NOTE Confidence: 0.9435266

 $00:01:26.050 \longrightarrow 00:01:27.650$ I'll also mention that Ayan

NOTE Confidence: 0.9435266

 $00:01:27.650 \longrightarrow 00:01:28.709$ is the chief,

NOTE Confidence: 0.93370664

 $00:01:29.730 \longrightarrow 00:01:31.250$ chief scientific officer for the

NOTE Confidence: 0.93370664

 $00:01:31.250 \dashrightarrow 00:01:33.270$ translational breast cancer research consortium.

NOTE Confidence: 0.9700801

 $00:01:33.890 \longrightarrow 00:01:34.870$ Here at Yale,

NOTE Confidence: 0.94656235

 $00{:}01{:}35.250 --> 00{:}01{:}36.390$ he's our,

NOTE Confidence: 0.99799883

00:01:37.490 --> 00:01:39.190 chief clinical research officer

NOTE Confidence: 0.98820657

 $00{:}01{:}39.569 \dashrightarrow 00{:}01{:}41.525$ and runs the the clinical

NOTE Confidence: 0.98820657

 $00:01:41.525 \longrightarrow 00:01:42.425$ trials office.

NOTE Confidence: 0.81921935

00:01:43.125 --> 00:01:44.265 So, Ian,

NOTE Confidence: 0.9934745

 $00{:}01{:}44.805 \dashrightarrow 00{:}01{:}45.305$ please.

00:01:51.205 --> 00:01:51.945 Good afternoon.

NOTE Confidence: 0.9976174

 $00{:}01{:}52.645 --> 00{:}01{:}54.085$ Thank you for that kind

NOTE Confidence: 0.9976174

 $00:01:54.085 \longrightarrow 00:01:54.585$ introduction.

NOTE Confidence: 0.9857878 00:01:58.900 --> 00:01:59.400 So, NOTE Confidence: 0.96898127

00:01:59.939 --> 00:02:01.320 we're gonna be talking about

NOTE Confidence: 0.96898127

00:02:01.540 --> 00:02:03.299 antibody drug conjugates, which, you

NOTE Confidence: 0.96898127

 $00:02:03.299 \longrightarrow 00:02:03.939$ know, I think is a

NOTE Confidence: 0.96898127

 $00{:}02{:}04.100 \dashrightarrow 00{:}02{:}05.479$ this is a particularly opportune

NOTE Confidence: 0.96898127

 $00:02:05.540 \longrightarrow 00:02:07.220$ time to have that discussion.

NOTE Confidence: 0.96898127

 $00:02:07.220 \longrightarrow 00:02:08.260$ This is an area that's

NOTE Confidence: 0.96898127

00:02:08.260 --> 00:02:10.360 moving very quickly. There's actually,

NOTE Confidence: 0.99333227

00:02:11.255 --> 00:02:13.255 been two FDA approvals of

NOTE Confidence: 0.99333227

00:02:13.255 --> 00:02:14.615 ADCs just in the last,

NOTE Confidence: 0.99333227

00:02:14.615 --> 00:02:16.135 like, eight or nine days,

NOTE Confidence: 0.99333227

 $00:02:16.135 \longrightarrow 00:02:17.735$ and that's just within breast

 $00:02:17.735 \longrightarrow 00:02:18.235$ cancer.

NOTE Confidence: 0.9893982

 $00:02:18.535 \longrightarrow 00:02:19.415$ So there's a lot going

NOTE Confidence: 0.9893982 $00:02:19.415 \longrightarrow 00:02:19.915$ on. NOTE Confidence: 0.98497415 $00:02:21.015 \longrightarrow 00:02:21.515$ And

NOTE Confidence: 0.99674165

 $00:02:24.000 \longrightarrow 00:02:24.959$ what I thought I would

NOTE Confidence: 0.99674165

 $00:02:24.959 \longrightarrow 00:02:26.000$ do would be to talk

NOTE Confidence: 0.99674165

00:02:26.000 --> 00:02:27.540 about ADCs using

NOTE Confidence: 0.96945304

 $00:02:27.840 \longrightarrow 00:02:29.439$ HER2 positive breast cancer as

NOTE Confidence: 0.96945304

 $00:02:29.439 \longrightarrow 00:02:30.639$ kind of an example, and

NOTE Confidence: 0.96945304

 $00:02:30.639 \longrightarrow 00:02:32.180$ and the reasons for that,

NOTE Confidence: 0.9316423

 $00:02:32.639 \longrightarrow 00:02:33.939$ selection is because,

NOTE Confidence: 0.9361068

 $00:02:35.195 \longrightarrow 00:02:37.215$ HER2 positive disease is,

NOTE Confidence: 0.9640468

 $00:02:38.315 \longrightarrow 00:02:39.355$ an area where we've had

NOTE Confidence: 0.9640468

 $00{:}02{:}39.355 \dashrightarrow 00{:}02{:}40.875$ the biggest clinical impact of

NOTE Confidence: 0.9640468

 $00:02:40.875 \longrightarrow 00:02:42.315$ of targeted therapy in general

NOTE Confidence: 0.9640468

 $00:02:42.315 \longrightarrow 00:02:43.535$ and ADCs specifically.

 $00{:}02{:}44.555 \dashrightarrow 00{:}02{:}46.715$ There's interestingly, there's a we

NOTE Confidence: 0.964635

 $00:02:46.715 \longrightarrow 00:02:47.915$ see a benefit of ADCs

NOTE Confidence: 0.964635

 $00:02:47.915 \longrightarrow 00:02:49.115$ across a very wide range

NOTE Confidence: 0.964635

00:02:49.115 --> 00:02:50.715 of target expression in in

NOTE Confidence: 0.964635

00:02:50.715 --> 00:02:52.709 this, subtype of breast cancer,

NOTE Confidence: 0.964635

00:02:52.709 --> 00:02:53.910 which I I think is

NOTE Confidence: 0.964635

 $00:02:53.910 \longrightarrow 00:02:54.889$ worth talking about.

NOTE Confidence: 0.98977864

 $00:02:55.430 \longrightarrow 00:02:55.930$ And,

NOTE Confidence: 0.8072351

 $00:02:56.550 \longrightarrow 00:02:58.490$ it's a there's a examples

NOTE Confidence: 0.9248949

 $00:02:58.950 \longrightarrow 00:03:00.230$ of basically all the key

NOTE Confidence: 0.9248949

 $00:03:00.230 \longrightarrow 00:03:01.830$ features of of ADCs are

NOTE Confidence: 0.9248949

00:03:01.830 --> 00:03:03.030 kind of manifest in HER2

NOTE Confidence: 0.9248949

 $00:03:03.030 \longrightarrow 00:03:05.075$ positive disease. And lastly,

NOTE Confidence: 0.9750537

00:03:05.775 --> 00:03:06.735 this is what I study,

NOTE Confidence: 0.9750537

 $00:03:06.735 \longrightarrow 00:03:07.535$ so I have most of

 $00:03:07.535 \longrightarrow 00:03:09.135$ the slides. So it was

NOTE Confidence: 0.9750537

 $00:03:09.135 \longrightarrow 00:03:09.635$ easier.

NOTE Confidence: 0.9927846 00:03:10.495 --> 00:03:10.995 So, NOTE Confidence: 0.9984115

 $00:03:11.695 \longrightarrow 00:03:12.495$ just for those of you

NOTE Confidence: 0.9984115

 $00:03:12.495 \longrightarrow 00:03:13.795$ who don't treat breast cancer,

NOTE Confidence: 0.97917646

 $00{:}03{:}14.895 \dashrightarrow 00{:}03{:}16.590$ HER2 positive disease makes up

NOTE Confidence: 0.97917646

 $00:03:16.590 \longrightarrow 00:03:18.030$ about fifteen to twenty percent

NOTE Confidence: 0.97917646

 $00:03:18.030 \longrightarrow 00:03:19.389$ of breast cancers, and these

NOTE Confidence: 0.97917646

 $00{:}03{:}19.389 \to 00{:}03{:}21.730$ cancers have dramatic overexpression

NOTE Confidence: 0.9981534

 $00:03:22.110 \longrightarrow 00:03:23.870$ of of this cell surface

NOTE Confidence: 0.9981534

 $00{:}03{:}23.870 --> 00{:}03{:}24.370 \ \mathrm{protein}$

NOTE Confidence: 0.94836134

 $00:03:24.830 \longrightarrow 00:03:26.530$ tyrosine kinase called HER2.

NOTE Confidence: 0.9976084

 $00:03:27.070 \longrightarrow 00:03:28.510$ There's typically a million or

NOTE Confidence: 0.9976084

 $00:03:28.510 \longrightarrow 00:03:29.870$ even two million copies of

NOTE Confidence: 0.9976084

00:03:29.870 --> 00:03:31.710 HER2 protein on each cancer

NOTE Confidence: 0.9976084 00:03:31.710 --> 00:03:32.210 cell.

 $00:03:32.694 \longrightarrow 00:03:34.615$ These cancers are typically high

NOTE Confidence: 0.96213406

00:03:34.615 --> 00:03:36.375 grade, and they present with

NOTE Confidence: 0.96213406

00:03:36.375 --> 00:03:38.455 more advanced stage. They recur

NOTE Confidence: 0.96213406

 $00:03:38.455 \longrightarrow 00:03:39.815$ more frequently, and they have

NOTE Confidence: 0.96213406

 $00:03:39.815 \longrightarrow 00:03:40.315$ resistance,

NOTE Confidence: 0.84681773 00:03:41.175 --> 00:03:41.675 to, NOTE Confidence: 0.9804595

00:03:42.055 --> 00:03:44.555 standard therapy. So these patients,

NOTE Confidence: 0.9995813

 $00:03:45.255 \longrightarrow 00:03:46.635$ had very poor prognosis

NOTE Confidence: 0.9997494

 $00:03:47.880 \longrightarrow 00:03:49.100$ prior to the realization

NOTE Confidence: 0.99029785

 $00:03:49.480 \longrightarrow 00:03:50.840$ that the reason these cancers

NOTE Confidence: 0.99029785

 $00{:}03{:}50.840 \dashrightarrow 00{:}03{:}52.360$ were behaving so badly was

NOTE Confidence: 0.99029785

 $00:03:52.360 \longrightarrow 00:03:54.300$ because of this dramatic overexpression

NOTE Confidence: 0.99029785

 $00:03:54.440 \longrightarrow 00:03:55.400$ of HER2 and all the

NOTE Confidence: 0.99029785

 $00:03:55.400 \longrightarrow 00:03:56.380$ downstream signaling,

NOTE Confidence: 0.9995989

 $00:03:57.080 \longrightarrow 00:03:58.440$ that was happening because of

 $00:03:58.440 \longrightarrow 00:03:58.940$ that.

NOTE Confidence: 0.9635681

 $00:03:59.815 \longrightarrow 00:04:00.855$ So that led to the

NOTE Confidence: 0.9635681

 $00:04:00.855 \longrightarrow 00:04:03.175$ development of drugs targeting HER2,

NOTE Confidence: 0.9635681

 $00:04:03.175 \longrightarrow 00:04:04.135$ the first of which was

NOTE Confidence: 0.9635681

 $00:04:04.135 \longrightarrow 00:04:04.875$ an antibody

NOTE Confidence: 0.9522879

 $00:04:05.175 \longrightarrow 00:04:05.995$ called trastuzumab,

NOTE Confidence: 0.96765965

 $00:04:06.855 \longrightarrow 00:04:07.975$ and it was shown back

NOTE Confidence: 0.96765965

00:04:07.975 --> 00:04:09.334 in, I think, nineteen ninety

NOTE Confidence: 0.96765965

 $00{:}04{:}09.334 \dashrightarrow 00{:}04{:}10.715$ eight or nineteen ninety nine,

NOTE Confidence: 0.9484665

 $00:04:11.175 \longrightarrow 00:04:13.480$ that the addition of paztuzumab

NOTE Confidence: 0.9973514

 $00:04:13.780 \longrightarrow 00:04:14.439$ to chemotherapy

NOTE Confidence: 0.9626232

00:04:14.739 --> 00:04:17.000 led to substantial improvements in

NOTE Confidence: 0.9626232

 $00:04:17.220 \longrightarrow 00:04:19.220$ in outcomes, progression free overall

NOTE Confidence: 0.9626232

 $00:04:19.220 \longrightarrow 00:04:19.720$ survival.

NOTE Confidence: 0.9802211

00:04:20.339 --> 00:04:20.839 And,

NOTE Confidence: 0.97528654

 $00:04:21.539 \longrightarrow 00:04:22.419$ if you use it in

 $00{:}04{:}22.419 \dashrightarrow 00{:}04{:}24.500$ early stage disease, it increased

NOTE Confidence: 0.97528654

 $00:04:24.500 \longrightarrow 00:04:25.539$ the cure rate by about

NOTE Confidence: 0.97528654

 $00:04:25.539 \longrightarrow 00:04:26.580$ fifty percent. So it was

NOTE Confidence: 0.97528654

 $00:04:26.580 \longrightarrow 00:04:27.380$ a clear breakthrough,

NOTE Confidence: 0.9414148

00:04:29.587 --> 00:04:30.435 with the with this HER2

NOTE Confidence: 0.9414148

 $00:04:30.435 \longrightarrow 00:04:31.735$ targeted therapy introduction.

NOTE Confidence: 0.9794588

 $00:04:33.075 \longrightarrow 00:04:34.275$ And it really, in many

NOTE Confidence: 0.9794588

 $00:04:34.275 \longrightarrow 00:04:35.555$ ways, met this met the

NOTE Confidence: 0.9794588

 $00:04:35.555 \longrightarrow 00:04:36.815$ criteria of,

NOTE Confidence: 0.8419897

00:04:38.435 --> 00:04:40.295 the Nobel laureate Paul Ehrlich's,

NOTE Confidence: 0.9625053

 $00:04:40.835 \longrightarrow 00:04:41.875$ idea of a of a

NOTE Confidence: 0.9625053

 $00:04:41.875 \longrightarrow 00:04:42.375$ magic

NOTE Confidence: 0.7817173

 $00{:}04{:}43.350 \dashrightarrow 00{:}04{:}44.150$ bullet, a a drug

NOTE Confidence: 0.7817173

 $00:04:44.150 \longrightarrow 00:04:45.130$ that specifically

NOTE Confidence: 0.936007

 $00:04:45.430 \longrightarrow 00:04:45.930$ targets,

 $00:04:46.630 \longrightarrow 00:04:48.790$ a pathogen by while sparing

NOTE Confidence: 0.973109

 $00:04:48.790 \longrightarrow 00:04:50.790$ normal tissues. And, actually, doctor

NOTE Confidence: 0.973109

00:04:50.790 --> 00:04:51.850 Ehrlich was thinking,

NOTE Confidence: 0.98390007

00:04:53.510 --> 00:04:55.690 about chemicals and chemical dyes,

NOTE Confidence: 0.9365901

 $00:04:56.135 \longrightarrow 00:04:57.335$ originally, but but we use

NOTE Confidence: 0.9365901

 $00:04:57.335 \longrightarrow 00:04:58.775$ it in terms of, thinking

NOTE Confidence: 0.9365901

 $00{:}04{:}58.775 \dashrightarrow 00{:}05{:}01.015$ about antibody antibiotics and and

NOTE Confidence: 0.9365901

 $00:05:01.015 \longrightarrow 00:05:01.515$ antibodies,

NOTE Confidence: 0.9755736

 $00:05:01.975 \longrightarrow 00:05:03.575$ as well. So this feels

NOTE Confidence: 0.9755736

 $00:05:03.575 \longrightarrow 00:05:04.935$ like it it met those

NOTE Confidence: 0.9755736

 $00:05:04.935 \longrightarrow 00:05:05.435$ criteria.

NOTE Confidence: 0.989305

 $00:05:06.695 \longrightarrow 00:05:07.595$ But the problem,

NOTE Confidence: 0.9176836

00:05:08.130 --> 00:05:09.910 particularly in HER2 positive disease,

NOTE Confidence: 0.99971724

 $00:05:10.770 \longrightarrow 00:05:11.590$ was that

NOTE Confidence: 0.9886

 $00:05:12.690 \longrightarrow 00:05:14.210$ for trastuzumab really to work,

NOTE Confidence: 0.9886

 $00:05:14.210 \longrightarrow 00:05:15.830$ you need to have chemotherapy

 $00:05:16.050 \longrightarrow 00:05:16.930$ around. You need to have

NOTE Confidence: 0.9886

 $00{:}05{:}16.930 \dashrightarrow 00{:}05{:}18.370$ some type of cytotoxic agent,

NOTE Confidence: 0.9886

 $00:05:18.370 \longrightarrow 00:05:19.570$ and that's because one of

NOTE Confidence: 0.9886

 $00:05:19.570 \longrightarrow 00:05:21.255$ the things trastuzumab does is

NOTE Confidence: 0.9886

 $00:05:21.495 \longrightarrow 00:05:22.235$ helps encourage,

NOTE Confidence: 0.8733447

 $00:05:23.015 \longrightarrow 00:05:24.535$ apoptosis when you need something

NOTE Confidence: 0.8733447 00:05:24.535 --> 00:05:25.015 to, NOTE Confidence: 0.9808693

 $00:05:25.495 \longrightarrow 00:05:27.335$ produce that apoptosis, and that's

NOTE Confidence: 0.9808693

 $00:05:27.335 \longrightarrow 00:05:29.735$ where chemotherapy comes in. But,

NOTE Confidence: 0.9808693

 $00:05:29.735 \longrightarrow 00:05:30.535$ you know, you have this

NOTE Confidence: 0.9808693

 $00:05:30.535 \longrightarrow 00:05:31.355$ very targeted

NOTE Confidence: 0.99373055

 $00:05:31.815 \longrightarrow 00:05:32.315$ antibody,

NOTE Confidence: 0.9862412

 $00:05:32.855 \longrightarrow 00:05:34.339$ the magic bullet, and then

NOTE Confidence: 0.9862412

00:05:34.339 --> 00:05:35.720 you throw in non targeted

NOTE Confidence: 0.9862412

 $00:05:35.779 \longrightarrow 00:05:37.220$ chemotherapy. So you lose some

 $00:05:37.220 \longrightarrow 00:05:38.039$ of your magicness,

NOTE Confidence: 0.97689116

 $00:05:38.900 \longrightarrow 00:05:39.860$ when you have to have

NOTE Confidence: 0.97689116

 $00:05:39.860 \longrightarrow 00:05:41.300$ chemotherapy around. So this was

NOTE Confidence: 0.97689116

 $00:05:41.300 \longrightarrow 00:05:42.979$ a perfect opportunity to take

NOTE Confidence: 0.97689116

 $00{:}05{:}42.979 \dashrightarrow 00{:}05{:}45.139$ advantage of this then very

NOTE Confidence: 0.97689116

 $00{:}05{:}45.139 \dashrightarrow 00{:}05{:}47.139$ new type of technology called

NOTE Confidence: 0.97689116

00:05:47.139 --> 00:05:48.520 an antibody drug conjugate,

NOTE Confidence: 0.9565972

 $00:05:49.220 \longrightarrow 00:05:49.720$ and,

NOTE Confidence: 0.91882885

 $00:05:50.285 \longrightarrow 00:05:50.925$ you know, this is a

NOTE Confidence: 0.91882885

 $00{:}05{:}50.925 \dashrightarrow 00{:}05{:}52.065$ very simplified diagram,

NOTE Confidence: 0.77042973

 $00:05:52.365 \longrightarrow 00:05:52.865$ obviously,

NOTE Confidence: 0.9953025

 $00:05:53.565 \longrightarrow 00:05:54.605$ but the idea of an

NOTE Confidence: 0.9953025

 $00:05:54.605 \longrightarrow 00:05:55.645$ ADC is you have an

NOTE Confidence: 0.9953025

 $00:05:55.645 \longrightarrow 00:05:57.565$ antibody targeting some cell surface

NOTE Confidence: 0.9953025

 $00:05:57.565 \longrightarrow 00:05:58.065$ protein,

NOTE Confidence: 0.9952884

 $00:05:58.845 \longrightarrow 00:06:00.285$ and you have a very

 $00{:}06{:}00.285 --> 00{:}06{:}00.785 \ {\rm cytotoxic},$

NOTE Confidence: 0.923013

00:06:01.964 --> 00:06:03.985 moiety, typically a potent chemotherapy,

NOTE Confidence: 0.923013

 $00:06:04.285 \longrightarrow 00:06:05.665$ and you attach them,

NOTE Confidence: 0.9786851

 $00:06:06.070 \longrightarrow 00:06:07.930$ with a linker that's typically

NOTE Confidence: 0.9426519

 $00:06:08.310 \longrightarrow 00:06:10.150$ cleaved once or the idea

NOTE Confidence: 0.9426519

 $00:06:10.150 \longrightarrow 00:06:11.350$ is that it's cleaved once

NOTE Confidence: 0.9426519 00:06:11.350 --> 00:06:11.850 the NOTE Confidence: 0.95355743

NOTE Confidence: 0.95555745

 $00{:}06{:}12.630 \dashrightarrow 00{:}06{:}13.990$ the conjugate gets inside of

NOTE Confidence: 0.95355743

 $00:06:13.990 \longrightarrow 00:06:14.650$ a cell.

NOTE Confidence: 0.9858006

00:06:15.029 --> 00:06:16.150 With the overall goal that

NOTE Confidence: 0.9858006

00:06:16.150 --> 00:06:17.610 you're gonna increase the efficacy,

NOTE Confidence: 0.981463

 $00:06:18.550 \longrightarrow 00:06:20.205$ of of the of the

NOTE Confidence: 0.981463

 $00{:}06{:}20.205 \dashrightarrow 00{:}06{:}22.045$ cytotoxic drug while decreasing the

NOTE Confidence: 0.981463

 $00:06:22.045 \longrightarrow 00:06:22.545$ toxicity

NOTE Confidence: 0.9970787

 $00:06:23.005 \longrightarrow 00:06:25.345$ by selectively delivering this to,

 $00:06:25.725 \longrightarrow 00:06:26.925$ the cancer cells. So these

NOTE Confidence: 0.97333044

 $00{:}06{:}26.925 \dashrightarrow 00{:}06{:}28.765$ are the conjugates you talk

NOTE Confidence: 0.97333044

 $00:06:28.765 \longrightarrow 00:06:29.265$ about,

NOTE Confidence: 0.9938754

00:06:30.125 --> 00:06:32.065 guided missiles, smart bombs,

NOTE Confidence: 0.71461916

 $00:06:33.389 \longrightarrow 00:06:34.289$ whatever warmongering,

NOTE Confidence: 0.917708

00:06:34.910 --> 00:06:36.430 terminology you wanna use, but

NOTE Confidence: 0.917708

 $00:06:36.430 \longrightarrow 00:06:37.650$ that's the general idea.

NOTE Confidence: 0.9934348

 $00:06:38.910 \longrightarrow 00:06:39.729$ And so

NOTE Confidence: 0.95523626

 $00:06:40.270 \longrightarrow 00:06:41.470$ the first of these, as

NOTE Confidence: 0.95523626

00:06:41.470 --> 00:06:43.250 Eric had mentioned, to really,

NOTE Confidence: 0.95915526

 $00{:}06{:}43.949 \dashrightarrow 00{:}06{:}46.029$ become clinically useful in solid

NOTE Confidence: 0.95915526

 $00:06:46.029 \longrightarrow 00:06:47.470$ cancers was this one called

NOTE Confidence: 0.95915526

00:06:47.470 --> 00:06:48.705 trastuzumab emtansine,

NOTE Confidence: 0.98377866

 $00:06:49.404 \longrightarrow 00:06:50.605$ and the idea of ADCs

NOTE Confidence: 0.98377866

 $00:06:50.605 \longrightarrow 00:06:51.645$ actually had been around for

NOTE Confidence: 0.98377866

 $00{:}06{:}51.645 --> 00{:}06{:}52.845$ decades. The problem is none

 $00{:}06{:}52.845 --> 00{:}06{:}54.365$ of them really worked, and

NOTE Confidence: 0.98377866

 $00{:}06{:}54.365 {\:\dashrightarrow\:} 00{:}06{:}55.565$ the main problem they were

NOTE Confidence: 0.98377866

 $00:06:55.565 \longrightarrow 00:06:56.545$ having in the past,

NOTE Confidence: 0.9410742

 $00:06:57.085 \longrightarrow 00:06:59.425$ was that was toxicity because

NOTE Confidence: 0.9862693

 $00:06:59.805 \longrightarrow 00:07:01.770$ the linker tended to break,

NOTE Confidence: 0.9364775 00:07:02.170 --> 00:07:02.570 in, NOTE Confidence: 0.87099266

 $00:07:03.210 \longrightarrow 00:07:05.050$ in in blood. So you

NOTE Confidence: 0.87099266

 $00:07:05.050 \longrightarrow 00:07:05.790$ had disassociation,

NOTE Confidence: 0.89171654

 $00:07:06.170 \longrightarrow 00:07:07.290$ showed you had lots of

NOTE Confidence: 0.89171654

 $00:07:07.290 \longrightarrow 00:07:08.350$ free cytotoxic,

NOTE Confidence: 0.95712495

 $00:07:08.970 \longrightarrow 00:07:10.170$ drug floating around, and that

NOTE Confidence: 0.95712495

 $00:07:10.170 \longrightarrow 00:07:11.950$ was causing nonspecific toxicity.

NOTE Confidence: 0.8922796

 $00:07:12.890 \longrightarrow 00:07:13.630$ And so,

NOTE Confidence: 0.9781911

 $00:07:14.974 \longrightarrow 00:07:16.495$ what was different about TDM

NOTE Confidence: 0.9781911

00:07:16.495 --> 00:07:17.935 one, was that it it

 $00:07:17.935 \longrightarrow 00:07:19.235$ started with this trastuzumab

NOTE Confidence: 0.90824634

 $00:07:19.535 \longrightarrow 00:07:20.035$ monoclonal.

NOTE Confidence: 0.8802247

 $00:07:23.935 \longrightarrow 00:07:25.074$ Oh, it's a touch screen.

NOTE Confidence: 0.9811704

00:07:25.375 --> 00:07:26.754 It starts with this trastuzumab

NOTE Confidence: 0.9811704

 $00:07:26.974 \longrightarrow 00:07:27.474$ monoclonal,

NOTE Confidence: 0.9615276

 $00{:}07{:}28.930 \dashrightarrow 00{:}07{:}30.210$ targeting HER2 that we talked

NOTE Confidence: 0.9615276

 $00:07:30.210 \longrightarrow 00:07:31.830$ about. It had a,

NOTE Confidence: 0.9350501

 $00:07:33.410 \longrightarrow 00:07:35.650$ microtubule inhibitor payload, and the

NOTE Confidence: 0.9350501

 $00:07:35.650 \longrightarrow 00:07:36.690$ linker in this case was

NOTE Confidence: 0.9350501

 $00{:}07{:}36.690 \dashrightarrow 00{:}07{:}38.370$ actually not not cleavable. So

NOTE Confidence: 0.9350501

00:07:38.370 --> 00:07:39.409 I talked about the idea

NOTE Confidence: 0.9350501

 $00:07:39.409 \longrightarrow 00:07:40.770$ of general user cleavable. This

NOTE Confidence: 0.9350501

 $00:07:40.770 \longrightarrow 00:07:41.750$ one was not.

NOTE Confidence: 0.9938519

 $00:07:42.610 \longrightarrow 00:07:43.110$ And

NOTE Confidence: 0.9687788

 $00:07:43.885 \longrightarrow 00:07:44.925$ the story is kind of

NOTE Confidence: 0.9687788

 $00{:}07{:}44.925 \dashrightarrow 00{:}07{:}46.845$ interesting how that came about,

 $00{:}07{:}46.845 \to 00{:}07{:}47.965$ and I promise this is

NOTE Confidence: 0.9687788

00:07:47.965 --> 00:07:49.005 the only chemistry I will

NOTE Confidence: 0.9687788

 $00:07:49.005 \longrightarrow 00:07:50.145$ be talking about today.

NOTE Confidence: 0.9977537

00:07:51.085 --> 00:07:52.445 So when Genentech was trying

NOTE Confidence: 0.9977537

 $00:07:52.445 \longrightarrow 00:07:53.665$ to develop this drug,

NOTE Confidence: 0.98500836

 $00:07:54.285 \longrightarrow 00:07:55.245$ they were really trying to

NOTE Confidence: 0.98500836

 $00:07:55.245 \longrightarrow 00:07:56.705$ make for a more stable,

NOTE Confidence: 0.9714307

 $00:07:57.480 \longrightarrow 00:07:58.840$ linker. Because, again, the problem

NOTE Confidence: 0.9714307

 $00:07:58.840 \longrightarrow 00:07:59.560$ in the past would be

NOTE Confidence: 0.9714307

 $00:07:59.560 \longrightarrow 00:08:00.680$ the linkers weren't stable, and

NOTE Confidence: 0.9714307

 $00{:}08{:}00.680 \dashrightarrow 00{:}08{:}01.900$ so you were getting toxicity.

NOTE Confidence: 0.9714307

 $00:08:02.040 \longrightarrow 00:08:02.920$ So they said, okay. Well,

NOTE Confidence: 0.9714307

 $00:08:02.920 \longrightarrow 00:08:03.800$ let's try to make this

NOTE Confidence: 0.9714307

 $00:08:03.800 \longrightarrow 00:08:05.080$ super stable. And so they

NOTE Confidence: 0.9714307

 $00:08:05.080 \longrightarrow 00:08:06.600$ were testing a number of

 $00:08:06.600 \longrightarrow 00:08:07.100$ different,

NOTE Confidence: 0.75640595

00:08:08.280 --> 00:08:10.360 chemical structures, looking different,

NOTE Confidence: 0.8251052

00:08:11.285 --> 00:08:11.945 link different,

NOTE Confidence: 0.99374896

 $00:08:12.645 \longrightarrow 00:08:13.145$ cleavable

NOTE Confidence: 0.9886522

 $00:08:13.525 \longrightarrow 00:08:14.025$ linker,

NOTE Confidence: 0.98095655

 $00:08:14.725 \longrightarrow 00:08:16.805$ chemistries and and distances between

NOTE Confidence: 0.98095655

 $00:08:16.805 \longrightarrow 00:08:17.925$ the antibody and the and

NOTE Confidence: 0.98095655

 $00:08:17.925 \longrightarrow 00:08:18.585$ the payload.

NOTE Confidence: 0.9782314

 $00{:}08{:}19.125 \dashrightarrow 00{:}08{:}20.165$ And they threw in at

NOTE Confidence: 0.9782314

00:08:20.165 --> 00:08:21.785 the bottom of their experiments

NOTE Confidence: 0.9782314

 $00:08:21.845 \longrightarrow 00:08:23.145$ this, MCC

NOTE Confidence: 0.9802414

 $00:08:23.445 \longrightarrow 00:08:24.990$ linker, which is basically non

NOTE Confidence: 0.9802414

 $00:08:24.990 \longrightarrow 00:08:26.030$ cleavable. And they put that

NOTE Confidence: 0.9802414

 $00:08:26.030 \longrightarrow 00:08:27.230$ there as a negative control

NOTE Confidence: 0.9802414

 $00:08:27.230 \longrightarrow 00:08:28.350$ because, of course, this wasn't

NOTE Confidence: 0.9802414

00:08:28.350 --> 00:08:29.070 gonna work,

00:08:29.470 --> 00:08:30.110 because if you don't have

NOTE Confidence: 0.9825214

 $00{:}08{:}30.110 --> 00{:}08{:}31.550$ a cleavable linker, then you

NOTE Confidence: 0.9825214

 $00:08:31.550 \longrightarrow 00:08:32.830$ can't release the drug to

NOTE Confidence: 0.9825214

 $00{:}08{:}32.830 \to 00{:}08{:}34.429$ kill the cancer cell. So

NOTE Confidence: 0.9825214

 $00:08:34.429 \longrightarrow 00:08:35.390$ they throw that they threw

NOTE Confidence: 0.9825214

 $00:08:35.390 \longrightarrow 00:08:36.270$ that in there just as

NOTE Confidence: 0.9825214

 $00:08:36.270 \longrightarrow 00:08:36.850$ a control.

NOTE Confidence: 0.9670153

 $00:08:37.605 \longrightarrow 00:08:38.885$ And what they found was,

NOTE Confidence: 0.9670153

 $00:08:38.885 \longrightarrow 00:08:41.605$ as expected, that the the

NOTE Confidence: 0.9670153

 $00{:}08{:}41.605 \dashrightarrow 00{:}08{:}44.105$ non cleavable linker, the MCC

NOTE Confidence: 0.9670153

 $00:08:44.165 \longrightarrow 00:08:45.205$ in blue there at the

NOTE Confidence: 0.9670153

 $00:08:45.205 \longrightarrow 00:08:46.965$ top, was very stable in

NOTE Confidence: 0.9670153

00:08:46.965 --> 00:08:48.245 plasma, the most stable, and

NOTE Confidence: 0.9670153

 $00:08:48.245 \longrightarrow 00:08:50.485$ it was, stable different ways

NOTE Confidence: 0.9670153

 $00:08:50.485 \longrightarrow 00:08:51.385$ looking at it.

 $00:08:52.860 \longrightarrow 00:08:54.220$ And it actually was pretty

NOTE Confidence: 0.8665641

00:08:54.220 --> 00:08:55.600 well tolerated because,

NOTE Confidence: 0.9500453

 $00:08:56.140 \longrightarrow 00:08:57.340$ you know, the there you

NOTE Confidence: 0.9500453

 $00:08:57.340 \longrightarrow 00:08:59.200$ weren't having this, disassociation

NOTE Confidence: 0.91005737

 $00:08:59.660 \longrightarrow 00:09:01.500$ in blood, but the surprise

NOTE Confidence: 0.91005737

 $00:09:01.500 \longrightarrow 00:09:02.620$ was is also was the

NOTE Confidence: 0.91005737

 $00:09:02.620 \longrightarrow 00:09:03.360$ most effective.

NOTE Confidence: 0.935747

 $00:09:03.900 \longrightarrow 00:09:04.860$ And so the blue line

NOTE Confidence: 0.935747

 $00:09:04.860 \longrightarrow 00:09:05.900$ at the bottom there is

NOTE Confidence: 0.935747

 $00:09:05.900 \longrightarrow 00:09:07.420$ the is the TDM one,

NOTE Confidence: 0.935747

 $00:09:07.420 \longrightarrow 00:09:07.875$ essentially.

NOTE Confidence: 0.9113395

00:09:13.715 --> 00:09:15.075 Conjugate, the TDM one binds

NOTE Confidence: 0.9113395

 $00:09:15.075 \longrightarrow 00:09:16.135$ to the cell surface,

NOTE Confidence: 0.9051717

 $00:09:16.595 \longrightarrow 00:09:17.795$ on the HERT the HERT

NOTE Confidence: 0.9051717

 $00:09:17.795 \longrightarrow 00:09:19.335$ two. It gets internalized

NOTE Confidence: 0.833535

 $00:09:19.875 \longrightarrow 00:09:21.815$ into lysosomes where the proteases

 $00:09:22.035 \longrightarrow 00:09:22.770$ actually were

NOTE Confidence: 0.8312259

 $00:09:23.730 \longrightarrow 00:09:26.230$ would dissolve the antibody essentially,

NOTE Confidence: 0.95603013

 $00:09:26.610 \longrightarrow 00:09:28.390$ and so you you didn't

NOTE Confidence: 0.95603013

 $00:09:28.530 \longrightarrow 00:09:29.590$ break the linker.

NOTE Confidence: 0.9087149

 $00:09:29.970 \longrightarrow 00:09:31.410$ It's just the the amino

NOTE Confidence: 0.9087149

 $00:09:31.410 \longrightarrow 00:09:32.690$ acid, the lysine from the

NOTE Confidence: 0.9087149

 $00:09:32.690 \longrightarrow 00:09:34.050$ antibody where it's connected would

NOTE Confidence: 0.9087149

 $00:09:34.050 \longrightarrow 00:09:34.790$ just leave,

NOTE Confidence: 0.98053235

 $00:09:35.250 \longrightarrow 00:09:36.530$ with the with the with

NOTE Confidence: 0.98053235

 $00:09:36.530 \longrightarrow 00:09:37.965$ the drug attached to it.

NOTE Confidence: 0.9667171

 $00:09:38.445 \longrightarrow 00:09:39.645$ And so that's how this

NOTE Confidence: 0.9667171

00:09:39.645 --> 00:09:41.085 drug was working, and that's

NOTE Confidence: 0.9667171

 $00{:}09{:}41.085 \dashrightarrow 00{:}09{:}42.225$ how you got this selective

NOTE Confidence: 0.9667171

 $00:09:42.285 \longrightarrow 00:09:44.225$ delivery of the DM one,

NOTE Confidence: 0.9605939

 $00:09:44.684 \longrightarrow 00:09:46.045$ was because the antibody was

 $00:09:46.045 \longrightarrow 00:09:46.845$ getting just,

NOTE Confidence: 0.98285687

 $00:09:47.805 \longrightarrow 00:09:48.305$ proteolyzed.

NOTE Confidence: 0.9787235

 $00:09:49.485 \longrightarrow 00:09:51.405$ So, as Eric mentioned, we

NOTE Confidence: 0.9787235

 $00:09:51.405 \longrightarrow 00:09:52.605$ were involved in this phase

NOTE Confidence: 0.9787235

 $00:09:52.605 \longrightarrow 00:09:53.425$ one trial,

NOTE Confidence: 0.95791054

 $00:09:54.290 \longrightarrow 00:09:55.490$ the phase first in human

NOTE Confidence: 0.95791054

 $00:09:55.490 \longrightarrow 00:09:57.089$ study of TDM one. We

NOTE Confidence: 0.95791054

 $00:09:57.089 \longrightarrow 00:09:59.089$ enrolled patients who had had

NOTE Confidence: 0.95791054

 $00:09:59.089 \longrightarrow 00:10:01.330$ already progressed on multiple, HER2

NOTE Confidence: 0.95791054

 $00:10:01.330 \longrightarrow 00:10:02.309$ directed therapies,

NOTE Confidence: 0.94723314

 $00:10:03.010 \longrightarrow 00:10:04.770$ and despite that and despite

NOTE Confidence: 0.94723314

 $00:10:04.770 \longrightarrow 00:10:05.970$ this being just the phase

NOTE Confidence: 0.94723314

 $00:10:05.970 \longrightarrow 00:10:07.184$ one, there was a lot

NOTE Confidence: 0.94723314

 $00:10:07.184 \longrightarrow 00:10:08.785$ of efficacy seen. So the

NOTE Confidence: 0.94723314

00:10:08.785 --> 00:10:10.645 forty four percent response rate,

NOTE Confidence: 0.9619588

 $00{:}10{:}11.505 \dashrightarrow 00{:}10{:}13.184$ these were durable responses, the

 $00:10:13.184 \longrightarrow 00:10:14.465$ progression free survival is about

NOTE Confidence: 0.9619588

00:10:14.465 --> 00:10:15.985 ten months, and seventy three

NOTE Confidence: 0.9619588

 $00:10:15.985 \longrightarrow 00:10:17.184$ percent of patients had some

NOTE Confidence: 0.9619588

 $00:10:17.184 \longrightarrow 00:10:17.684$ benefit.

NOTE Confidence: 0.99181175

 $00:10:18.865 \longrightarrow 00:10:20.165$ And at the same time,

NOTE Confidence: 0.99181175

 $00:10:20.390 \longrightarrow 00:10:21.690$ not only was it efficacious,

NOTE Confidence: 0.9682525

 $00:10:22.710 \longrightarrow 00:10:23.990$ but it was very well

NOTE Confidence: 0.9682525

 $00:10:23.990 \longrightarrow 00:10:25.830$ tolerated. So we didn't see

NOTE Confidence: 0.9682525

 $00:10:25.830 \longrightarrow 00:10:27.670$ the usual chemotherapy side effects,

NOTE Confidence: 0.9682525

 $00:10:27.670 \longrightarrow 00:10:29.270$ people generally didn't get nauseous

NOTE Confidence: 0.9682525 00:10:29.270 --> 00:10:29.770 or, NOTE Confidence: 0.9266493

 $00:10:30.150 \longrightarrow 00:10:32.230$ have neutropenia or neuropathy or

NOTE Confidence: 0.9266493

 $00:10:32.230 \longrightarrow 00:10:32.890$ hair loss,

NOTE Confidence: 0.97095937

 $00:10:34.295 \longrightarrow 00:10:35.195$ And so it

NOTE Confidence: 0.97471017

 $00:10:35.495 \longrightarrow 00:10:36.535$ it probably and and the

 $00:10:36.535 \longrightarrow 00:10:37.355$ reason why

NOTE Confidence: 0.97143644

00:10:37.735 --> 00:10:39.015 was because the amount of

NOTE Confidence: 0.97143644

 $00:10:39.015 \longrightarrow 00:10:40.695$ the free payload, which is

NOTE Confidence: 0.97143644

 $00:10:40.695 \longrightarrow 00:10:42.295$ in black here, was very

NOTE Confidence: 0.97143644

00:10:42.295 --> 00:10:43.735 low. It was negligible. So

NOTE Confidence: 0.97143644

 $00{:}10{:}43.735 \dashrightarrow 00{:}10{:}45.335$ it really wasn't releasing that

NOTE Confidence: 0.97143644

 $00:10:45.335 \longrightarrow 00:10:45.835$ payload,

NOTE Confidence: 0.98470044

 $00:10:46.215 \longrightarrow 00:10:47.434$ very quickly as

NOTE Confidence: 0.97915673

 $00{:}10{:}47.735 \dashrightarrow 00{:}10{:}49.335$ the hope, as as was

NOTE Confidence: 0.97915673

 $00:10:49.335 \longrightarrow 00:10:49.835$ hoped.

NOTE Confidence: 0.95760727

 $00:10:50.590 \longrightarrow 00:10:51.710$ We then moved to a

NOTE Confidence: 0.95760727

 $00:10:51.710 \longrightarrow 00:10:53.230$ phase two trial again in

NOTE Confidence: 0.95760727

00:10:53.230 --> 00:10:54.990 very heavily pretreated patients, and

NOTE Confidence: 0.95760727

 $00:10:54.990 \longrightarrow 00:10:56.690$ I'm just showing this because

NOTE Confidence: 0.95760727

 $00:10:56.750 \longrightarrow 00:10:57.950$ it's probably the first trial

NOTE Confidence: 0.95760727

 $00{:}10{:}57.950 --> 00{:}10{:}59.150$ that that Eric,

00:10:59.630 --> 00:11:00.990 and Pat Larusso and I

NOTE Confidence: 0.9677108

00:11:00.990 --> 00:11:01.650 did together,

NOTE Confidence: 0.97855186

 $00:11:02.590 \longrightarrow 00:11:03.570$ back in the day.

NOTE Confidence: 0.93975

 $00:11:04.644 \longrightarrow 00:11:05.524$ And we saw the same

NOTE Confidence: 0.93975

 $00:11:05.524 \longrightarrow 00:11:07.845$ thing heavily pretreated patients, response

NOTE Confidence: 0.93975

 $00:11:07.845 \longrightarrow 00:11:08.665$ rate was

NOTE Confidence: 0.94728744

 $00:11:09.204 \longrightarrow 00:11:10.885$ was was reasonable, and and

NOTE Confidence: 0.94728744

 $00:11:10.885 \longrightarrow 00:11:12.345$ and, it was effective.

NOTE Confidence: 0.90690297

 $00:11:12.885 \longrightarrow 00:11:13.925$ And then we moved on

NOTE Confidence: 0.90690297

 $00:11:13.925 \longrightarrow 00:11:15.144$ to do a a registrational

NOTE Confidence: 0.9589143

 $00{:}11{:}15.445 --> 00{:}11{:}16.345 \text{ phase three,}$

NOTE Confidence: 0.9845607

 $00:11:16.725 \longrightarrow 00:11:18.380$ two phase three studies. This

NOTE Confidence: 0.9845607

 $00:11:18.380 \longrightarrow 00:11:19.980$ one, in patients who had

NOTE Confidence: 0.9845607

 $00:11:19.980 \longrightarrow 00:11:21.820$ already progressed on all standard

NOTE Confidence: 0.9845607

 $00:11:21.820 \longrightarrow 00:11:22.320$ therapies,

 $00:11:23.260 \longrightarrow 00:11:24.779$ showing that TDM one was

NOTE Confidence: 0.93878126

 $00:11:24.779 \longrightarrow 00:11:26.460$ better than the standard of

NOTE Confidence: 0.93878126

 $00:11:26.460 \longrightarrow 00:11:27.740$ care in terms of survival

NOTE Confidence: 0.93878126

 $00:11:27.740 \longrightarrow 00:11:29.660$ and PFS and was less

NOTE Confidence: 0.9387812600:11:29.660 --> 00:11:30.160 toxic.

NOTE Confidence: 0.95076895

00:11:31.075 --> 00:11:31.654 And similarly,

NOTE Confidence: 0.8555104

 $00:11:32.355 \longrightarrow 00:11:34.035$ this is a earlier line

NOTE Confidence: 0.8555104

00:11:34.035 --> 00:11:34.934 trial again,

NOTE Confidence: 0.9808351

00:11:35.554 --> 00:11:36.695 showing better,

NOTE Confidence: 0.9530634

00:11:37.315 --> 00:11:39.554 efficacy and less toxicity compared

NOTE Confidence: 0.9530634

 $00:11:39.554 \longrightarrow 00:11:40.834$ to the standard of care.

NOTE Confidence: 0.9530634

 $00:11:40.834 \longrightarrow 00:11:42.195$ So these trials led to

NOTE Confidence: 0.9530634

 $00:11:42.195 \longrightarrow 00:11:43.554$ the approval of of PDM

NOTE Confidence: 0.9530634

 $00:11:43.554 \longrightarrow 00:11:44.675$ one as you heard, I

NOTE Confidence: 0.9530634

00:11:44.675 --> 00:11:46.054 think, in two thousand twelve,

NOTE Confidence: 0.9904747

 $00:11:46.640 \longrightarrow 00:11:47.780$ as the first ADC,

 $00:11:48.160 \longrightarrow 00:11:49.220$ in solid cancers,

NOTE Confidence: 0.9138733

 $00:11:51.840 \longrightarrow 00:11:52.420$ and really,

NOTE Confidence: 0.9578809

 $00:11:53.760 \longrightarrow 00:11:54.800$ kind of it did a

NOTE Confidence: 0.9578809

 $00:11:54.800 \longrightarrow 00:11:56.100$ couple of things. It validated

NOTE Confidence: 0.9578809

 $00:11:56.240 \longrightarrow 00:11:57.440 \text{ HER2}$ as a as a

NOTE Confidence: 0.9578809

 $00:11:57.440 \longrightarrow 00:11:58.800$ target for an antibody drug

NOTE Confidence: 0.9578809

00:11:58.800 --> 00:11:59.300 conjugate,

NOTE Confidence: 0.9355089

00:11:59.760 --> 00:12:00.740 but most importantly,

NOTE Confidence: 0.9994628

 $00:12:01.565 \longrightarrow 00:12:03.024$ as being the first success

NOTE Confidence: 0.9994628

 $00:12:03.084 \longrightarrow 00:12:04.385$ in a common cancer,

NOTE Confidence: 0.9992212

 $00:12:04.845 \longrightarrow 00:12:06.065$ it led to the widespread

NOTE Confidence: 0.96833163

00:12:06.524 --> 00:12:08.385 development of ADCs across,

NOTE Confidence: 0.99923617

00:12:08.765 --> 00:12:09.584 tumor types.

NOTE Confidence: 0.9793711

 $00:12:10.365 \longrightarrow 00:12:12.045$ So, at last check, there

NOTE Confidence: 0.9793711

 $00:12:12.045 \longrightarrow 00:12:13.325$ were three hundred and seventy

00:12:13.325 --> 00:12:14.865 ADCs in clinical development,

NOTE Confidence: 0.9775188

 $00:12:15.970 \longrightarrow 00:12:17.890$ again, spurred on by, by

NOTE Confidence: 0.9775188

 $00:12:17.890 \longrightarrow 00:12:19.090$ the success of of this

NOTE Confidence: 0.9775188

 $00:12:19.090 \longrightarrow 00:12:19.590$ drug.

NOTE Confidence: 0.9944831

 $00:12:20.690 \longrightarrow 00:12:22.450$ And it also inspired people

NOTE Confidence: 0.9944831

 $00:12:22.450 \longrightarrow 00:12:23.570$ to start looking at better

NOTE Confidence: 0.9944831

 $00{:}12{:}23.570 \dashrightarrow 00{:}12{:}25.490$ technologies for for linkers and

NOTE Confidence: 0.9944831

 $00:12:25.490 \longrightarrow 00:12:25.990$ payloads,

NOTE Confidence: 0.9797646

 $00{:}12{:}26.450 \dashrightarrow 00{:}12{:}28.130$ and that's probably been best

NOTE Confidence: 0.9797646

00:12:28.130 --> 00:12:30.309 exemplified by this next generation,

NOTE Confidence: 0.9006675

 $00{:}12{:}31.165 --> 00{:}12{:}33.245$ drug targeting HER2, which is

NOTE Confidence: 0.9006675

 $00:12:33.245 \longrightarrow 00:12:33.905$ called trastuzumabdoroxican,

NOTE Confidence: 0.9801071

00:12:35.005 --> 00:12:36.045 which differs in a few

NOTE Confidence: 0.9801071

 $00:12:36.045 \longrightarrow 00:12:37.965$ ways. It's no longer it

NOTE Confidence: 0.9801071

 $00:12:37.965 \longrightarrow 00:12:38.845$ has a different class of

NOTE Confidence: 0.9801071

00:12:38.845 --> 00:12:40.225 payload. It's not a microtubule

 $00{:}12{:}40.285 {\: -->\:} 00{:}12{:}41.425$ inhibitor. It's a topoisomerase

NOTE Confidence: 0.96810246

 $00:12:41.725 \longrightarrow 00:12:42.225$ inhibitor.

NOTE Confidence: 0.95939803

00:12:42.845 --> 00:12:44.205 But perhaps the most unique

NOTE Confidence: 0.95939803

00:12:44.205 --> 00:12:44.705 feature,

NOTE Confidence: 0.86851823

 $00:12:45.120 \longrightarrow 00:12:46.720$ was it it evidence this

NOTE Confidence: 0.86851823

 $00:12:46.720 \longrightarrow 00:12:48.420$ thing called by stander effect.

NOTE Confidence: 0.9656682

 $00:12:49.440 \longrightarrow 00:12:50.400$ And it had and the

NOTE Confidence: 0.9656682

 $00:12:50.400 \longrightarrow 00:12:51.120$ reason it did this is

NOTE Confidence: 0.9656682

 $00:12:51.120 \longrightarrow 00:12:51.920$ because it had a different

NOTE Confidence: 0.9656682

 $00:12:51.920 \longrightarrow 00:12:53.780$ linker that that was cleavable,

NOTE Confidence: 0.91989946

 $00:12:54.400 \longrightarrow 00:12:55.700$ by, proteases,

NOTE Confidence: 0.9319527

 $00:12:56.640 \longrightarrow 00:12:58.080$ inside the cell and that

NOTE Confidence: 0.9319527

 $00:12:58.080 \longrightarrow 00:12:59.700$ led to this by stander effect,

NOTE Confidence: 0.9319527

 $00:12:59.985 \longrightarrow 00:13:00.485$ which,

NOTE Confidence: 0.99231684

 $00:13:00.865 \longrightarrow 00:13:02.165$ I'll try to depict,

 $00:13:02.625 \longrightarrow 00:13:04.225$ here. So if you the

NOTE Confidence: 0.92611855

 $00{:}13{:}04.225 \dashrightarrow 00{:}13{:}06.545$ conjugate now binds, again, binds

NOTE Confidence: 0.92611855

 $00:13:06.545 \longrightarrow 00:13:07.505$ to the surface of cell,

NOTE Confidence: 0.92611855

00:13:07.505 --> 00:13:09.605 gets internalized, the payload's released,

NOTE Confidence: 0.92611855

 $00:13:09.745 \longrightarrow 00:13:11.745$ and if you'll excuse my,

NOTE Confidence: 0.92611855

 $00:13:12.065 \longrightarrow 00:13:13.445$ grade school animation,

NOTE Confidence: 0.9659213

 $00:13:15.230 \longrightarrow 00:13:16.590$ that once that payload is

NOTE Confidence: 0.9659213

 $00:13:16.590 \longrightarrow 00:13:17.410$ in the cytoplasm,

NOTE Confidence: 0.96748286

 $00{:}13{:}17.950 \dashrightarrow 00{:}13{:}19.550$ unlike TDM one, in this

NOTE Confidence: 0.96748286

 $00:13:19.550 \longrightarrow 00:13:21.870$ case there's no lysine attached

NOTE Confidence: 0.96748286

 $00:13:21.870 \longrightarrow 00:13:23.650$ to it, it's thus membrane

NOTE Confidence: 0.96748286

 $00:13:23.710 \longrightarrow 00:13:25.150$ permeable, and so it can

NOTE Confidence: 0.96748286

00:13:25.150 --> 00:13:26.830 diffuse outside the cell and

NOTE Confidence: 0.96748286

 $00:13:26.830 \longrightarrow 00:13:28.590$ kill neighboring cells, even if

NOTE Confidence: 0.96748286

00:13:28.590 --> 00:13:30.165 those neighboring cells don't have

NOTE Confidence: 0.96748286

00:13:30.165 --> 00:13:31.865 HER2 on their surface.

00:13:32.725 --> 00:13:34.325 Why is this important? Again,

NOTE Confidence: 0.9462955

 $00:13:34.325 \longrightarrow 00:13:35.684$ we're targeting a HER2 positive

NOTE Confidence: 0.9462955

 $00:13:35.684 \longrightarrow 00:13:37.125$ cancer. Why is it matter

NOTE Confidence: 0.9462955

 $00:13:37.125 \longrightarrow 00:13:38.565$ that this drug could work

NOTE Confidence: 0.9462955

 $00:13:38.565 \longrightarrow 00:13:40.085$ in cancers cells that don't

NOTE Confidence: 0.9462955

 $00:13:40.085 \longrightarrow 00:13:41.385$ have HER2 on them?

NOTE Confidence: 0.9439559

00:13:41.925 --> 00:13:42.425 Well,

NOTE Confidence: 0.94982296

 $00:13:42.929 \longrightarrow 00:13:43.970$ and I'm sorry. This and

NOTE Confidence: 0.94982296

00:13:43.970 --> 00:13:44.929 this just shows that this

NOTE Confidence: 0.94982296

 $00:13:44.929 \longrightarrow 00:13:46.850$ by stander effect really seems to

NOTE Confidence: 0.94982296

 $00:13:46.850 \longrightarrow 00:13:47.350$ work.

NOTE Confidence: 0.9828373

 $00:13:47.650 \longrightarrow 00:13:48.870$ So this is a xenograft,

NOTE Confidence: 0.9629165

00:13:50.130 --> 00:13:51.410 on the left of a

NOTE Confidence: 0.9629165

 $00{:}13{:}51.410 \dashrightarrow 00{:}13{:}53.010$ combination of a HER2 positive

NOTE Confidence: 0.9629165

00:13:53.010 --> 00:13:54.290 cell line and HER2 negative

 $00{:}13{:}54.290 \dashrightarrow 00{:}13{:}55.970$ cell line, HER2 positive stains

NOTE Confidence: 0.9629165

00:13:55.970 --> 00:13:56.470 brown,

NOTE Confidence: 0.7161095

 $00:13:57.010 \longrightarrow 00:13:57.990$ and by IHC.

NOTE Confidence: 0.90084183

 $00:13:59.115 \longrightarrow 00:14:00.075$ And if you treat with

NOTE Confidence: 0.90084183

 $00:14:00.075 \longrightarrow 00:14:00.795$ t d m one as

NOTE Confidence: 0.90084183

 $00:14:00.795 \longrightarrow 00:14:01.755$ shown in the middle,

NOTE Confidence: 0.9695701

 $00:14:02.155 \longrightarrow 00:14:03.434$ diagram, you kill off the

NOTE Confidence: 0.9695701

00:14:03.434 --> 00:14:04.715 HER2 positive cells, but you

NOTE Confidence: 0.9695701

00:14:04.715 --> 00:14:05.995 leave behind the HER2 negative

NOTE Confidence: 0.9695701

 $00{:}14{:}05.995 \dashrightarrow 00{:}14{:}07.675$ cells. Again, because HER2 TDM

NOTE Confidence: 0.9695701

 $00:14:07.675 \longrightarrow 00:14:09.054$ one doesn't have this bystander

NOTE Confidence: 0.9695701

00:14:09.115 --> 00:14:10.395 effect. But on the right,

NOTE Confidence: 0.9695701

00:14:10.395 --> 00:14:11.215 you use TDXD

NOTE Confidence: 0.9533591

00:14:11.675 --> 00:14:13.115 with bystander effect, you kill

NOTE Confidence: 0.9533591

 $00:14:13.115 \longrightarrow 00:14:14.260$ off both cell lines. Okay.

NOTE Confidence: 0.9533591

00:14:14.260 --> 00:14:15.700 Again, why does that matter?

 $00:14:15.700 \longrightarrow 00:14:16.899$ This is a xenograph where

NOTE Confidence: 0.9533591

 $00{:}14{:}16.899 \dashrightarrow 00{:}14{:}18.440$ you mix two cancers together.

NOTE Confidence: 0.9883789

00:14:18.980 --> 00:14:20.680 Obviously, people have one cancer,

NOTE Confidence: 0.955312

00:14:21.779 --> 00:14:23.700 and it's HER2 positive, so

NOTE Confidence: 0.955312

 $00:14:23.700 \longrightarrow 00:14:24.820$ there should be lots of

NOTE Confidence: 0.955312

 $00:14:24.820 \longrightarrow 00:14:26.120$ HER2 on all the cells.

NOTE Confidence: 0.955312

00:14:26.260 --> 00:14:27.964 Well, let's just for the

NOTE Confidence: 0.955312

 $00:14:27.964 \longrightarrow 00:14:29.165$ sake of argument say that's

NOTE Confidence: 0.955312

 $00:14:29.165 \longrightarrow 00:14:30.125$ not the case and that

NOTE Confidence: 0.955312

 $00:14:30.125 \longrightarrow 00:14:31.345$ there are heterogeneous,

NOTE Confidence: 0.9528449

 $00{:}14{:}32.285 \mathrel{--}{>} 00{:}14{:}34.045$ expression of HER2 in some

NOTE Confidence: 0.9528449

00:14:34.045 --> 00:14:36.125 cancers. The concern would be

NOTE Confidence: 0.9528449

 $00:14:36.125 \longrightarrow 00:14:36.925$ that if you have this

NOTE Confidence: 0.9528449

 $00:14:36.925 \longrightarrow 00:14:38.705$ heterogeneous cancer shown

NOTE Confidence: 0.9636179

 $00:14:40.200 \longrightarrow 00:14:41.480$ here where the blue cells

 $00:14:41.480 \longrightarrow 00:14:42.600$ are the HER2 positive and

NOTE Confidence: 0.9636179

 $00:14:42.600 \longrightarrow 00:14:43.820$ the red ones are not,

NOTE Confidence: 0.9636179

 $00:14:43.880 \longrightarrow 00:14:44.840$ you treat with a very

NOTE Confidence: 0.9636179

00:14:44.840 --> 00:14:45.980 targeted drug,

NOTE Confidence: 0.9720088

 $00:14:47.880 \longrightarrow 00:14:49.320$ you kill off the HER2

NOTE Confidence: 0.9720088

 $00{:}14{:}49.320 \dashrightarrow 00{:}14{:}50.440$ positive cells, you leave behind

NOTE Confidence: 0.9720088

 $00:14:50.440 \longrightarrow 00:14:51.640$ the HER2 negative cells, and

NOTE Confidence: 0.9720088

 $00:14:51.640 \longrightarrow 00:14:52.760$ the HER2 negative cells then

NOTE Confidence: 0.9720088

 $00:14:52.760 \longrightarrow 00:14:53.560$ grow up, and now you

NOTE Confidence: 0.9720088

 $00:14:53.560 \longrightarrow 00:14:54.860$ have a resistant cancer

NOTE Confidence: 0.98329586

 $00:14:55.285 \longrightarrow 00:14:56.645$ similar to what was shown

NOTE Confidence: 0.98329586

 $00:14:56.645 \longrightarrow 00:14:57.685$ in in those in the

NOTE Confidence: 0.98329586

00:14:57.685 --> 00:14:58.985 xenograft I just showed.

NOTE Confidence: 0.9895037

 $00{:}15{:}00.325 \dashrightarrow 00{:}15{:}02.505$ Is this clinically relevant? So,

NOTE Confidence: 0.7801106600:15:03.125 --> 00:15:03.625 my,

NOTE Confidence: 0.9916874

 $00:15:04.885 \longrightarrow 00:15:05.385$ colleague,

00:15:06.485 --> 00:15:07.685 Otto Mesker and I did

NOTE Confidence: 0.9296983

00:15:07.685 --> 00:15:08.745 this IIT,

NOTE Confidence: 0.9769893

 $00:15:09.605 \longrightarrow 00:15:11.760$ to ask this seemingly pretty

NOTE Confidence: 0.9769893

00:15:11.760 --> 00:15:13.279 straightforward question, but at least

NOTE Confidence: 0.9769893

 $00:15:13.279 \longrightarrow 00:15:14.000$ as far as we knew

NOTE Confidence: 0.9769893

 $00:15:14.000 \longrightarrow 00:15:15.360$ that really hadn't been addressed

NOTE Confidence: 0.9769893

 $00:15:15.360 \longrightarrow 00:15:16.420$ before in the clinic.

NOTE Confidence: 0.95521164

00:15:17.360 --> 00:15:18.980 Are heterogeneous cancers

NOTE Confidence: 0.9966823

 $00:15:19.440 \longrightarrow 00:15:21.300$ less sensitive to targeted therapy?

NOTE Confidence: 0.98013633

 $00:15:22.400 \longrightarrow 00:15:23.120$ So the way we did

NOTE Confidence: 0.98013633

 $00:15:23.120 \longrightarrow 00:15:24.115$ this, we took a hundred

NOTE Confidence: 0.98013633

 $00{:}15{:}24.115 \dashrightarrow 00{:}15{:}25.235$ and sixty four patients who

NOTE Confidence: 0.98013633

 $00{:}15{:}25.235 \dashrightarrow 00{:}15{:}26.915$ had newly diagnosed HER2 positive

NOTE Confidence: 0.98013633

00:15:26.915 --> 00:15:27.415 disease,

NOTE Confidence: 0.99857885

00:15:28.195 --> 00:15:29.895 and before we started treatment,

 $00:15:30.355 \longrightarrow 00:15:31.555$ we did a biopsy in

NOTE Confidence: 0.988069

 $00{:}15{:}31.555 \dashrightarrow 00{:}15{:}32.995$ two different locations of their

NOTE Confidence: 0.988069

 $00:15:32.995 \longrightarrow 00:15:33.495$ cancer.

NOTE Confidence: 0.9119549

 $00:15:34.435 \longrightarrow 00:15:35.715$ And then they treated with

NOTE Confidence: 0.9119549

 $00:15:35.715 \longrightarrow 00:15:36.675$ TBM one, we threw in

NOTE Confidence: 0.9119549

 $00:15:36.675 \longrightarrow 00:15:37.895$ another HER2 antibody,

NOTE Confidence: 0.9672322

 $00:15:38.275 \longrightarrow 00:15:39.015$ called pertuzumab,

NOTE Confidence: 0.9805381

 $00:15:40.160 \longrightarrow 00:15:41.199$ and and then they had

NOTE Confidence: 0.9805381

 $00{:}15{:}41.199 --> 00{:}15{:}42.880$ surgery. And so we we

NOTE Confidence: 0.9805381

00:15:42.880 --> 00:15:44.000 took advantage of the fact

NOTE Confidence: 0.9805381

 $00{:}15{:}44.000 \dashrightarrow 00{:}15{:}44.720$ that we did these two

NOTE Confidence: 0.9805381

 $00:15:44.720 \longrightarrow 00:15:46.000$ different biopsies, and so we

NOTE Confidence: 0.9805381

 $00:15:46.000 \longrightarrow 00:15:47.360$ had, and each of those

NOTE Confidence: 0.9805381

 $00:15:47.360 \longrightarrow 00:15:49.279$ biopsied had three different sections

NOTE Confidence: 0.9805381

 $00:15:49.279 \longrightarrow 00:15:50.240$ that we looked at. And

NOTE Confidence: 0.9805381

 $00:15:50.240 \longrightarrow 00:15:51.519$ we looked at whether there

 $00:15:51.519 \longrightarrow 00:15:52.180$ was heterogeneity,

NOTE Confidence: 0.98434466

 $00{:}15{:}53.155 \dashrightarrow 00{:}15{:}54.615$ in terms of HER2 amplification

NOTE Confidence: 0.9745332

 $00:15:55.075 \longrightarrow 00:15:56.295$ in those different sections.

NOTE Confidence: 0.87935275

 $00:15:56.995 \longrightarrow 00:15:58.695$ And we scored those cancers,

NOTE Confidence: 0.97705686

00:16:01.475 --> 00:16:03.095 using a standard ASCO,

NOTE Confidence: 0.9614894

 $00:16:03.795 \longrightarrow 00:16:05.735$ cap definition of heterogeneity.

NOTE Confidence: 0.9882592

 $00:16:06.519 \longrightarrow 00:16:07.399$ And then we looked at

NOTE Confidence: 0.9882592

 $00:16:07.399 \longrightarrow 00:16:08.540$ how the heterogeneity

NOTE Confidence: 0.99615407

 $00:16:09.000 \longrightarrow 00:16:10.200$ played out in terms of,

NOTE Confidence: 0.99615407

00:16:10.519 --> 00:16:11.740 benefit to this treatment.

NOTE Confidence: 0.9942005

 $00:16:12.279 \longrightarrow 00:16:13.480$ And what we found was

NOTE Confidence: 0.9942005

 $00:16:13.480 \longrightarrow 00:16:14.839$ that in the cancers that

NOTE Confidence: 0.9942005

 $00{:}16{:}14.839 \dashrightarrow 00{:}16{:}16.600$ were not heterogeneous, those cancers

NOTE Confidence: 0.9942005

 $00:16:16.600 \longrightarrow 00:16:18.600$ where there's pretty homogeneous expression

NOTE Confidence: 0.9942005

00:16:18.600 --> 00:16:20.140 or amplification of HER2,

 $00:16:20.774 \longrightarrow 00:16:21.975$ fifty five percent of those

NOTE Confidence: 0.9915651

 $00:16:21.975 \longrightarrow 00:16:23.975$ patients had complete eradication of

NOTE Confidence: 0.9915651

 $00:16:23.975 \longrightarrow 00:16:25.675$ their tumor just from the

NOTE Confidence: 0.9915651

 $00:16:25.894 \longrightarrow 00:16:27.975$ HER2 targeted therapy. So in

NOTE Confidence: 0.9915651

00:16:27.975 --> 00:16:29.115 in that situation,

NOTE Confidence: 0.932049

00:16:29.574 --> 00:16:30.855 this HER2 target the rapy is

NOTE Confidence: 0.932049

 $00:16:30.855 \longrightarrow 00:16:31.675$ highly effective,

NOTE Confidence: 0.9841211

 $00:16:32.214 \longrightarrow 00:16:33.514$ and and well tolerated.

NOTE Confidence: 0.9883461

 $00{:}16{:}33.975 \dashrightarrow 00{:}16{:}35.170$ But then when you looked

NOTE Confidence: 0.9883461

 $00:16:35.170 \longrightarrow 00:16:36.130$ at the cancers that were

NOTE Confidence: 0.9883461

 $00:16:36.130 \longrightarrow 00:16:36.630$ heterogeneous,

NOTE Confidence: 0.98126304

 $00:16:37.170 \longrightarrow 00:16:38.210$ none of them had a

NOTE Confidence: 0.98126304

 $00:16:38.210 \longrightarrow 00:16:40.370$ pathologic complete response. And so

NOTE Confidence: 0.98126304

00:16:40.370 --> 00:16:42.230 this was highly statistically significant,

NOTE Confidence: 0.9571037

 $00:16:42.770 \longrightarrow 00:16:44.450$ and it confirmed that actually

NOTE Confidence: 0.9571037

 $00:16:44.450 \longrightarrow 00:16:46.050$ heterogeneity matters, that if you

 $00:16:46.050 \longrightarrow 00:16:46.870$ have a heterogeneous

NOTE Confidence: 0.9559631

00:16:47.170 --> 00:16:48.770 cancer, you're not as likely

NOTE Confidence: 0.9559631

 $00:16:48.770 \longrightarrow 00:16:51.085$ to respond as completely to

NOTE Confidence: 0.9559631

 $00:16:51.085 \longrightarrow 00:16:52.765$ HER2 targeted therapy, or at

NOTE Confidence: 0.9559631

 $00{:}16{:}52.765 \dashrightarrow 00{:}16{:}54.205$ least a HER2 targeted the rapy

NOTE Confidence: 0.9559631

 $00:16:54.205 \longrightarrow 00:16:55.665$ that doesn't have this bystander

NOTE Confidence: 0.9559631

 $00:16:55.885 \longrightarrow 00:16:57.565$ effect, which TDM one does

NOTE Confidence: 0.9559631

 $00:16:57.565 \longrightarrow 00:16:58.065$ not.

NOTE Confidence: 0.9931549

 $00:16:58.525 \longrightarrow 00:16:59.185$ We actually

NOTE Confidence: 0.9897484

 $00:16:59.885 \longrightarrow 00:17:01.325$ went on to look a

NOTE Confidence: 0.9897484

00:17:01.325 --> 00:17:02.605 little bit more in-depth in

NOTE Confidence: 0.9897484

 $00:17:02.605 \longrightarrow 00:17:03.665$ collaboration with,

NOTE Confidence: 0.8645704

00:17:05.080 --> 00:17:06.619 a lab at Dana Farber

NOTE Confidence: 0.8645704

00:17:06.679 --> 00:17:08.119 led by Neli Polyak and

NOTE Confidence: 0.8645704

 $00:17:08.119 \longrightarrow 00:17:09.179$ and Francisca,

00:17:10.119 --> 00:17:10.619 Mihor,

NOTE Confidence: 0.9725625

 $00:17:11.080 \longrightarrow 00:17:12.679$ looking at at the single

NOTE Confidence: 0.9725625

00:17:12.679 --> 00:17:14.299 cell level by HER2 amplification,

NOTE Confidence: 0.99262613

 $00:17:14.600 \longrightarrow 00:17:16.279$ trying to understand what was

NOTE Confidence: 0.99262613

 $00:17:16.279 \longrightarrow 00:17:17.259$ actually driving,

NOTE Confidence: 0.97404677

 $00:17:17.639 \longrightarrow 00:17:18.299$ the resistance.

NOTE Confidence: 0.9847617

00:17:19.080 --> 00:17:19.820 And interestingly,

NOTE Confidence: 0.8731691

 $00:17:20.655 \longrightarrow 00:17:22.115$ at least interesting to me,

NOTE Confidence: 0.99284226

00:17:22.815 --> 00:17:24.095 it was actually the fraction

NOTE Confidence: 0.99284226

00:17:24.095 --> 00:17:26.095 of the non amplified cells

NOTE Confidence: 0.99284226

 $00:17:26.095 \longrightarrow 00:17:26.595$ within,

NOTE Confidence: 0.9997132

 $00:17:27.135 \longrightarrow 00:17:27.795$ the population

NOTE Confidence: 0.9470634

 $00:17:28.335 \longrightarrow 00:17:30.095$ that was strongly correlated with

NOTE Confidence: 0.9470634

00:17:30.095 --> 00:17:32.095 PACER. And it so, originally,

NOTE Confidence: 0.9470634

 $00:17:32.095 \longrightarrow 00:17:32.895$ we kind of had the

NOTE Confidence: 0.9470634

 $00{:}17{:}32.895 \dashrightarrow 00{:}17{:}35.135$ idea, okay, a heterogeneous cancer

00:17:35.135 --> 00:17:36.240 is one where, you know,

NOTE Confidence: 0.9470634

 $00:17:36.240 \longrightarrow 00:17:37.359$ there's a big c of

NOTE Confidence: 0.9470634

00:17:37.359 --> 00:17:38.720 HER2 positive cells and then

NOTE Confidence: 0.9470634

 $00:17:38.720 \longrightarrow 00:17:40.320$ there's this little cluster of

NOTE Confidence: 0.9470634

 $00:17:40.320 \longrightarrow 00:17:41.680$ HER2 negative cells that was

NOTE Confidence: 0.9470634

 $00:17:41.680 \longrightarrow 00:17:43.359$ gonna stay behind and grow

NOTE Confidence: 0.9470634

00:17:43.359 --> 00:17:44.480 out. But, actually, that's not

NOTE Confidence: 0.9470634

 $00:17:44.480 \longrightarrow 00:17:46.100$ what we saw. It's actually

NOTE Confidence: 0.9869617

 $00:17:46.560 \longrightarrow 00:17:47.060$ fairly

NOTE Confidence: 0.9368856

 $00:17:47.440 \longrightarrow 00:17:49.965$ often times relatively uniform distribution of

NOTE Confidence: 0.9368856

00:17:50.125 --> 00:17:51.645 HER2 positive and HER2 or

NOTE Confidence: 0.9368856

 $00{:}17{:}51.645 \dashrightarrow 00{:}17{:}53.005$ HER2 amplified and HER2 non

NOTE Confidence: 0.9368856

00:17:53.005 --> 00:17:53.904 amplified cells,

NOTE Confidence: 0.96669006

 $00:17:54.284 \longrightarrow 00:17:55.725$ that was that was leading

NOTE Confidence: 0.96669006

00:17:55.725 --> 00:17:57.325 to heterogeneity. So you didn't

 $00:17:57.325 \longrightarrow 00:17:58.365$ actually have to do those

NOTE Confidence: 0.96669006 00:17:58.365 --> 00:17:58.865 six, NOTE Confidence: 0.9351267

00:17:59.325 --> 00:18:00.924 biopsy sections. If you just

NOTE Confidence: 0.9351267

 $00:18:00.924 \longrightarrow 00:18:02.044$ look at one section and

NOTE Confidence: 0.9351267

00:18:02.044 --> 00:18:03.030 you quantitate,

NOTE Confidence: 0.8493982600:18:04.450 --> 00:18:04.690 how,

NOTE Confidence: 0.9707269

 $00:18:05.250 \longrightarrow 00:18:06.369$ much how many of these

NOTE Confidence: 0.9707269

 $00:18:06.369 \longrightarrow 00:18:08.130 \text{ HER2}$ non amplified cells are

NOTE Confidence: 0.9707269

 $00{:}18{:}08.130 \dashrightarrow 00{:}18{:}09.809$ there, you can actually predict

NOTE Confidence: 0.9707269

00:18:09.809 --> 00:18:10.309 PCR,

NOTE Confidence: 0.7660967

 $00:18:11.330 \longrightarrow 00:18:12.150$ very strongly,

NOTE Confidence: 0.9773514

 $00:18:13.410 \longrightarrow 00:18:14.230$ which which is

NOTE Confidence: 0.9815133

 $00:18:14.585 \longrightarrow 00:18:15.545$ which is kind of interesting.

NOTE Confidence: 0.9815133

00:18:15.545 --> 00:18:16.045 And,

NOTE Confidence: 0.9789954

 $00:18:16.505 \longrightarrow 00:18:18.744$ we actually that our data

NOTE Confidence: 0.9789954

 $00:18:18.744 \longrightarrow 00:18:20.585$ was subsequently replicated a few

 $00{:}18{:}20.585 {\: -->\:} 00{:}18{:}21.945$ years later, in a in

NOTE Confidence: 0.9789954

 $00:18:21.945 \longrightarrow 00:18:23.305$ a larger trial where they

NOTE Confidence: 0.9789954

 $00:18:23.305 \longrightarrow 00:18:24.425$ went back and looked at

NOTE Confidence: 0.9789954

 $00:18:24.425 \longrightarrow 00:18:26.345$ the same population patients treated

NOTE Confidence: 0.9789954

00:18:26.345 --> 00:18:27.565 with TDM one and pertuzumab.

NOTE Confidence: 0.96921855

00:18:28.185 --> 00:18:29.700 And, again, those who had

NOTE Confidence: 0.96921855

 $00:18:29.859 \longrightarrow 00:18:30.359$ heterogeneous

NOTE Confidence: 0.9208214

 $00:18:30.899 \longrightarrow 00:18:32.580$ positivity for HER2 had no

NOTE Confidence: 0.9208214

 $00:18:32.580 \longrightarrow 00:18:34.100$ pass ERs, whereas those that

NOTE Confidence: 0.9208214

00:18:34.100 --> 00:18:35.619 were homogeneous had a a

NOTE Confidence: 0.9208214

00:18:35.619 --> 00:18:36.899 over fifty percent pass ER

NOTE Confidence: 0.9208214

 $00:18:36.899 \longrightarrow 00:18:37.399$ rate.

NOTE Confidence: 0.9982163

 $00{:}18{:}38.340 {\: -->\:} 00{:}18{:}39.559$ Okay. So

NOTE Confidence: 0.9691403

00:18:41.220 --> 00:18:42.679 getting back to TDXD,

NOTE Confidence: 0.9993789

 $00:18:43.380 \longrightarrow 00:18:44.359$ it's got this

 $00:18:44.835 \longrightarrow 00:18:46.515$ by stander effect, at least in

NOTE Confidence: 0.9181617

 $00{:}18{:}46.515 \to 00{:}18{:}47.015$ vivo.

NOTE Confidence: 0.99812233

 $00:18:48.355 \longrightarrow 00:18:49.475$ Does that matter in terms

NOTE Confidence: 0.99812233

00:18:49.475 --> 00:18:50.695 of improving efficacy?

NOTE Confidence: 0.94738865

 $00:18:52.595 \longrightarrow 00:18:53.494$ So it does.

NOTE Confidence: 0.9059159

 $00:18:54.195 \longrightarrow 00:18:55.794$ Or at least somehow it

NOTE Confidence: 0.9059159

00:18:55.794 --> 00:18:57.075 has much better efficacy, whether

NOTE Confidence: 0.9059159

00:18:57.075 --> 00:18:58.135 how much of that's bystander

NOTE Confidence: 0.9059159

 $00:18:58.195 \longrightarrow 00:18:59.075$ effect or some of the

NOTE Confidence: 0.9059159

 $00:18:59.075 \longrightarrow 00:18:59.575$ other,

NOTE Confidence: 0.95580906

 $00:19:00.590 \longrightarrow 00:19:01.790$ aspects that we don't really

NOTE Confidence: 0.95580906

 $00:19:01.790 \longrightarrow 00:19:02.670$ know at this point. But

NOTE Confidence: 0.95580906

 $00:19:02.670 \longrightarrow 00:19:03.390$ this was the,

NOTE Confidence: 0.9345318

 $00:19:03.790 \longrightarrow 00:19:05.310$ phase two single arm study

NOTE Confidence: 0.9345318

 $00:19:05.310 \longrightarrow 00:19:06.030$ that that,

NOTE Confidence: 0.9586094

 $00:19:06.510 \longrightarrow 00:19:07.810$ we were involved with,

 $00:19:09.550 \longrightarrow 00:19:10.530$ that demonstrated

NOTE Confidence: 0.9371244

 $00{:}19{:}10.910 \dashrightarrow 00{:}19{:}12.670$ of in heavily pretreated patients,

NOTE Confidence: 0.9371244

 $00:19:12.670 \longrightarrow 00:19:13.710$ patients who had already had

NOTE Confidence: 0.9371244

00:19:13.710 --> 00:19:15.605 all the standard HER2 therapies,

NOTE Confidence: 0.9371244

 $00:19:15.605 \longrightarrow 00:19:16.484$ I think, the median of

NOTE Confidence: 0.9371244

 $00:19:16.484 \longrightarrow 00:19:17.605$ six prior lines. So these

NOTE Confidence: 0.9371244

00:19:17.605 --> 00:19:19.225 were seventh line metastatic

NOTE Confidence: 0.9286108

00:19:19.605 --> 00:19:21.125 patients, and the response rate

NOTE Confidence: 0.9286108

 $00:19:21.125 \longrightarrow 00:19:22.725$ to TDXD alone was over

NOTE Confidence: 0.9286108

 $00:19:22.725 \longrightarrow 00:19:24.244$ sixty percent. It was very

NOTE Confidence: 0.9286108

 $00{:}19{:}24.244 \dashrightarrow 00{:}19{:}25.544$ durable. The patients,

NOTE Confidence: 0.87434304

 $00:19:25.924 \longrightarrow 00:19:27.140$ had a, a were on

NOTE Confidence: 0.87434304

 $00:19:27.140 \longrightarrow 00:19:28.760$ study for over twenty months,

NOTE Confidence: 0.97808754

 $00:19:29.299 \longrightarrow 00:19:30.580$ and virtually a hundred percent

NOTE Confidence: 0.97808754

 $00:19:30.580 \longrightarrow 00:19:31.960$ of patients had some benefit

 $00:19:32.260 \longrightarrow 00:19:33.380$ as shown in this waterfall

NOTE Confidence: 0.9395061

 $00{:}19{:}33.380 --> 00{:}19{:}33.880 \ \mathrm{plot}.$

NOTE Confidence: 0.97288346

 $00:19:35.619 \longrightarrow 00:19:36.500$ The trade off was that

NOTE Confidence: 0.97288346

 $00:19:36.500 \longrightarrow 00:19:38.179$ there was more toxicity. So

NOTE Confidence: 0.97288346

 $00:19:38.179 \longrightarrow 00:19:39.559$ unlike TDM one,

NOTE Confidence: 0.995012

 $00:19:40.020 \longrightarrow 00:19:41.000$ with this drug,

NOTE Confidence: 0.9757585

00:19:41.575 --> 00:19:43.355 most patients get some nausea,

NOTE Confidence: 0.9757585

00:19:43.494 --> 00:19:44.955 there's fatigue, there's,

NOTE Confidence: 0.8371376

 $00:19:47.095 \longrightarrow 00:19:48.795$ hair loss in some patients,

NOTE Confidence: 0.9964816600:19:49.415 --> 00:19:49.915 and

NOTE Confidence: 0.97762054

00:19:50.215 --> 00:19:51.494 in ten to fifteen percent

NOTE Confidence: 0.97762054

 $00:19:51.494 \longrightarrow 00:19:52.075$ of patients,

NOTE Confidence: 0.99068826

00:19:52.775 --> 00:19:54.234 they get a serious complication

NOTE Confidence: 0.99068826

 $00:19:54.375 \longrightarrow 00:19:55.895$ called interstitial lung disease or

NOTE Confidence: 0.99068826

 $00:19:55.895 \longrightarrow 00:19:56.395$ pneumonitis,

NOTE Confidence: 0.96681213

 $00:19:57.809 \longrightarrow 00:19:59.890$ which is typically manageable, but

00:19:59.890 --> 00:20:00.929 it's definitely something that you

NOTE Confidence: 0.96681213

 $00:20:00.929 \longrightarrow 00:20:01.890$ have to pay attention to

NOTE Confidence: 0.96681213

 $00:20:01.890 \longrightarrow 00:20:03.030$ because it can be fatal.

NOTE Confidence: 0.8315493 00:20:03.809 --> 00:20:04.309 So, NOTE Confidence: 0.94909394

 $00{:}20{:}06.210 \longrightarrow 00{:}20{:}08.309$ because of the incredible efficacy

NOTE Confidence: 0.94909394

 $00:20:08.450 \longrightarrow 00:20:09.990$ in very refractory patients,

NOTE Confidence: 0.9012558

 $00:20:10.315 \longrightarrow 00:20:11.915$ these data led to the

NOTE Confidence: 0.9012558

 $00{:}20{:}11.915 \dashrightarrow 00{:}20{:}13.195$ the accelerated approval of of

NOTE Confidence: 0.9012558

00:20:13.195 --> 00:20:13.695 TDXD,

NOTE Confidence: 0.9520419

 $00:20:15.115 \longrightarrow 00:20:16.175$ in in this,

NOTE Confidence: 0.9644598

 $00{:}20{:}17.195 \dashrightarrow 00{:}20{:}18.655$ kind of refractory setting.

NOTE Confidence: 0.958515

 $00:20:19.835 \longrightarrow 00:20:20.715$ But then we went on,

NOTE Confidence: 0.958515

 $00{:}20{:}20{:}715 \longrightarrow 00{:}20{:}22.095$ there were several other trials.

NOTE Confidence: 0.95889634

 $00:20:22.399 \longrightarrow 00:20:23.519$ This was a phase three

NOTE Confidence: 0.9588963400:20:23.519 --> 00:20:24.019 style

 $00:20:24.320 \longrightarrow 00:20:26.340$ phase three trial looking specifically

NOTE Confidence: 0.9410416

00:20:26.399 --> 00:20:27.440 at patients who had already

NOTE Confidence: 0.9410416

 $00:20:27.440 \longrightarrow 00:20:28.880$ had the other ADC, TDM

NOTE Confidence: 0.9410416

 $00:20:28.880 \longrightarrow 00:20:31.700$ one, and comparing TDXD versus

NOTE Confidence: 0.9410416

 $00:20:31.840 \longrightarrow 00:20:32.340$ standard,

NOTE Confidence: 0.93565685

00:20:32.799 --> 00:20:33.700 HER2 therapy,

NOTE Confidence: 0.9801323

 $00:20:34.240 \longrightarrow 00:20:36.179$ and TDXD was much better.

NOTE Confidence: 0.9622426

 $00:20:37.605 \longrightarrow 00:20:38.885$ And this demonstrated,

NOTE Confidence: 0.9964126

00:20:41.125 --> 00:20:42.505 that you actually can

NOTE Confidence: 0.9578538

 $00:20:42.885 \longrightarrow 00:20:44.645$ have benefit from one antibody

NOTE Confidence: 0.9578538

 $00{:}20{:}44.645 \dashrightarrow 00{:}20{:}46.085$ drug conjugate followed by another,

NOTE Confidence: 0.9578538

 $00:20:46.085 \longrightarrow 00:20:46.965$ even though they have the

NOTE Confidence: 0.9578538

 $00:20:46.965 \longrightarrow 00:20:48.085$ same target, but they have

NOTE Confidence: 0.9578538

 $00:20:48.085 \longrightarrow 00:20:49.445$ different payloads. So by switching

NOTE Confidence: 0.9578538

 $00:20:49.445 \longrightarrow 00:20:50.484$ payloads, you're able to,

NOTE Confidence: 0.95325124

00:20:51.490 --> 00:20:51.890 provide,

 $00:20:52.450 \longrightarrow 00:20:53.429$ more efficacy.

NOTE Confidence: 0.97053677

 $00:20:53.890 \longrightarrow 00:20:54.929$ And at least in my

NOTE Confidence: 0.97053677

 $00:20:54.929 \longrightarrow 00:20:56.070$ mind, this supports

NOTE Confidence: 0.9919634

 $00:20:56.450 \longrightarrow 00:20:57.109$ the paradigm,

NOTE Confidence: 0.9855313

 $00{:}20{:}57.730 \dashrightarrow 00{:}20{:}59.109$ that you could treat patients

NOTE Confidence: 0.9855313

00:20:59.250 --> 00:21:01.250 with sequential ADCs with different

NOTE Confidence: 0.9855313

 $00:21:01.250 \longrightarrow 00:21:02.690$ payloads, and we'll we'll talk

NOTE Confidence: 0.9855313

 $00:21:02.690 \longrightarrow 00:21:03.590$ more about that,

NOTE Confidence: 0.99928194

 $00:21:04.049 \longrightarrow 00:21:04.549$ later.

NOTE Confidence: 0.9597696

 $00:21:08.185 \longrightarrow 00:21:09.305$ This went on to now

NOTE Confidence: 0.9597696

 $00:21:09.305 \longrightarrow 00:21:10.505$ look head to head at

NOTE Confidence: 0.9597696

00:21:10.505 --> 00:21:11.005 TDXD

NOTE Confidence: 0.9302776

00:21:11.305 --> 00:21:12.905 versus PDM one, so two

NOTE Confidence: 0.9302776

 $00:21:12.905 \longrightarrow 00:21:15.145$ ADCs against each other. Probably

NOTE Confidence: 0.9302776

 $00:21:15.145 \longrightarrow 00:21:16.185$ the only trial that's done

 $00:21:16.185 \longrightarrow 00:21:16.685$ that.

NOTE Confidence: 0.9590523

00:21:17.305 --> 00:21:19.225 And again, TDXD was was

NOTE Confidence: 0.9590523

00:21:19.225 --> 00:21:21.145 far superior to to TDM

NOTE Confidence: 0.9590523 00:21:21.145 --> 00:21:21.645 one,

NOTE Confidence: 0.90737617

 $00:21:22.490 \longrightarrow 00:21:23.550$ fourfold greater

NOTE Confidence: 0.9508183

 $00{:}21{:}23.930 \dashrightarrow 00{:}21{:}25.690$ progression free survival, so almost

NOTE Confidence: 0.9508183

 $00:21:25.690 \longrightarrow 00:21:27.210$ twenty nine months progression free

NOTE Confidence: 0.9508183

00:21:27.210 --> 00:21:27.710 survival,

NOTE Confidence: 0.9451021

 $00:21:28.490 \longrightarrow 00:21:29.450$ a level that I don't

NOTE Confidence: 0.9451021

 $00:21:29.450 \longrightarrow 00:21:30.570$ think had ever been seen

NOTE Confidence: 0.9451021

 $00:21:30.570 \longrightarrow 00:21:31.950$ before in pretreated

NOTE Confidence: 0.9722887

00:21:32.410 --> 00:21:33.710 patients with breast cancer.

NOTE Confidence: 0.994174

 $00:21:34.250 \longrightarrow 00:21:35.390$ So very effective

NOTE Confidence: 0.9584633

00:21:35.815 --> 00:21:37.115 survival was also beneficial,

NOTE Confidence: 0.8988455

 $00{:}21{:}37.734 \dashrightarrow 00{:}21{:}39.655$ and this established tDxD as

NOTE Confidence: 0.8988455

 $00:21:39.655 \longrightarrow 00:21:40.395$ the standard

 $00:21:40.775 \longrightarrow 00:21:41.835$ care for patients,

NOTE Confidence: 0.88887644

 $00{:}21{:}43.015 \to 00{:}21{:}44.875$ with her trophosid metastatic disease.

NOTE Confidence: 0.627298

 $00{:}21{:}47.335 --> 00{:}21{:}47.835 \ \mathrm{But}$

NOTE Confidence: 0.9404096

 $00:21:48.559 \longrightarrow 00:21:49.520$ there was a question at

NOTE Confidence: 0.9404096

 $00:21:49.520 \longrightarrow 00:21:50.720$ that time of what about

NOTE Confidence: 0.9404096

 $00{:}21{:}50.720 \to 00{:}21{:}52.320$ patients with progressive brain mets?

NOTE Confidence: 0.9404096

00:21:52.320 --> 00:21:54.000 And, unfortunately, that's a big

NOTE Confidence: 0.9404096

00:21:54.000 --> 00:21:55.840 problem in HER2 positive disease

NOTE Confidence: 0.9404096

 $00:21:55.840 \longrightarrow 00:21:56.340$ because,

NOTE Confidence: 0.9583295

 $00:21:56.960 \longrightarrow 00:21:58.559$ for reasons that aren't completely

NOTE Confidence: 0.9583295

 $00{:}21{:}58.559 \dashrightarrow 00{:}22{:}00.340$ clear, there's a strong predilection

NOTE Confidence: 0.9583295

 $00{:}22{:}00.480 \dashrightarrow 00{:}22{:}02.320$ for HER2 positive breast cancer

NOTE Confidence: 0.9583295

 $00:22:02.320 \longrightarrow 00:22:03.460$ to go to the brain.

NOTE Confidence: 0.91226715

00:22:03.885 --> 00:22:05.165 It may partly, it may

NOTE Confidence: 0.91226715

 $00:22:05.165 \longrightarrow 00:22:05.885$ be because,

 $00:22:06.285 \longrightarrow 00:22:07.085$ or part of it may

NOTE Confidence: 0.97498804 00:22:07.085 --> 00:22:07.585 be NOTE Confidence: 0.9412952

 $00:22:08.605 \longrightarrow 00:22:10.765$ the the conventional wisdom that

NOTE Confidence: 0.9412952

 $00:22:10.765 \longrightarrow 00:22:12.445$ that drugs like that we

NOTE Confidence: 0.9412952

 $00:22:12.445 \longrightarrow 00:22:13.725$ use in HER2 positive disease,

NOTE Confidence: 0.9412952

00:22:13.725 --> 00:22:15.505 like antibodies, antibody drug conjugates,

NOTE Confidence: 0.9412952

00:22:15.645 --> 00:22:17.005 don't get into the brain

NOTE Confidence: 0.9412952

 $00:22:17.085 \longrightarrow 00:22:18.720$ into into the brain

NOTE Confidence: 0.9412952

 $00:22:18.720 \longrightarrow 00:22:19.600$ because of the blood brain

NOTE Confidence: 0.9412952

 $00:22:19.600 \longrightarrow 00:22:20.640$ barrier. So it's kind of

NOTE Confidence: 0.9412952

 $00{:}22{:}20.640 \dashrightarrow 00{:}22{:}22.080$ a a sanctuary site, and

NOTE Confidence: 0.9412952

 $00:22:22.080 \longrightarrow 00:22:23.040$ that's why we see so

NOTE Confidence: 0.9412952

 $00:22:23.040 \longrightarrow 00:22:23.920$ much of it. But there's

NOTE Confidence: 0.9412952

 $00:22:23.920 \longrightarrow 00:22:25.760$ also some biology involved that

NOTE Confidence: 0.9412952

 $00:22:25.760 \longrightarrow 00:22:26.960$ these cancers are just have

NOTE Confidence: 0.9412952

 $00:22:26.960 \longrightarrow 00:22:28.420$ a tropism to the brain.

 $00:22:29.040 \longrightarrow 00:22:30.179$ But as I said,

NOTE Confidence: 0.9288873

00:22:30.480 --> 00:22:31.815 you know, the the idea

NOTE Confidence: 0.9288873

00:22:31.815 --> 00:22:33.335 was antibodies don't get into

NOTE Confidence: 0.9288873

00:22:33.335 --> 00:22:34.934 the brain, therefore, antibody drug

NOTE Confidence: 0.9288873

00:22:34.934 --> 00:22:35.895 conjugates don't get into the

NOTE Confidence: 0.9288873

 $00:22:35.895 \longrightarrow 00:22:37.335$ brain, so how are we

NOTE Confidence: 0.9288873

 $00:22:37.335 \longrightarrow 00:22:38.455$ gonna how could a drug

NOTE Confidence: 0.9288873

00:22:38.455 --> 00:22:39.115 like tDxD

NOTE Confidence: 0.9713826

 $00:22:39.575 \longrightarrow 00:22:41.414$ work in this very common

NOTE Confidence: 0.9713826

 $00:22:41.414 \longrightarrow 00:22:41.914$ situation?

NOTE Confidence: 0.97209376

 $00:22:43.095 \longrightarrow 00:22:44.475$ But it turns out that

NOTE Confidence: 0.97209376

 $00{:}22{:}44.570 \dashrightarrow 00{:}22{:}46.010$ actually antibodies can get into

NOTE Confidence: 0.97209376

 $00:22:46.010 \longrightarrow 00:22:47.309$ the brain at least somewhat.

NOTE Confidence: 0.9155712

 $00:22:47.609 \longrightarrow 00:22:49.230$ This is a pet label,

NOTE Confidence: 0.9831402

 $00:22:50.170 \longrightarrow 00:22:50.670$ trastuzumab

 $00:22:51.130 \longrightarrow 00:22:52.250$ study, and you can see

NOTE Confidence: 0.96377766

 $00:22:52.250 \longrightarrow 00:22:53.390$ on the bottom there,

NOTE Confidence: 0.95479214

 $00:22:54.010 \longrightarrow 00:22:56.730$ that actually the antibody does

NOTE Confidence: 0.95479214

 $00:22:56.730 \longrightarrow 00:22:57.690$ get to the to the

NOTE Confidence: 0.95479214

00:22:57.690 --> 00:22:59.369 brain metastases at least to

NOTE Confidence: 0.95479214

 $00:22:59.369 \longrightarrow 00:23:00.109$ some level.

NOTE Confidence: 0.94078386

00:23:00.705 --> 00:23:01.525 Probably because

NOTE Confidence: 0.92750573

 $00:23:02.065 \longrightarrow 00:23:03.184$ the blood brain barrier breaks

NOTE Confidence: 0.92750573

 $00:23:03.184 \longrightarrow 00:23:04.065$ down a little bit when

NOTE Confidence: 0.92750573

 $00:23:04.065 \longrightarrow 00:23:05.585$ you have a cancer there

NOTE Confidence: 0.92750573

 $00{:}23{:}05.585 \dashrightarrow 00{:}23{:}07.184$ and it's disrupting, you know,

NOTE Confidence: 0.92750573

 $00:23:07.184 \longrightarrow 00:23:09.184$ causes dysregulation of of vascular

NOTE Confidence: 0.92750573

 $00:23:09.184 \longrightarrow 00:23:10.544$ genesis, so the blood brain

NOTE Confidence: 0.92750573

00:23:10.544 --> 00:23:12.164 barrier isn't quite as intact.

NOTE Confidence: 0.9704683

 $00:23:13.150 \longrightarrow 00:23:13.890$ But regardless,

NOTE Confidence: 0.963996

 $00:23:14.990 \longrightarrow 00:23:16.510$ some antibody can get there.

 $00:23:16.510 \longrightarrow 00:23:17.790$ And so we actually went

NOTE Confidence: 0.963996

 $00:23:17.790 \longrightarrow 00:23:19.090$ back and looked at,

NOTE Confidence: 0.9707772

 $00:23:19.790 \longrightarrow 00:23:21.630$ the the large studies I

NOTE Confidence: 0.9707772

 $00:23:21.630 \longrightarrow 00:23:22.910$ just had shown you, and

NOTE Confidence: 0.9707772

 $00:23:22.910 \longrightarrow 00:23:24.030$ there were a small number

NOTE Confidence: 0.9707772

 $00:23:24.030 \longrightarrow 00:23:25.150$ of patients on those studies

NOTE Confidence: 0.9707772

 $00:23:25.150 \longrightarrow 00:23:26.510$ that actually had progressive brain

NOTE Confidence: 0.9707772

 $00:23:26.510 \longrightarrow 00:23:27.010$ metastases

NOTE Confidence: 0.93539035

 $00:23:27.470 \longrightarrow 00:23:28.130$ at baseline.

NOTE Confidence: 0.97775817

 $00:23:29.135 \longrightarrow 00:23:30.095$ And we looked at the

NOTE Confidence: 0.97775817

 $00{:}23{:}30.095 \dashrightarrow 00{:}23{:}31.955$ intracranial response of TDXD,

NOTE Confidence: 0.9588868

 $00:23:32.575 \longrightarrow 00:23:33.695$ and, actually, there there was

NOTE Confidence: 0.9588868

 $00{:}23{:}33.695 \dashrightarrow 00{:}23{:}34.654$ some response. It was about

NOTE Confidence: 0.9588868

 $00:23:34.654 \longrightarrow 00:23:36.174$ a forty something percent response

NOTE Confidence: 0.9588868

 $00:23:36.174 \longrightarrow 00:23:37.615$ rate in the brain with

 $00:23:37.615 \longrightarrow 00:23:39.455$ this ADC, but the sample

NOTE Confidence: 0.9588868

 $00{:}23{:}39.455 \dashrightarrow 00{:}23{:}40.914$ size was was pretty small.

NOTE Confidence: 0.84719825

00:23:41.580 --> 00:23:43.119 But just recently presented,

NOTE Confidence: 0.9714402

 $00:23:44.780 \longrightarrow 00:23:46.140$ at ESMO a few months

NOTE Confidence: 0.9714402

 $00:23:46.140 \longrightarrow 00:23:48.059$ ago was a prospective study

NOTE Confidence: 0.9714402

 $00:23:48.059 \longrightarrow 00:23:49.020$ of over two hundred and

NOTE Confidence: 0.9714402

 $00:23:49.020 \longrightarrow 00:23:51.039$ fifty patients with brain metastases,

NOTE Confidence: 0.94871426

 $00:23:51.740 \longrightarrow 00:23:53.039$ treating with tDxD.

NOTE Confidence: 0.97477216

 $00{:}23{:}54.155 \dashrightarrow 00{:}23{:}55.355$ And as you can see,

NOTE Confidence: 0.99479115

 $00{:}23{:}55.835 \dashrightarrow 00{:}23{:}57.034$ response rate in the brain

NOTE Confidence: 0.99479115

 $00{:}23{:}57.034 \dashrightarrow 00{:}23{:}58.715$ with active brain metastases was

NOTE Confidence: 0.99479115

00:23:58.715 --> 00:24:00.155 over sixty percent. So I

NOTE Confidence: 0.99479115

 $00:24:00.155 \longrightarrow 00:24:01.534$ think we now have pretty,

NOTE Confidence: 0.9888765

 $00{:}24{:}02.075 --> 00{:}24{:}03.135 \ definitive \ data,$

NOTE Confidence: 0.9672608

 $00:24:03.595 \longrightarrow 00:24:05.434$ that these ADCs actually are

NOTE Confidence: 0.9672608

 $00:24:05.434 \longrightarrow 00:24:06.635$ quite active in the brain.

 $00:24:06.635 \longrightarrow 00:24:07.755$ I think that's important to

NOTE Confidence: 0.9672608

 $00:24:07.755 \longrightarrow 00:24:09.215$ know since we obviously

NOTE Confidence: 0.9803328

 $00:24:09.660 \longrightarrow 00:24:10.780$ have a lot of cancer

NOTE Confidence: 0.9803328

 $00:24:10.780 \longrightarrow 00:24:12.460$ types that that have, brain

NOTE Confidence: 0.9803328

 $00{:}24{:}12.460 \dashrightarrow 00{:}24{:}14.160$ metastases as a major problem.

NOTE Confidence: 0.997432

 $00:24:14.540 \longrightarrow 00:24:15.500$ And so this idea that

NOTE Confidence: 0.997432

 $00:24:15.500 \longrightarrow 00:24:16.460$ you have to use small

NOTE Confidence: 0.997432

00:24:16.460 --> 00:24:16.960 molecules,

NOTE Confidence: 0.99960446

 $00:24:17.580 \longrightarrow 00:24:18.800$ is probably not true.

NOTE Confidence: 0.99304974

 $00:24:21.260 \longrightarrow 00:24:22.560$ So as you might expect,

NOTE Confidence: 0.9730972

 $00{:}24{:}24.265 \dashrightarrow 00{:}24{:}25.865$ with the efficacy of of

NOTE Confidence: 0.9730972

 $00:24:25.865 \longrightarrow 00:24:27.304$ of these conjugates in patients

NOTE Confidence: 0.9730972

 $00{:}24{:}27.304 \dashrightarrow 00{:}24{:}28.825$ with metastatic disease, there was

NOTE Confidence: 0.9730972

00:24:28.825 --> 00:24:30.025 interest in seeing whether these

NOTE Confidence: 0.9730972

 $00:24:30.025 \longrightarrow 00:24:31.244$ conjugates could also,

 $00:24:32.905 \longrightarrow 00:24:34.744$ work in preventing recurrences in

NOTE Confidence: 0.9937965

 $00:24:34.744 \longrightarrow 00:24:36.365$ patients with early stage disease.

NOTE Confidence: 0.9715371

 $00:24:36.929 \longrightarrow 00:24:38.129$ And so there originally, there

NOTE Confidence: 0.9715371

00:24:38.129 --> 00:24:39.250 was a large trial that

NOTE Confidence: 0.9715371

 $00:24:39.250 \longrightarrow 00:24:40.250$ looked at patients who had

NOTE Confidence: 0.9715371

00:24:40.250 --> 00:24:41.649 a high risk early stage

NOTE Confidence: 0.9715371

00:24:41.649 --> 00:24:43.169 disease because their cancers did

NOTE Confidence: 0.9715371

 $00:24:43.169 \longrightarrow 00:24:44.450$ not respond all that well

NOTE Confidence: 0.9715371

 $00:24:44.450 \longrightarrow 00:24:45.190$ to neoadjuvant

NOTE Confidence: 0.9603665

 $00:24:45.570 \longrightarrow 00:24:46.070$ therapy,

NOTE Confidence: 0.9633596

00:24:46.769 --> 00:24:49.009 neoadjuvant HER2 therapy, and randomized

NOTE Confidence: 0.9633596

 $00:24:49.009 \longrightarrow 00:24:50.289$ those patients to either the

NOTE Confidence: 0.9633596

 $00:24:50.289 \longrightarrow 00:24:51.490$ standard back then, which was

NOTE Confidence: 0.9633596

 $00{:}24{:}51.490 \to 00{:}24{:}53.025$ just continuing trastuzumab

NOTE Confidence: 0.8556442

 $00:24:53.484 \longrightarrow 00:24:54.945$ or using TDM one,

NOTE Confidence: 0.94074893

 $00:24:55.565 \longrightarrow 00:24:57.905$ and the TDM one showed

00:24:57.965 --> 00:24:59.165 about almost a fifty percent

NOTE Confidence: 0.94074893

00:24:59.165 --> 00:25:00.225 reduction in recurrences,

NOTE Confidence: 0.9902509

 $00{:}25{:}01.965 \rightarrow 00{:}25{:}03.565$ compared to trastuzumab. So that's

NOTE Confidence: 0.9902509

 $00:25:03.565 \longrightarrow 00:25:04.945$ now the standard of care.

NOTE Confidence: 0.93455315

 $00:25:06.550 \longrightarrow 00:25:07.910$ One issue was that the

NOTE Confidence: 0.93455315

 $00:25:07.910 \longrightarrow 00:25:08.810$ brain metastases,

NOTE Confidence: 0.9586702

00:25:09.590 --> 00:25:11.830 actually was not significantly reduced

NOTE Confidence: 0.9586702

 $00:25:11.830 \longrightarrow 00:25:12.710$ with t d m one

NOTE Confidence: 0.9586702

 $00:25:12.710 \longrightarrow 00:25:14.150$ compared to trastuzumab, and I

NOTE Confidence: 0.9586702

 $00:25:14.150 \longrightarrow 00:25:15.030$ know that goes against a

NOTE Confidence: 0.9586702

 $00:25:15.030 \longrightarrow 00:25:15.750$ little bit about what I

NOTE Confidence: 0.9586702

 $00:25:15.750 \longrightarrow 00:25:16.970$ just said about brain metastases.

NOTE Confidence: 0.98577327

00:25:17.510 --> 00:25:18.310 And maybe we can talk

NOTE Confidence: 0.98577327

 $00:25:18.310 \longrightarrow 00:25:19.609$ about why that might be,

NOTE Confidence: 0.99700403

 $00:25:19.910 \longrightarrow 00:25:20.475$ in our

 $00:25:21.434 \longrightarrow 00:25:23.355$ very interesting question answer period

NOTE Confidence: 0.9503671

 $00:25:23.355 \longrightarrow 00:25:25.135$ that's gonna follow this talk.

NOTE Confidence: 0.94429535

 $00:25:27.035 \longrightarrow 00:25:28.475$ But it has led us

NOTE Confidence: 0.94429535

 $00:25:28.475 \longrightarrow 00:25:30.234$ to do this study in

NOTE Confidence: 0.94429535

 $00:25:30.234 \longrightarrow 00:25:31.054$ in the alliance

NOTE Confidence: 0.8888855

 $00:25:31.355 \longrightarrow 00:25:32.335$ where we're taking

NOTE Confidence: 0.98935944

 $00:25:32.650 \longrightarrow 00:25:34.109$ those patients who had,

NOTE Confidence: 0.9833363

 $00:25:35.690 \longrightarrow 00:25:37.450$ residual disease after neoadjuvant therapy

NOTE Confidence: 0.9833363

 $00{:}25{:}37.450 \dashrightarrow 00{:}25{:}38.890$ and randomizing them to TDM

NOTE Confidence: 0.9833363

 $00:25:38.890 \longrightarrow 00:25:40.510$ one or TDM one plus

NOTE Confidence: 0.9833363

00:25:40.650 --> 00:25:42.730 this, potent HER2 tyrosine kinase

NOTE Confidence: 0.9833363

 $00:25:42.730 \longrightarrow 00:25:44.410$ inhibitor called tucatinib. And this

NOTE Confidence: 0.9833363

 $00:25:44.410 \longrightarrow 00:25:45.630$ study is underway

NOTE Confidence: 0.9579128

 $00:25:46.125 \longrightarrow 00:25:47.565$ here, at Yale, so you

NOTE Confidence: 0.9579128

00:25:47.565 --> 00:25:48.605 can put patients on this,

NOTE Confidence: 0.9579128

 $00{:}25{:}48.605 \dashrightarrow 00{:}25{:}49.725$ and I will designate that

 $00{:}25{:}49.725 --> 00{:}25{:}51.484$ by the handsome Dan icon

NOTE Confidence: 0.9579128

 $00:25:51.484 \longrightarrow 00:25:52.285$ as you'll see for the

NOTE Confidence: 0.9579128

 $00:25:52.285 \longrightarrow 00:25:53.665$ rest of the talk here.

NOTE Confidence: 0.98521584

 $00:25:54.525 \longrightarrow 00:25:55.645$ We also were looking at

NOTE Confidence: 0.98521584

 $00:25:55.645 \longrightarrow 00:25:56.625$ whether you can,

NOTE Confidence: 0.9899364

 $00:25:57.325 \longrightarrow 00:25:59.005$ use the the very well

NOTE Confidence: 0.9899364

 $00:25:59.005 \longrightarrow 00:26:01.200$ tolerated nature of TDM one

NOTE Confidence: 0.9899364

 $00:26:01.279 \longrightarrow 00:26:01.859$ to dees calate

NOTE Confidence: 0.9941268

 $00:26:02.240 \longrightarrow 00:26:04.340$ therapy in patients with earlier,

NOTE Confidence: 0.97174686

00:26:04.880 --> 00:26:06.480 or lower risk HER2 positive

NOTE Confidence: 0.97174686

 $00:26:06.480 \longrightarrow 00:26:06.980$ disease.

NOTE Confidence: 0.9155218

 $00:26:08.000 \longrightarrow 00:26:09.519$ So my then colleague at

NOTE Confidence: 0.9155218

00:26:09.519 --> 00:26:10.799 Dana Farber, Sarah Talaney, and

NOTE Confidence: 0.9155218

 $00:26:10.799 \longrightarrow 00:26:13.380$ I, did this, investigator initiated

NOTE Confidence: 0.915521800:26:13.519 --> 00:26:14.019 trial

00:26:14.399 --> 00:26:15.600 looking at patients with stage

NOTE Confidence: 0.9472453

00:26:15.600 --> 00:26:16.899 one HER2 positive cancers,

NOTE Confidence: 0.99443245

 $00:26:17.255 \longrightarrow 00:26:18.635$ randomizing them to,

NOTE Confidence: 0.9085021

 $00:26:19.015 \longrightarrow 00:26:20.375$ the previous standard that was

NOTE Confidence: 0.9085021

 $00:26:20.375 \longrightarrow 00:26:22.215$ actually established by Eric of

NOTE Confidence: 0.9085021

 $00:26:22.215 \longrightarrow 00:26:24.695$ paclitaxel and trastuzumab or TdM

NOTE Confidence: 0.9085021

 $00:26:24.695 \longrightarrow 00:26:25.195$ one,

NOTE Confidence: 0.97333

 $00:26:25.895 \longrightarrow 00:26:27.335$ and, the TdM one was

NOTE Confidence: 0.97333

 $00{:}26{:}27.335 \dashrightarrow 00{:}26{:}29.115$ associated with incredibly good outcomes.

NOTE Confidence: 0.97333

 $00:26:29.175 \longrightarrow 00:26:29.835$ There was,

NOTE Confidence: 0.9995723

 $00{:}26{:}30.550 \dashrightarrow 00{:}26{:}31.210$ less than

NOTE Confidence: 0.93582803

 $00:26:31.750 \longrightarrow 00:26:33.590$ one percent distant recurrence at

NOTE Confidence: 0.93582803

 $00:26:33.590 \longrightarrow 00:26:34.330$ five years.

NOTE Confidence: 0.8963836

 $00:26:34.790 \longrightarrow 00:26:36.330$ So clearly this was effective.

NOTE Confidence: 0.9820808

 $00:26:37.030 \longrightarrow 00:26:38.070$ We had assumed it was

NOTE Confidence: 0.9820808

00:26:38.070 --> 00:26:39.450 gonna be much better tolerated

 $00:26:39.590 \longrightarrow 00:26:41.369$ than the the taxane,

NOTE Confidence: 0.97877425

 $00:26:42.150 \longrightarrow 00:26:42.650$ trastuzumab

NOTE Confidence: 0.933589

 $00:26:42.950 \longrightarrow 00:26:43.450$ regimen,

NOTE Confidence: 0.9427413

 $00:26:44.070 \longrightarrow 00:26:45.425$ and it turned out it

NOTE Confidence: 0.9427413

 $00:26:45.425 \longrightarrow 00:26:46.625$ it had less some of

NOTE Confidence: 0.9427413

00:26:46.625 --> 00:26:48.325 the standard chemotherapy toxicities,

NOTE Confidence: 0.9842276

 $00:26:48.785 \longrightarrow 00:26:50.545$ but people were discontinuing the

NOTE Confidence: 0.9842276

 $00:26:50.545 \longrightarrow 00:26:51.665$ TDM one, which was given

NOTE Confidence: 0.9842276

 $00:26:51.665 \longrightarrow 00:26:52.545$ for a year in this

NOTE Confidence: 0.9842276

00:26:52.545 --> 00:26:53.045 study,

NOTE Confidence: 0.98425347

 $00:26:53.665 \longrightarrow 00:26:54.165$ earlier,

NOTE Confidence: 0.9758548

00:26:54.625 --> 00:26:55.905 than they were discontinuing the

NOTE Confidence: 0.9758548

00:26:55.905 --> 00:26:57.105 trastuzumab in the in the

NOTE Confidence: 0.9758548

00:26:57.105 --> 00:26:58.260 other arm of the study.

NOTE Confidence: 0.8905601

 $00:26:59.220 \longrightarrow 00:27:00.680$ So, that's led,

 $00:27:02.100 \longrightarrow 00:27:03.220$ Sarah to go on to

NOTE Confidence: 0.97919005

 $00:27:03.220 \longrightarrow 00:27:04.740$ do this second version of

NOTE Confidence: 0.97919005

 $00:27:04.740 \longrightarrow 00:27:05.480$ the study,

NOTE Confidence: 0.9759287

 $00:27:06.020 \longrightarrow 00:27:07.460$ comparing just six cycles of

NOTE Confidence: 0.9759287

 $00:27:07.460 \longrightarrow 00:27:08.580$ TDM one, because we think

NOTE Confidence: 0.9759287

 $00:27:08.580 \longrightarrow 00:27:09.460$ that might be all you

NOTE Confidence: 0.9759287

 $00:27:09.460 \longrightarrow 00:27:09.960$ need,

NOTE Confidence: 0.9824363

 $00:27:10.420 \longrightarrow 00:27:10.920$ versus,

NOTE Confidence: 0.9774904

 $00:27:11.460 \longrightarrow 00:27:12.280$ the same

NOTE Confidence: 0.94397587

 $00:27:12.744 \longrightarrow 00:27:14.105$ control arm. Again, this is

NOTE Confidence: 0.94397587

 $00:27:14.105 \longrightarrow 00:27:15.625$ a study that's ongoing at

NOTE Confidence: 0.94397587

 $00:27:15.625 \longrightarrow 00:27:16.205$ at Yale,

NOTE Confidence: 0.9976562

 $00:27:16.664 \longrightarrow 00:27:17.625$ and it's actually a very

NOTE Confidence: 0.9976562

 $00{:}27{:}17.625 \dashrightarrow 00{:}27{:}19.484$ good study for these patients,

NOTE Confidence: 0.99983335

 $00:27:20.345 \longrightarrow 00:27:21.164$ in my opinion.

NOTE Confidence: 0.98282117

00:27:21.865 --> 00:27:23.625 There's also studies going looking

 $00:27:23.625 \longrightarrow 00:27:25.225$ at TDXD, this more potent

NOTE Confidence: 0.98282117

 $00:27:25.225 \longrightarrow 00:27:26.845$ ADC. This is a study,

NOTE Confidence: 0.9359364

00:27:27.419 --> 00:27:28.700 actually comparing TDM one to

NOTE Confidence: 0.9359364

 $00{:}27{:}28.700 \dashrightarrow 00{:}27{:}30.139$ TDXD in this adjuvant setting,

NOTE Confidence: 0.9359364

 $00{:}27{:}30.139 \dashrightarrow 00{:}27{:}31.279$ and then there's a neoadjuvant

NOTE Confidence: 0.9359364

 $00:27:31.340 \longrightarrow 00:27:32.159$ file as well.

NOTE Confidence: 0.99658

 $00:27:32.460 \longrightarrow 00:27:32.960$ Okay.

NOTE Confidence: 0.8798

 $00:27:33.340 \longrightarrow 00:27:33.840$ So,

NOTE Confidence: 0.9705265

 $00:27:34.940 \longrightarrow 00:27:36.220$ switching gears a little bit,

NOTE Confidence: 0.9705265

 $00:27:36.379 \longrightarrow 00:27:37.179$ and this, I think, is

NOTE Confidence: 0.9705265

00:27:37.179 --> 00:27:38.480 where it gets really interesting.

NOTE Confidence: 0.9689061

00:27:41.205 --> 00:27:42.244 All the data I've showed

NOTE Confidence: 0.9689061

 $00:27:42.244 \longrightarrow 00:27:43.285$ you before is for these

NOTE Confidence: 0.9689061

 $00{:}27{:}43.285 \to 00{:}27{:}45.045$ HER2 amplified cancers. These are

NOTE Confidence: 0.9689061

 $00:27:45.045 \longrightarrow 00:27:46.984$ the cancers that have incredibly

 $00:27:47.045 \longrightarrow 00:27:48.185$ high levels of HER2.

NOTE Confidence: 0.96321493

 $00{:}27{:}48.965 \dashrightarrow 00{:}27{:}50.565$ In breast cancer, there's actually

NOTE Confidence: 0.96321493

 $00{:}27{:}50.565 \dashrightarrow 00{:}27{:}52.085$ a continuum of HER2 expression.

NOTE Confidence: 0.96321493

 $00:27:52.085 \longrightarrow 00:27:53.125$ So you got these super

NOTE Confidence: 0.9632149300:27:53.125 --> 00:27:53.625 high

NOTE Confidence: 0.9843146

 $00{:}27{:}53.970 \dashrightarrow 00{:}27{:}55.809$ amplified cancers with a million

NOTE Confidence: 0.9843146

 $00:27:55.809 \longrightarrow 00:27:56.850$ or two million copies of

NOTE Confidence: 0.9843146

 $00:27:56.850 \longrightarrow 00:27:58.390$ HER2, and then you've got

NOTE Confidence: 0.9843146

00:27:58.609 --> 00:27:59.669 everything in between,

NOTE Confidence: 0.9438632

00:28:00.450 --> 00:28:02.369 moderate, lowish levels of HER2,

NOTE Confidence: 0.9438632

 $00{:}28{:}02.369 \dashrightarrow 00{:}28{:}03.990$ a hundred thousand, fifty thousand

NOTE Confidence: 0.9438632

 $00:28:04.130 \longrightarrow 00:28:05.890$ HER2 proteins. And we call

NOTE Confidence: 0.9438632

 $00:28:05.890 \longrightarrow 00:28:07.590$ those HER2 low by immunohistochemistry.

NOTE Confidence: 0.98633784

 $00:28:08.049 \longrightarrow 00:28:09.125$ They're called one plus or

NOTE Confidence: 0.98633784

 $00:28:09.125 \longrightarrow 00:28:10.085$ two plus, but they're not

NOTE Confidence: 0.98633784

 $00:28:10.085 \longrightarrow 00:28:10.585$ amplified.

 $00{:}28{:}10.885 \dashrightarrow 00{:}28{:}11.845$ And then you have the

NOTE Confidence: 0.981475

00:28:11.845 --> 00:28:13.065 very negative,

NOTE Confidence: 0.9632773

00:28:13.445 --> 00:28:14.804 cancers, which we're gonna call

NOTE Confidence: 0.9632773

 $00:28:14.804 \longrightarrow 00:28:15.625$ HER2 negative.

NOTE Confidence: 0.9683304

00:28:17.524 --> 00:28:18.725 And it turns out that

NOTE Confidence: 0.9683304

 $00:28:18.725 \longrightarrow 00:28:20.965$ these lowish levels of HER2

NOTE Confidence: 0.9683304

 $00:28:20.965 \longrightarrow 00:28:22.164$ are actually very common. In

NOTE Confidence: 0.9683304

00:28:22.164 --> 00:28:23.730 fact, the majority of breast

NOTE Confidence: 0.9683304

 $00:28:23.730 \longrightarrow 00:28:25.890$ cancer has some level of

NOTE Confidence: 0.9683304

00:28:25.890 --> 00:28:26.790 HER2 expression.

NOTE Confidence: 0.97628504

 $00{:}28{:}28.690 \dashrightarrow 00{:}28{:}29.970$ So given that, and given

NOTE Confidence: 0.97628504

 $00:28:29.970 \longrightarrow 00:28:31.190$ that we have this monoclonal

NOTE Confidence: 0.97628504

 $00{:}28{:}31.250 \dashrightarrow 00{:}28{:}32.390$ antibody called trastuzumab

NOTE Confidence: 0.94086313

00:28:32.690 --> 00:28:33.750 that we know works,

NOTE Confidence: 0.9617853

 $00:28:34.530 \longrightarrow 00:28:35.270$ with chemotherapy,

00:28:36.765 --> 00:28:37.505 The NSABP,

NOTE Confidence: 0.98427093

00:28:38.765 --> 00:28:40.605 did this very large trial

NOTE Confidence: 0.98427093

00:28:40.605 --> 00:28:41.725 where they took patients with

NOTE Confidence: 0.98427093

00:28:41.725 --> 00:28:43.405 HER2 low early breast cancer,

NOTE Confidence: 0.98427093

 $00:28:43.405 \longrightarrow 00:28:44.685$ and they randomized them to

NOTE Confidence: 0.98427093

 $00:28:44.685 \longrightarrow 00:28:46.545$ chemotherapy with or without trastuzumab,

NOTE Confidence: 0.98427093

 $00:28:46.765 \longrightarrow 00:28:47.725$ the same thing that had

NOTE Confidence: 0.98427093

 $00:28:47.725 \longrightarrow 00:28:49.025$ shown to be very effective

NOTE Confidence: 0.98427093

 $00{:}28{:}49.165 \dashrightarrow 00{:}28{:}50.625$ in HER2 amplified cancers.

NOTE Confidence: 0.95356876

00:28:51.710 --> 00:28:53.310 Unfortunately, this was completely not

NOTE Confidence: 0.95356876

 $00{:}28{:}53.310 \dashrightarrow 00{:}28{:}55.230$ effective, so adding trastuzumab for

NOTE Confidence: 0.95356876

 $00:28:55.230 \longrightarrow 00:28:56.830$ these HER2 low cancers did

NOTE Confidence: 0.95356876

 $00:28:56.830 \longrightarrow 00:28:57.810$ absolutely nothing,

NOTE Confidence: 0.872733

 $00:28:58.350 \longrightarrow 00:28:59.230$ and you can see the

NOTE Confidence: 0.872733

 $00:28:59.230 \longrightarrow 00:29:00.510$ IDFS has a ratio is

NOTE Confidence: 0.872733

 $00:29:00.510 \longrightarrow 00:29:02.290$ point nine eight shows randomization

 $00:29:02.510 \longrightarrow 00:29:03.410$ was very effective,

NOTE Confidence: 0.968991

 $00:29:04.030 \longrightarrow 00:29:04.530$ there,

NOTE Confidence: 0.99636555

 $00:29:05.150 \longrightarrow 00:29:06.050$ but no benefit.

NOTE Confidence: 0.90436745

 $00:29:07.445 \longrightarrow 00:29:08.265$ So then

NOTE Confidence: 0.8995647

 $00:29:11.125 \longrightarrow 00:29:13.045$ because trastuzumab works by, at

NOTE Confidence: 0.8995647

 $00:29:13.045 \longrightarrow 00:29:14.325$ least in part, by inhibiting

NOTE Confidence: 0.8995647

00:29:14.325 --> 00:29:15.145 HER2 signaling,

NOTE Confidence: 0.9575333

 $00{:}29{:}16.485 \dashrightarrow 00{:}29{:}18.165$ it suggests that HER2 signaling

NOTE Confidence: 0.9575333

00:29:18.165 --> 00:29:19.285 really isn't important in these

NOTE Confidence: 0.9575333

00:29:19.285 --> 00:29:20.725 HER2 low cancers, so blocking

NOTE Confidence: 0.9575333

 $00:29:20.725 \longrightarrow 00:29:21.785$ it doesn't do anything.

NOTE Confidence: 0.9619348

 $00:29:22.830 \longrightarrow 00:29:23.950$ But it's still there. The

NOTE Confidence: 0.9619348

 $00:29:23.950 \longrightarrow 00:29:24.910$ HER2 is still there, and

NOTE Confidence: 0.9619348

 $00:29:24.910 \longrightarrow 00:29:25.870$ we have an antibody drug

NOTE Confidence: 0.9619348

 $00:29:25.870 \longrightarrow 00:29:27.470$ conjugate, which is basically looking

 $00:29:27.470 \longrightarrow 00:29:28.669$ for a target. And we

NOTE Confidence: 0.9619348

 $00:29:28.669 \longrightarrow 00:29:30.289$ use these antibody drug conjugates

NOTE Confidence: 0.9987006 00:29:30.669 --> 00:29:31.169 to NOTE Confidence: 0.9975117

 $00:29:31.630 \longrightarrow 00:29:32.910$ to use the HER2 that's

NOTE Confidence: 0.9975117

 $00:29:32.910 \longrightarrow 00:29:33.789$ on the surface of these

NOTE Confidence: 0.9975117

 $00:29:33.789 \longrightarrow 00:29:34.610$ low cancers

NOTE Confidence: 0.9535528

 $00:29:34.924 \longrightarrow 00:29:35.965$ just as an address, a

NOTE Confidence: 0.9535528

 $00:29:35.965 \longrightarrow 00:29:37.405$ place, you know, a way

NOTE Confidence: 0.9535528

 $00{:}29{:}37.405 \dashrightarrow 00{:}29{:}39.664$ to deliver our cytotoxic agent.

NOTE Confidence: 0.9751976

 $00:29:42.125 \longrightarrow 00:29:43.804$ So we now we had

NOTE Confidence: 0.9751976

 $00:29:43.804 \longrightarrow 00:29:45.245$ TDXD, and in the phase

NOTE Confidence: 0.9751976

 $00:29:45.245 \longrightarrow 00:29:46.684$ one trial of TDXD, we

NOTE Confidence: 0.9751976

 $00:29:46.684 \longrightarrow 00:29:47.825$ did have some cohorts

NOTE Confidence: 0.9640886

 $00:29:48.125 \longrightarrow 00:29:49.745$ of HER2 low cancers,

NOTE Confidence: 0.9386422

 $00:29:50.309 \longrightarrow 00:29:51.190$ and it actually looked like

NOTE Confidence: 0.9386422

00:29:51.190 --> 00:29:52.389 there was some activity in

 $00:29:52.389 \longrightarrow 00:29:53.690$ these HER2 low cancers.

NOTE Confidence: 0.90024996

 $00{:}29{:}54.070 \dashrightarrow 00{:}29{:}55.669$ That prompted this very large

NOTE Confidence: 0.90024996 00:29:55.669 --> 00:29:56.169 trial NOTE Confidence: 0.99709773 00:29:56.549 --> 00:29:57.049 of NOTE Confidence: 0.98471016

 $00:29:57.429 \longrightarrow 00:29:59.190$ patients with metastatic HER2 low

NOTE Confidence: 0.98471016

00:29:59.190 --> 00:30:00.630 breast cancer. Again, the most

NOTE Confidence: 0.98471016

00:30:00.630 --> 00:30:02.090 common kind of breast cancer,

NOTE Confidence: 0.9768359

 $00:30:02.535 \longrightarrow 00:30:03.975$ there is sixty at least

NOTE Confidence: 0.9768359

00:30:03.975 --> 00:30:05.355 sixty percent of breast cancers,

NOTE Confidence: 0.92672604

 $00{:}30{:}06.055 \dashrightarrow 00{:}30{:}07.415$ and randomized them to tDxD

NOTE Confidence: 0.92672604

 $00:30:07.415 \longrightarrow 00:30:09.335$ or chemotherapy because chemotherapy was

NOTE Confidence: 0.92672604

 $00:30:09.335 \longrightarrow 00:30:10.935$ a standard for these non

NOTE Confidence: 0.92672604

 $00{:}30{:}10.935 --> 00{:}30{:}12.315 \ \mathrm{HER2} \ \mathrm{amplified} \ \mathrm{cancers},$

NOTE Confidence: 0.98338205

00:30:12.695 --> 00:30:14.215 and tDxD was much better

NOTE Confidence: 0.98338205

 $00:30:14.215 \longrightarrow 00:30:16.050$ than chemotherapy in terms of

 $00:30:16.290 \longrightarrow 00:30:16.790$ survival,

NOTE Confidence: 0.90817577

 $00{:}30{:}17.410 \dashrightarrow 00{:}30{:}18.470$ progression, response rate.

NOTE Confidence: 0.9665268

 $00:30:20.290 \longrightarrow 00:30:21.170$ And that led to the

NOTE Confidence: 0.9665268

 $00:30:21.170 \longrightarrow 00:30:22.610$ approval of tDxD in these

NOTE Confidence: 0.9665268

 $00:30:22.610 \longrightarrow 00:30:24.370$ HER2 low cancers, the first

NOTE Confidence: 0.9665268

 $00{:}30{:}24.370 \dashrightarrow 00{:}30{:}26.530$ approval for of anything in

NOTE Confidence: 0.9665268

00:30:26.530 --> 00:30:27.590 HER2 low cancers,

NOTE Confidence: 0.95703566

 $00:30:27.970 \longrightarrow 00:30:29.090$ because it really wasn't a

NOTE Confidence: 0.95703566

 $00{:}30{:}29.090 \dashrightarrow 00{:}30{:}30{:}914$ thing before the drug worked

NOTE Confidence: 0.95703566

 $00:30:30.914 \longrightarrow 00:30:31.414$ there.

NOTE Confidence: 0.96080273

00:30:32.274 --> 00:30:33.475 And it said, well, okay,

NOTE Confidence: 0.96080273

 $00:30:33.475 \longrightarrow 00:30:34.674$ if if it worked in

NOTE Confidence: 0.96080273

 $00:30:34.674 \longrightarrow 00:30:36.115$ these HER2 low cancers, and

NOTE Confidence: 0.96080273

00:30:36.115 --> 00:30:37.315 in fact, you know, I

NOTE Confidence: 0.96080273

00:30:37.315 --> 00:30:38.514 talked about that there's these

NOTE Confidence: 0.96080273

00:30:38.514 --> 00:30:39.875 one plus level and two

 $00:30:39.875 \longrightarrow 00:30:40.695$ plus levels.

NOTE Confidence: 0.9351204

 $00:30:42.034 \longrightarrow 00:30:43.154$ Two plus is more than

NOTE Confidence: 0.9351204

 $00:30:43.154 \longrightarrow 00:30:43.815$ one plus.

NOTE Confidence: 0.91171026

 $00:30:44.530 \longrightarrow 00:30:45.890$ If it in the trial,

NOTE Confidence: 0.91171026

 $00:30:45.890 \longrightarrow 00:30:47.410$ it actually the efficacy was

NOTE Confidence: 0.91171026

 $00:30:47.410 \longrightarrow 00:30:48.610$ pretty similar between the one

NOTE Confidence: 0.91171026

 $00:30:48.610 \longrightarrow 00:30:49.490$ plus and two plus. So

NOTE Confidence: 0.91171026

 $00:30:49.490 \longrightarrow 00:30:50.610$ that kind of begged the

NOTE Confidence: 0.91171026

00:30:50.610 --> 00:30:51.730 question, okay, well, can you

NOTE Confidence: 0.91171026

 $00:30:51.730 \longrightarrow 00:30:53.170$ go? How how low can

NOTE Confidence: 0.91171026

00:30:53.170 --> 00:30:53.830 you go?

NOTE Confidence: 0.9596975

00:30:54.130 --> 00:30:55.410 And in about twenty percent

NOTE Confidence: 0.9596975

00:30:55.410 --> 00:30:57.085 of cancers, there's, like, really

NOTE Confidence: 0.9596975

00:30:57.085 --> 00:30:59.404 marginal levels of HER2. So

NOTE Confidence: 0.9596975

 $00:30:59.404 \longrightarrow 00:31:00.684$ not even one plus, it's

 $00:31:00.684 \longrightarrow 00:31:01.485$ just like you can, you

NOTE Confidence: 0.9596975

 $00:31:01.485 \longrightarrow 00:31:02.284$ know, if you look real

NOTE Confidence: 0.9596975

 $00:31:02.284 \longrightarrow 00:31:03.085$ close, you can see a

NOTE Confidence: 0.9596975

 $00:31:03.085 \longrightarrow 00:31:04.764$ little smidgen of HER2 on

NOTE Confidence: 0.9596975

 $00:31:04.764 \longrightarrow 00:31:05.965$ the surface, but they're not

NOTE Confidence: 0.9596975

 $00:31:05.965 \longrightarrow 00:31:06.465$ completely

NOTE Confidence: 0.9830559

 $00:31:06.924 \longrightarrow 00:31:08.304$ stone cold zero.

NOTE Confidence: 0.9317905

 $00:31:08.684 \longrightarrow 00:31:09.424$ And so,

NOTE Confidence: 0.92909163

 $00:31:10.480 \longrightarrow 00:31:11.919$ we just so there are

NOTE Confidence: 0.92909163

 $00:31:11.919 \longrightarrow 00:31:13.360$ just another trial that was

NOTE Confidence: 0.92909163

 $00{:}31{:}13.360 \dashrightarrow 00{:}31{:}14.899$ just presented over the summer.

NOTE Confidence: 0.9804674

 $00:31:15.759 \longrightarrow 00:31:17.200$ Same almost the same trial

NOTE Confidence: 0.9804674

00:31:17.200 --> 00:31:18.080 as I just showed you,

NOTE Confidence: 0.9804674

00:31:18.080 --> 00:31:18.740 but now,

NOTE Confidence: 0.938314

00:31:19.679 --> 00:31:21.059 slightly different setting,

NOTE Confidence: 0.96139455

 $00:31:21.440 \longrightarrow 00:31:23.039$ but now this trial included

 $00:31:23.039 \longrightarrow 00:31:24.565$ a population of these ultra

NOTE Confidence: 0.96139455

 $00{:}31{:}25.045 \to 00{:}31{:}26.325$ what we're now calling ultra

NOTE Confidence: 0.96139455

 $00:31:26.325 \longrightarrow 00:31:28.245$ low cancers. So just the

NOTE Confidence: 0.96139455

 $00:31:28.245 \longrightarrow 00:31:29.785$ smallest amount of HER2,

NOTE Confidence: 0.9850676

 $00:31:30.325 \longrightarrow 00:31:31.285$ not enough to be one

NOTE Confidence: 0.9850676

00:31:31.285 --> 00:31:31.785 plus.

NOTE Confidence: 0.91757077

00:31:33.045 --> 00:31:35.305 And what was seen, surprisingly

NOTE Confidence: 0.91757077

 $00:31:35.445 \longrightarrow 00:31:35.945$ somewhat,

NOTE Confidence: 0.8733977

 $00:31:36.645 \longrightarrow 00:31:37.465$ was that,

NOTE Confidence: 0.9457615

 $00:31:38.210 \longrightarrow 00:31:39.570$ actually, tDxD was much better

NOTE Confidence: 0.9457615

 $00{:}31{:}39.570 \dashrightarrow 00{:}31{:}41.010$ than chemotherapy in these ultra

NOTE Confidence: 0.9457615

00:31:41.010 --> 00:31:42.050 low cancers. Seemed like the

NOTE Confidence: 0.9457615

 $00{:}31{:}42.050 \dashrightarrow 00{:}31{:}43.250$ benefit was pretty similar to

NOTE Confidence: 0.9457615

 $00:31:43.250 \longrightarrow 00:31:43.970$ what we saw with the

NOTE Confidence: 0.9457615

 $00:31:43.970 \longrightarrow 00:31:44.710$ low cancers.

 $00:31:45.890 \longrightarrow 00:31:47.090$ Survival also seemed to be

NOTE Confidence: 0.91219753

 $00:31:47.090 \longrightarrow 00:31:48.050$ trending in the right direction,

NOTE Confidence: 0.91219753

00:31:48.050 --> 00:31:48.950 although immature.

NOTE Confidence: 0.94720834

 $00:31:49.410 \longrightarrow 00:31:50.370$ But I think what was

NOTE Confidence: 0.94720834

 $00:31:50.370 \longrightarrow 00:31:52.035$ particularly important or what was

NOTE Confidence: 0.94720834

 $00{:}31{:}52.035 \dashrightarrow 00{:}31{:}53.395$ striking was that response rate

NOTE Confidence: 0.94720834

 $00:31:53.395 \longrightarrow 00:31:54.595$ in these ultra low cancers

NOTE Confidence: 0.94720834

 $00:31:54.595 \longrightarrow 00:31:55.715$ was sixty two percent. These

NOTE Confidence: 0.94720834

00:31:55.715 --> 00:31:56.855 were pretreated patients,

NOTE Confidence: 0.95936614 00:31:57.555 --> 00:31:58.055 and.

NOTE Confidence: 0.94342226

 $00:31:59.235 \longrightarrow 00:32:00.435$ you can see that it's

NOTE Confidence: 0.94342226

 $00{:}32{:}00.435 \dashrightarrow 00{:}32{:}01.555$ actually the response rate in

NOTE Confidence: 0.94342226

 $00:32:01.555 \longrightarrow 00:32:02.435$ the ultra low is pretty

NOTE Confidence: 0.94342226

 $00:32:02.435 \longrightarrow 00:32:03.955$ similar to the HER2 low.

NOTE Confidence: 0.94342226

 $00:32:04.275 \longrightarrow 00:32:05.315$ And again, we can kinda

NOTE Confidence: 0.94342226

00:32:05.315 --> 00:32:06.510 talk about why that that

 $00:32:06.510 \longrightarrow 00:32:07.250$ might be,

NOTE Confidence: 0.9984202

 $00:32:07.710 \longrightarrow 00:32:08.690$ towards the end.

NOTE Confidence: 0.94733834

00:32:11.150 --> 00:32:12.510 It's funny, you know, when,

NOTE Confidence: 0.94733834

 $00:32:12.750 \longrightarrow 00:32:14.030$ in some of this original

NOTE Confidence: 0.94733834

 $00:32:14.030 \longrightarrow 00:32:15.230$ steering committee meetings of of

NOTE Confidence: 0.94733834

00:32:15.230 --> 00:32:15.730 TDXD,

NOTE Confidence: 0.90854234

 $00:32:16.350 \longrightarrow 00:32:17.950$ when the original ultra low

NOTE Confidence: 0.90854234

 $00:32:17.950 \longrightarrow 00:32:18.750$ date I'm sorry, when the

NOTE Confidence: 0.90854234

 $00:32:18.750 \longrightarrow 00:32:20.110$ original HER2 low data came

NOTE Confidence: 0.90854234

00:32:20.110 --> 00:32:20.610 out,

NOTE Confidence: 0.93317074

 $00:32:20.955 \longrightarrow 00:32:22.154$ people that I remember one

NOTE Confidence: 0.93317074

 $00:32:22.154 \longrightarrow 00:32:23.235$ specific person raising their hand

NOTE Confidence: 0.93317074

 $00{:}32{:}23.235 \dashrightarrow 00{:}32{:}23.995$ and say, why don't we

NOTE Confidence: 0.93317074

 $00:32:23.995 \longrightarrow 00:32:24.955$ look at HER two zero

NOTE Confidence: 0.93317074

 $00:32:24.955 \longrightarrow 00:32:25.914$ cancers? And it was like,

00:32:25.914 --> 00:32:27.434 everybody kinda laughed because it's

NOTE Confidence: 0.93317074

 $00{:}32{:}27.434 \dashrightarrow 00{:}32{:}28.554$ a HER two targeted drug.

NOTE Confidence: 0.93317074

00:32:28.554 --> 00:32:29.434 Of course, it's not gonna

NOTE Confidence: 0.93317074

 $00:32:29.434 \longrightarrow 00:32:30.315$ work in HER two zero

NOTE Confidence: 0.93317074

 $00:32:30.315 \longrightarrow 00:32:30.815$ cancers.

NOTE Confidence: 0.973676

 $00:32:31.914 \longrightarrow 00:32:33.034$ But it seems to work

NOTE Confidence: 0.973676

 $00:32:33.034 \longrightarrow 00:32:34.075$ in these ultra low cancers,

NOTE Confidence: 0.973676

 $00:32:34.075 \longrightarrow 00:32:35.034$ and now there's a question

NOTE Confidence: 0.973676

 $00:32:35.034 \longrightarrow 00:32:36.270$ of could it even work

NOTE Confidence: 0.973676

 $00:32:36.270 \longrightarrow 00:32:37.870$ with pretty undetectable levels of

NOTE Confidence: 0.973676

00:32:37.870 --> 00:32:38.370 HER2?

NOTE Confidence: 0.94859797

 $00:32:39.150 \longrightarrow 00:32:41.250$ And to test that, Adrianna

NOTE Confidence: 0.94859797

 $00:32:41.310 \longrightarrow 00:32:42.370$ Khan is doing,

NOTE Confidence: 0.99783623

 $00:32:42.830 \longrightarrow 00:32:43.890$ this IIT

NOTE Confidence: 0.88283587

 $00:32:44.270 \longrightarrow 00:32:46.270$ looking specifically at HER2 zero

NOTE Confidence: 0.88283587

 $00{:}32{:}46.270 --> 00{:}32{:}46.770 \ {\rm cancers},$

 $00:32:47.070 \longrightarrow 00:32:48.050$ treating with TDXD,

NOTE Confidence: 0.94926125

 $00:32:48.350 \longrightarrow 00:32:49.550$ and then using some of

NOTE Confidence: 0.94926125

00:32:49.550 --> 00:32:50.385 David Rymm's,

NOTE Confidence: 0.8956775

00:32:51.025 --> 00:32:52.165 you know, very sophisticated,

NOTE Confidence: 0.9753584

 $00:32:53.345 \longrightarrow 00:32:54.865$ assays for HER2 to see

NOTE Confidence: 0.9753584

 $00:32:54.865 \longrightarrow 00:32:55.985$ if you can really identify

NOTE Confidence: 0.9753584

 $00:32:55.985 \longrightarrow 00:32:57.365$ whether there really is a

NOTE Confidence: 0.9753584

 $00{:}32{:}57.425 \dashrightarrow 00{:}32{:}59.505$ threshold of HER2 expression below

NOTE Confidence: 0.9753584

 $00:32:59.505 \longrightarrow 00:33:01.205$ which you don't see activity.

NOTE Confidence: 0.9753584

 $00{:}33{:}01.425 \dashrightarrow 00{:}33{:}03.025$ So that study hopefully will

NOTE Confidence: 0.9753584

 $00:33:03.025 \longrightarrow 00:33:04.645$ open, very soon.

NOTE Confidence: 0.9525379

 $00:33:05.630 \longrightarrow 00:33:06.590$ So what have we learned

NOTE Confidence: 0.9525379

 $00{:}33{:}06.590 \to 00{:}33{:}07.809$ about HER2 ADCs?

NOTE Confidence: 0.98413444

 $00:33:08.909 \longrightarrow 00:33:09.570$ So clearly,

NOTE Confidence: 0.8544472

 $00:33:10.429 \longrightarrow 00:33:12.669$ they're superior to trastuzumab and

 $00:33:12.669 \longrightarrow 00:33:13.169$ chemotherapy,

NOTE Confidence: 0.98893124

00:33:13.630 --> 00:33:14.669 both in early stage and

NOTE Confidence: 0.98893124

00:33:14.669 --> 00:33:15.649 late stage disease.

NOTE Confidence: 0.96970177

00:33:17.149 --> 00:33:17.649 They've,

NOTE Confidence: 0.93259525

 $00:33:18.085 \longrightarrow 00:33:19.945$ TDXD is better, more efficacious

NOTE Confidence: 0.93259525

 $00:33:20.005 \longrightarrow 00:33:21.205$ at least than TDM one,

NOTE Confidence: 0.93259525

 $00:33:21.205 \longrightarrow 00:33:22.165$ but it also has more

NOTE Confidence: 0.93259525

00:33:22.165 --> 00:33:23.285 toxicity. And I think that

NOTE Confidence: 0.93259525

 $00{:}33{:}23.285 \dashrightarrow 00{:}33{:}25.205$ like likely reflects the trade

NOTE Confidence: 0.93259525

00:33:25.205 --> 00:33:27.765 off, for these cleavable linkers

NOTE Confidence: 0.93259525

 $00{:}33{:}27.765 \dashrightarrow 00{:}33{:}29.385$ versus non cleavable linkers.

NOTE Confidence: 0.993349

 $00:33:29.940 \longrightarrow 00:33:31.480$ You get the bystander effect,

NOTE Confidence: 0.993349

 $00:33:31.779 \longrightarrow 00:33:33.299$ but the bystander effect also

NOTE Confidence: 0.993349

 $00:33:33.299 \longrightarrow 00:33:33.799$ can,

NOTE Confidence: 0.94601643

00:33:35.059 --> 00:33:36.919 hit normal tissue, not just,

NOTE Confidence: 0.92860043

 $00:33:38.179 \longrightarrow 00:33:39.480$ to other tumor cells.

 $00:33:40.659 \longrightarrow 00:33:41.700$ And, you know, this very

NOTE Confidence: 0.95867056

 $00:33:41.700 \longrightarrow 00:33:43.299$ interesting finding of tDxD being

NOTE Confidence: 0.95867056

 $00:33:43.299 \longrightarrow 00:33:44.925$ affected even in minimal levels

NOTE Confidence: 0.95867056

 $00:33:44.925 \longrightarrow 00:33:46.445$ of HER2, which may be

NOTE Confidence: 0.95867056

00:33:46.445 --> 00:33:47.885 because of this bystander effect,

NOTE Confidence: 0.95867056

 $00:33:47.885 \longrightarrow 00:33:49.345$ although we haven't proven that.

NOTE Confidence: 0.9669518

00:33:50.685 --> 00:33:51.645 So I just wanna take

NOTE Confidence: 0.9669518

00:33:51.645 --> 00:33:52.225 a slight,

NOTE Confidence: 0.9452431

00:33:56.845 --> 00:33:58.890 divergence here and and

NOTE Confidence: 0.9452431

00:33:58.890 --> 00:34:00.190 bring up this question,

NOTE Confidence: 0.9544178

 $00:34:00.570 \longrightarrow 00:34:01.370$ just because I think it's

NOTE Confidence: 0.9544178

 $00:34:01.370 \longrightarrow 00:34:02.110$ really cool,

NOTE Confidence: 0.97102666

 $00{:}34{:}02.650 --> 00{:}34{:}04.250$ of the fact that given

NOTE Confidence: 0.97102666

 $00:34:04.250 \longrightarrow 00:34:05.930$ that we have these very

NOTE Confidence: 0.97102666

 $00:34:05.930 \longrightarrow 00:34:07.450$ effective HER2 therapies, you know,

 $00:34:07.450 \longrightarrow 00:34:08.969$ progression free survival of thirty

NOTE Confidence: 0.97102666

 $00:34:08.969 \longrightarrow 00:34:10.994$ months and, you know, very

NOTE Confidence: 0.97102666

 $00:34:10.994 \longrightarrow 00:34:12.275$ long durations of response. And

NOTE Confidence: 0.97102666

 $00:34:12.275 \longrightarrow 00:34:13.795$ we actually have there's actually

NOTE Confidence: 0.97102666

 $00:34:13.795 \longrightarrow 00:34:15.075$ eight drugs now approved for

NOTE Confidence: 0.97102666

 $00{:}34{:}15.075 \dashrightarrow 00{:}34{:}16.994$ HER2 positive disease, different mechanism

NOTE Confidence: 0.97102666

 $00:34:16.994 \longrightarrow 00:34:17.654$ of action.

NOTE Confidence: 0.99775773

 $00:34:18.515 \longrightarrow 00:34:19.635$ So given all of these

NOTE Confidence: 0.99775773

00:34:19.635 --> 00:34:20.934 highly effective drugs,

NOTE Confidence: 0.9886516

 $00:34:22.610 \longrightarrow 00:34:24.130$ can we really move the

NOTE Confidence: 0.9886516

 $00{:}34{:}24.130 \dashrightarrow 00{:}34{:}25.570$ needle of treating patients with

NOTE Confidence: 0.9886516

 $00{:}34{:}25.570 \dashrightarrow 00{:}34{:}27.010$ metastatic disease and go away

NOTE Confidence: 0.9886516

 $00:34:27.010 \longrightarrow 00:34:28.690$ from treating in a non

NOTE Confidence: 0.9886516

 $00:34:28.690 \longrightarrow 00:34:29.810$ curative setting, which is the

NOTE Confidence: 0.9886516

 $00:34:29.810 \longrightarrow 00:34:30.930$ way we do it now,

NOTE Confidence: 0.9886516

 $00:34:31.170 \longrightarrow 00:34:32.450$ and move it, to a

 $00:34:32.450 \longrightarrow 00:34:33.430$ curative setting?

NOTE Confidence: 0.99352586

 $00:34:33.810 \longrightarrow 00:34:35.250$ And by for those of

NOTE Confidence: 0.99352586

00:34:35.250 --> 00:34:36.610 you who don't treat patients,

NOTE Confidence: 0.99352586

 $00:34:36.850 \longrightarrow 00:34:38.150$ with metastatic disease,

NOTE Confidence: 0.98007673

 $00:34:38.765 \longrightarrow 00:34:40.125$ nowadays, we treat with one

NOTE Confidence: 0.98007673

 $00:34:40.125 \longrightarrow 00:34:41.165$ treatment. We wait for the

NOTE Confidence: 0.98007673

 $00:34:41.165 \longrightarrow 00:34:42.445$ cancer to become resistant, and

NOTE Confidence: 0.98007673

 $00:34:42.445 \longrightarrow 00:34:43.085$ then we switch to the

NOTE Confidence: 0.98007673

 $00:34:43.085 \longrightarrow 00:34:44.125$ other drug. And we're we

NOTE Confidence: 0.98007673

 $00:34:44.125 \longrightarrow 00:34:45.565$ try to string along our

NOTE Confidence: 0.98007673

 $00:34:45.565 \longrightarrow 00:34:46.065$ treatments,

NOTE Confidence: 0.9787546

 $00{:}34{:}46.844 \dashrightarrow 00{:}34{:}49.005$ to keep patients with disease

NOTE Confidence: 0.9787546

 $00{:}34{:}49.005 \dashrightarrow 00{:}34{:}50.205$ control as long as possible

NOTE Confidence: 0.9787546

 $00:34:50.205 \longrightarrow 00:34:50.925$ because we know we can't

NOTE Confidence: 0.9787546

 $00:34:50.925 \longrightarrow 00:34:52.210$ cure them. So there's no

 $00:34:52.210 \longrightarrow 00:34:53.330$ use giving a lot of,

NOTE Confidence: 0.9787546

 $00:34:53.330 \longrightarrow 00:34:54.610$ you know, kind of piling

NOTE Confidence: 0.9787546

00:34:54.610 --> 00:34:56.130 on your therapies. You wanna

NOTE Confidence: 0.9787546

 $00:34:56.130 \longrightarrow 00:34:57.010$ stretch them out so they

NOTE Confidence: 0.9787546

 $00:34:57.010 \longrightarrow 00:34:58.230$ last as long as possible.

NOTE Confidence: 0.96718675

 $00:34:59.330 \longrightarrow 00:35:01.170$ But by doing that, generally,

NOTE Confidence: 0.96718675

 $00:35:01.170 \longrightarrow 00:35:02.530$ you're you're gonna get resistance

NOTE Confidence: 0.96718675

00:35:02.530 --> 00:35:03.570 because you're only giving one

NOTE Confidence: 0.96718675

 $00{:}35{:}03.570 \dashrightarrow 00{:}35{:}04.770$ drug, and, eventually, the cancer

NOTE Confidence: 0.96718675

 $00:35:04.770 \longrightarrow 00:35:05.650$ is gonna learn to become

NOTE Confidence: 0.96718675

 $00{:}35{:}05.650 \dashrightarrow 00{:}35{:}07.335$ resistant. And that's why metastatic

NOTE Confidence: 0.96718675

 $00:35:07.395 \longrightarrow 00:35:08.835$ disease is typically felt to

NOTE Confidence: 0.96718675

 $00:35:08.835 \longrightarrow 00:35:09.735$ be not curable.

NOTE Confidence: 0.9850716

00:35:10.114 --> 00:35:11.315 So maybe that's not true,

NOTE Confidence: 0.9850716

 $00:35:11.315 \longrightarrow 00:35:12.915$ though, given the fact that

NOTE Confidence: 0.9850716

 $00:35:12.915 \longrightarrow 00:35:14.275$ we have these highly effective

00:35:14.275 --> 00:35:14.775 drugs.

NOTE Confidence: 0.9305545

 $00:35:15.395 \longrightarrow 00:35:16.135$ And so,

NOTE Confidence: 0.9925322

 $00:35:17.955 \longrightarrow 00:35:19.350$ a trial that's gonna be

NOTE Confidence: 0.9925322

00:35:19.510 --> 00:35:21.190 launched here at Yale shortly

NOTE Confidence: 0.9925322

 $00:35:21.190 \longrightarrow 00:35:22.710$ that's being run-in this consortium

NOTE Confidence: 0.9925322

 $00:35:22.710 \longrightarrow 00:35:23.530$ called the TBCRC,

NOTE Confidence: 0.96927714

 $00:35:24.870 \longrightarrow 00:35:26.150$ is trying to address, can

NOTE Confidence: 0.96927714

00:35:26.150 --> 00:35:27.850 we cure HER2 positive metastatic

NOTE Confidence: 0.96927714

 $00:35:27.989 \longrightarrow 00:35:28.489$ disease?

NOTE Confidence: 0.96606797

 $00:35:29.190 \longrightarrow 00:35:30.870$ So to do this, we're

NOTE Confidence: 0.96606797

 $00{:}35{:}30.870 \longrightarrow 00{:}35{:}32.310$ gonna deviate from the normal

NOTE Confidence: 0.96606797

 $00{:}35{:}32.310 \dashrightarrow 00{:}35{:}34.150$ practice and take newly diagnosed

NOTE Confidence: 0.96606797

 $00{:}35{:}34.150 \dashrightarrow 00{:}35{:}36.005$ patients and treat them with,

NOTE Confidence: 0.96395886

 $00:35:37.344 \longrightarrow 00:35:38.964$ twelve weeks of of ataxane

NOTE Confidence: 0.96395886

 $00:35:39.105 \longrightarrow 00:35:40.704$ and and trastuzumab, and then

 $00:35:40.704 \longrightarrow 00:35:42.625$ give them TDXD for eighteen

NOTE Confidence: 0.96395886

00:35:42.625 --> 00:35:44.244 weeks, and then give TDM

NOTE Confidence: 0.96395886

 $00:35:44.305 \longrightarrow 00:35:46.065$ one with the kinase inhibitor,

NOTE Confidence: 0.96395886

 $00:35:46.065 \longrightarrow 00:35:47.184$ and then give more kinase

NOTE Confidence: 0.96395886

 $00:35:47.184 \longrightarrow 00:35:47.684$ inhibitor,

NOTE Confidence: 0.9583566

 $00:35:48.224 \longrightarrow 00:35:49.344$ for about a year, and

NOTE Confidence: 0.9583566

 $00:35:49.344 \longrightarrow 00:35:50.730$ then just stop treatment and

NOTE Confidence: 0.9583566

 $00:35:50.730 \longrightarrow 00:35:52.730$ just follow patients with c

NOTE Confidence: 0.9583566

00:35:52.730 --> 00:35:54.010 tDNA and c and CAT

NOTE Confidence: 0.9583566

 $00:35:54.010 \longrightarrow 00:35:55.469$ scans with the idea

NOTE Confidence: 0.9751693

00:35:55.930 --> 00:35:57.610 that we're gonna try to

NOTE Confidence: 0.9751693

 $00:35:57.610 \longrightarrow 00:35:59.130$ improve the percentage of patients

NOTE Confidence: 0.9751693

 $00:35:59.130 \longrightarrow 00:36:00.650$ who don't have progression after

NOTE Confidence: 0.9751693

 $00:36:00.650 \longrightarrow 00:36:02.415$ four years essentially are cured.

NOTE Confidence: 0.9353804

 $00:36:03.055 \longrightarrow 00:36:04.355$ You know, this is way

NOTE Confidence: 0.9353804

 $00{:}36{:}04.495 \dashrightarrow 00{:}36{:}06.175$ leukemias are treated, lymphomas are

 $00:36:06.175 \longrightarrow 00:36:07.455$ treated, you pile on mass

NOTE Confidence: 0.9353804

00:36:07.614 --> 00:36:08.655 you know, lots of different

NOTE Confidence: 0.9353804

 $00:36:08.655 \longrightarrow 00:36:09.155$ drugs,

NOTE Confidence: 0.8219368

 $00:36:09.855 \longrightarrow 00:36:10.655$ you know, in a very

NOTE Confidence: 0.8219368

 $00:36:10.655 \longrightarrow 00:36:11.715$ intensive way,

NOTE Confidence: 0.96670616

00:36:12.175 --> 00:36:13.455 even though kind of leukemia

NOTE Confidence: 0.96670616

 $00:36:13.455 \longrightarrow 00:36:14.515$ is kind of metastatic,

NOTE Confidence: 0.99233776

 $00:36:15.279 \longrightarrow 00:36:16.400$ to begin with, but it

NOTE Confidence: 0.99233776

 $00:36:16.400 \longrightarrow 00:36:17.680$ it works. Can we do

NOTE Confidence: 0.99233776

 $00:36:17.680 \longrightarrow 00:36:19.059$ that for a solid cancer?

NOTE Confidence: 0.99233776

 $00:36:19.279 \longrightarrow 00:36:20.239$ In the past, we really

NOTE Confidence: 0.99233776

 $00{:}36{:}20.239 \dashrightarrow 00{:}36{:}21.519$ just didn't have the effective

NOTE Confidence: 0.99233776

 $00:36:21.519 \longrightarrow 00:36:22.960$ the rapies to do that. Now

NOTE Confidence: 0.99233776

 $00:36:22.960 \longrightarrow 00:36:23.779$ that we do,

NOTE Confidence: 0.9619982

 $00:36:24.559 \longrightarrow 00:36:26.099$ can we change the paradigm?

 $00:36:26.160 \longrightarrow 00:36:27.279$ So this is a trial

NOTE Confidence: 0.9619982

 $00:36:27.279 \longrightarrow 00:36:28.480$ that should open soon here,

NOTE Confidence: 0.9619982

 $00:36:28.480 \longrightarrow 00:36:29.359$ and and, again, I think

NOTE Confidence: 0.9619982

 $00:36:29.359 \longrightarrow 00:36:30.614$ it's really worth exploring. It

NOTE Confidence: 0.9619982

 $00:36:30.614 \longrightarrow 00:36:31.895$ may be wrong, may not

NOTE Confidence: 0.9619982

00:36:31.895 --> 00:36:33.355 work, but it's worth trying.

NOTE Confidence: 0.99870837

00:36:34.855 --> 00:36:35.355 Okay.

NOTE Confidence: 0.9254828

00:36:35.895 --> 00:36:36.875 Enough of HER2.

NOTE Confidence: 0.92049587

 $00{:}36{:}37.335 \dashrightarrow 00{:}36{:}39.755$ Other HER2 there other targets.

NOTE Confidence: 0.92049587

00:36:39.975 --> 00:36:41.495 So I guess I didn't

NOTE Confidence: 0.92049587

 $00:36:41.495 \longrightarrow 00:36:42.295$ realize I have a slide

NOTE Confidence: 0.92049587

 $00:36:42.295 \longrightarrow 00:36:44.395$ on HER2 here. So when

NOTE Confidence: 0.96578425

 $00:36:44.850 \longrightarrow 00:36:45.350$ when,

NOTE Confidence: 0.9959257

 $00:36:45.810 \longrightarrow 00:36:46.550$ you know,

NOTE Confidence: 0.95190495

 $00:36:46.850 \longrightarrow 00:36:48.310$ when we were, you know,

NOTE Confidence: 0.95190495

 $00:36:48.450 \longrightarrow 00:36:49.250$ those of us in the

 $00:36:49.250 \longrightarrow 00:36:50.930$ field were working on HER2

NOTE Confidence: 0.95190495

 $00:36:50.930 \longrightarrow 00:36:52.210$ ADCs, we said, hey. This

NOTE Confidence: 0.95190495

 $00:36:52.210 \longrightarrow 00:36:53.170$ is great. These drugs are

NOTE Confidence: 0.95190495

 $00:36:53.170 \longrightarrow 00:36:54.230$ working really well,

NOTE Confidence: 0.9779715

 $00{:}36{:}55.250 \dashrightarrow 00{:}36{:}56.690$ but it's probably just because

NOTE Confidence: 0.9779715

 $00:36:56.690 \longrightarrow 00:36:58.290$ HER2 is just this amazing

NOTE Confidence: 0.9779715

 $00:36:58.290 \longrightarrow 00:36:59.430$ target for an ADC.

NOTE Confidence: 0.985167

 $00:36:59.825 \longrightarrow 00:37:00.945$ Why is it amazing for

NOTE Confidence: 0.985167

00:37:00.945 --> 00:37:02.465 ADCs? Well, first, you have

NOTE Confidence: 0.985167

 $00:37:02.465 \longrightarrow 00:37:03.265$ tons of it on the

NOTE Confidence: 0.985167

 $00:37:03.265 \longrightarrow 00:37:04.565$ surface. And so the more

NOTE Confidence: 0.94553095

 $00:37:05.345 \longrightarrow 00:37:06.145$ protein you have on the

NOTE Confidence: 0.94553095

00:37:06.145 --> 00:37:08.065 surface, the more ADCs combined,

NOTE Confidence: 0.94553095

 $00:37:08.065 \longrightarrow 00:37:09.665$ and therefore, the more the

NOTE Confidence: 0.94553095

 $00:37:09.665 \longrightarrow 00:37:10.545$ more ADC you can get

 $00:37:10.545 \longrightarrow 00:37:11.525$ inside the cell.

NOTE Confidence: 0.98989034

00:37:12.640 --> 00:37:13.920 The normal tissue tended to

NOTE Confidence: 0.98989034

 $00:37:13.920 \longrightarrow 00:37:14.960$ have very low amounts of

NOTE Confidence: 0.98989034

 $00:37:14.960 \longrightarrow 00:37:15.460$ HER2.

NOTE Confidence: 0.9642385

 $00:37:15.840 \longrightarrow 00:37:17.760$ The internalization of HER2 is

NOTE Confidence: 0.9642385

 $00:37:17.760 \longrightarrow 00:37:18.960$ very fast, and it doesn't

NOTE Confidence: 0.9642385

 $00{:}37{:}18.960 \dashrightarrow 00{:}37{:}20.080$ down regulate. And you can

NOTE Confidence: 0.9642385

 $00:37:20.080 \longrightarrow 00:37:21.380$ see in this photomicrograph,

NOTE Confidence: 0.95184755

 $00:37:21.840 \longrightarrow 00:37:23.119$ if you coat the cell

NOTE Confidence: 0.95184755

 $00:37:23.119 \longrightarrow 00:37:24.994$ with a fluorescent HER, trastuzumab

NOTE Confidence: 0.9644577

 $00:37:25.454 \longrightarrow 00:37:26.414$ and then wait a few

NOTE Confidence: 0.9644577

 $00:37:26.414 \longrightarrow 00:37:27.775$ hours, all of it gets

NOTE Confidence: 0.9644577

 $00:37:27.775 \longrightarrow 00:37:28.974$ inside the cell. So all

NOTE Confidence: 0.9644577

00:37:28.974 --> 00:37:30.994 those HER2s are getting internalized,

NOTE Confidence: 0.9644577

 $00:37:31.055 \longrightarrow 00:37:32.255$ which if there's a ADC

NOTE Confidence: 0.9644577

 $00:37:32.255 \longrightarrow 00:37:33.535$ attached, it'll bring it with

 $00:37:33.535 \longrightarrow 00:37:35.295$ it. So internalization is important

NOTE Confidence: 0.9644577

 $00:37:35.295 \longrightarrow 00:37:37.350$ for ADCs, and the tumors

NOTE Confidence: 0.9644577

 $00:37:37.350 \longrightarrow 00:37:38.650$ are addicted to their HER2.

NOTE Confidence: 0.9644577

 $00:37:38.710 \longrightarrow 00:37:39.910$ As I said, it's the

NOTE Confidence: 0.9644577

 $00:37:39.910 \longrightarrow 00:37:41.430$ HER2 that's driving these cells,

NOTE Confidence: 0.9644577

 $00:37:41.430 \longrightarrow 00:37:42.550$ so they really need the

NOTE Confidence: 0.9644577

 $00:37:42.550 \longrightarrow 00:37:43.830$ signaling. So it's really hard

NOTE Confidence: 0.9644577

 $00:37:43.830 \longrightarrow 00:37:44.870$ for them to down regulate

NOTE Confidence: 0.9644577

 $00:37:44.870 \longrightarrow 00:37:45.930$ as a way to escape

NOTE Confidence: 0.9644577

 $00:37:46.070 \longrightarrow 00:37:47.030$ the effects of a d

NOTE Confidence: 0.9644577

 $00:37:47.110 \longrightarrow 00:37:47.850$ of the ADC.

NOTE Confidence: 0.9780906

 $00:37:48.150 \longrightarrow 00:37:49.430$ So we thought, hey. It

NOTE Confidence: 0.9780906

 $00{:}37{:}49.430 \dashrightarrow 00{:}37{:}50.390$ all makes sense that these

NOTE Confidence: 0.9780906

 $00:37:50.390 \longrightarrow 00:37:51.350$ drugs are gonna work in

NOTE Confidence: 0.9780906

 $00:37:51.350 \longrightarrow 00:37:51.850 \text{ HER2},$

 $00:37:52.385 \longrightarrow 00:37:53.265$ but they're probably not gonna

NOTE Confidence: 0.98338526

 $00:37:53.265 \longrightarrow 00:37:54.545$ work other with other targets

NOTE Confidence: 0.98338526

 $00{:}37{:}54.545 \dashrightarrow 00{:}37{:}55.585$ because the other targets don't

NOTE Confidence: 0.98338526

 $00:37:55.585 \longrightarrow 00:37:56.805$ have all these great characteristics.

NOTE Confidence: 0.9374312

00:37:57.984 --> 00:37:59.585 Fortunately, I was wrong, as,

NOTE Confidence: 0.9374312

 $00:37:59.905 \longrightarrow 00:38:01.204$ as often is the case.

NOTE Confidence: 0.90342885

00:38:01.505 --> 00:38:03.285 We now have the twelve,

NOTE Confidence: 0.90342885

00:38:03.344 --> 00:38:05.285 I think, roughly twelve ADCs,

NOTE Confidence: 0.95638806

 $00{:}38{:}09.340 \dashrightarrow 00{:}38{:}10.460$ that are FDA approved, and

NOTE Confidence: 0.95638806

 $00:38:10.460 \longrightarrow 00:38:11.340$ you can see across a

NOTE Confidence: 0.95638806

 $00:38:11.340 \longrightarrow 00:38:12.800$ wide range of targets.

NOTE Confidence: 0.99222106

00:38:13.580 --> 00:38:14.800 And I forgot to mention,

NOTE Confidence: 0.87189436

00:38:15.820 --> 00:38:16.320 TDXD,

NOTE Confidence: 0.99922085

00:38:17.340 --> 00:38:18.560 just got approved yesterday

NOTE Confidence: 0.9681767

 $00:38:18.940 \longrightarrow 00:38:20.460$ for treating those ultra low

NOTE Confidence: 0.9681767

 $00:38:20.460 \longrightarrow 00:38:21.844$ patients, so that's kind of

00:38:21.844 --> 00:38:23.444 exciting. Another group of cancers

NOTE Confidence: 0.9681767

 $00:38:23.444 \longrightarrow 00:38:24.265$ to be treated.

NOTE Confidence: 0.9661305

 $00:38:24.565 \longrightarrow 00:38:25.364$ But you can see we

NOTE Confidence: 0.9661305

00:38:25.364 --> 00:38:27.785 have, activity of ADCs across

NOTE Confidence: 0.9661305

00:38:27.844 --> 00:38:29.704 liquid tumors and solid tumors,

NOTE Confidence: 0.99941766

 $00:38:30.885 \longrightarrow 00:38:32.344$ with a broad range of

NOTE Confidence: 0.98090345

 $00:38:32.724 \longrightarrow 00:38:34.025$ of of, targets.

NOTE Confidence: 0.9648482

 $00:38:34.400 \longrightarrow 00:38:35.520$ So I'll talk of just

NOTE Confidence: 0.9648482

 $00:38:35.520 \longrightarrow 00:38:36.800$ a brief, in the last

NOTE Confidence: 0.9648482

 $00:38:36.800 \longrightarrow 00:38:37.920$ few minutes, some of the

NOTE Confidence: 0.9648482

 $00:38:37.920 \longrightarrow 00:38:38.820$ other targets.

NOTE Confidence: 0.86761296

00:38:40.080 --> 00:38:41.840 Trope two is being tested

NOTE Confidence: 0.86761296

 $00{:}38{:}41.840 \dashrightarrow 00{:}38{:}43.040$ and is is is been

NOTE Confidence: 0.86761296

00:38:43.040 --> 00:38:44.320 validated in breast cancer. It's

NOTE Confidence: 0.86761296

 $00:38:44.320 \longrightarrow 00:38:45.780$ being tested in other cancers.

 $00:38:47.585 \longrightarrow 00:38:48.944$ So COP two is a,

NOTE Confidence: 0.95383483

 $00{:}38{:}49.344 \dashrightarrow 00{:}38{:}50.944$ cell surface protein that's pretty

NOTE Confidence: 0.95383483

 $00:38:50.944 \longrightarrow 00:38:52.305$ widely expressed in breast cancer

NOTE Confidence: 0.95383483

 $00:38:52.305 \longrightarrow 00:38:53.684$ associated with the worst prognosis.

NOTE Confidence: 0.99174

 $00:38:54.625 \longrightarrow 00:38:55.984$ And there's a drug called

NOTE Confidence: 0.99174

 $00:38:55.984 \longrightarrow 00:38:56.484$ sacituzumab

NOTE Confidence: 0.9054693

 $00:38:56.785 \longrightarrow 00:38:58.244$ gobletikin, which is an ADC,

NOTE Confidence: 0.868559

 $00:38:59.184 \longrightarrow 00:39:00.325$ also with the topoisomerase

NOTE Confidence: 0.96589595

00:39:00.625 --> 00:39:02.305 pay payload, and it it's

NOTE Confidence: 0.96589595

 $00:39:02.305 \longrightarrow 00:39:03.739$ set up its linker a

NOTE Confidence: 0.96589595

 $00:39:03.739 \longrightarrow 00:39:05.020$ little differently. So in addition

NOTE Confidence: 0.96589595

 $00:39:05.020 \longrightarrow 00:39:06.700$ to being cleavable inside the

NOTE Confidence: 0.96589595

 $00:39:06.700 \longrightarrow 00:39:08.319$ cell, it's also cleavable

NOTE Confidence: 0.9897049

 $00{:}39{:}08.700 \dashrightarrow 00{:}39{:}09.200$ by,

NOTE Confidence: 0.9527003

 $00:39:09.660 \longrightarrow 00:39:11.500$ low pH environments outside the

NOTE Confidence: 0.9527003

 $00:39:11.500 \longrightarrow 00:39:13.020$ cell, so it can it

 $00:39:13.020 \longrightarrow 00:39:14.460$ can release the payload both

NOTE Confidence: 0.9527003

 $00:39:14.460 \longrightarrow 00:39:14.960$ extracellularly

NOTE Confidence: 0.98157

 $00:39:15.260 \longrightarrow 00:39:15.920$ and intracellularly.

NOTE Confidence: 0.97482675

00:39:18.055 --> 00:39:19.495 And it's been tested in

NOTE Confidence: 0.97482675

 $00{:}39{:}19.495 \dashrightarrow 00{:}39{:}21.094$ triple negative breast cancer compared

NOTE Confidence: 0.97482675

 $00:39:21.094 \longrightarrow 00:39:22.695$ to chemo where it's much

NOTE Confidence: 0.97482675

 $00:39:22.695 \longrightarrow 00:39:24.215$ better, and it's approved in

NOTE Confidence: 0.97482675

 $00:39:24.215 \longrightarrow 00:39:24.955$ that setting.

NOTE Confidence: 0.9482628

 $00:39:25.975 \longrightarrow 00:39:27.735$ And its toxicity profile is

NOTE Confidence: 0.9482628

 $00:39:27.735 \longrightarrow 00:39:28.775$ quite is different,

NOTE Confidence: 0.8906864

 $00:39:29.175 \longrightarrow 00:39:30.075$ than PDXDs.

NOTE Confidence: 0.95381755

00:39:30.880 --> 00:39:32.020 It's all myelosuppression

NOTE Confidence: 0.93535376

 $00{:}39{:}32.640 \dashrightarrow 00{:}39{:}34.099$ and a little GI toxicity.

NOTE Confidence: 0.9446417

 $00:39:35.280 \longrightarrow 00:39:36.020$ And interestingly,

NOTE Confidence: 0.75959957

 $00:39:36.880 \longrightarrow 00:39:37.380$ datapodimab

 $00:39:37.920 \longrightarrow 00:39:39.840$ daroxetine, which is another trope

NOTE Confidence: 0.83972394

00:39:39.840 --> 00:39:40.580 two ADC,

NOTE Confidence: 0.90869004

00:39:41.280 --> 00:39:42.739 same antibody as sacituzumab,

NOTE Confidence: 0.9654208

 $00:39:43.415 \longrightarrow 00:39:44.695$ same class of payload as

NOTE Confidence: 0.9654208

 $00:39:44.695 \longrightarrow 00:39:45.195$ sacituzumab,

NOTE Confidence: 0.8563711

 $00:39:45.974 \longrightarrow 00:39:47.035$ but with a daroxican

NOTE Confidence: 0.99240255

 $00:39:47.655 \longrightarrow 00:39:48.775$ linker, which is a little

NOTE Confidence: 0.99240255

 $00:39:48.775 \longrightarrow 00:39:49.275$ different.

NOTE Confidence: 0.91022027

 $00:39:49.655 \longrightarrow 00:39:50.635$ It's it's

NOTE Confidence: 0.9764343

 $00:39:50.935 \longrightarrow 00:39:53.355$ purely protease cleavable. It's not

NOTE Confidence: 0.9764343

 $00{:}39{:}53.494 \dashrightarrow 00{:}39{:}54.474$ pH cleavable.

NOTE Confidence: 0.96176136

 $00:39:55.494 \longrightarrow 00:39:56.535$ And this is an active

NOTE Confidence: 0.96176136

 $00:39:56.535 \longrightarrow 00:39:58.020$ drug. In our in the

NOTE Confidence: 0.96176136

 $00:39:58.020 \longrightarrow 00:39:59.300$ phase one trial, we showed

NOTE Confidence: 0.96176136

 $00:39:59.300 \longrightarrow 00:40:00.760$ that it was active and,

NOTE Confidence: 0.9633948

 $00:40:01.140 \longrightarrow 00:40:02.020$ even in patients who had

 $00:40:02.020 \longrightarrow 00:40:03.540$ already progressed on sacituzumab, there

NOTE Confidence: 0.9633948

 $00:40:03.540 \longrightarrow 00:40:04.440$ was some activity.

NOTE Confidence: 0.9558705

00:40:05.540 --> 00:40:07.880 But interestingly, again, same payload

NOTE Confidence: 0.9558705

00:40:08.100 --> 00:40:10.280 essentially, same antibody. The toxicity

NOTE Confidence: 0.9558705

 $00:40:10.420 \longrightarrow 00:40:12.040$ is completely different. So there's

NOTE Confidence: 0.9558705

00:40:12.204 --> 00:40:13.344 virtually no myelosuppression

NOTE Confidence: 0.83535784

 $00:40:13.964 \longrightarrow 00:40:14.785$ with dapotumab,

NOTE Confidence: 0.9455327

00:40:15.645 --> 00:40:17.805 stomatitis is the toxicity showing

NOTE Confidence: 0.9455327

 $00{:}40{:}17.805 \dashrightarrow 00{:}40{:}19.565$ how important those linkers are

NOTE Confidence: 0.9455327

 $00{:}40{:}19.565 \dashrightarrow 00{:}40{:}21.184$ in driving the the characteristics

NOTE Confidence: 0.9455327

 $00:40:21.244 \longrightarrow 00:40:22.145$ of these ADCs.

NOTE Confidence: 0.9617801

00:40:23.085 --> 00:40:23.585 Dapotumab

NOTE Confidence: 0.9830792

 $00:40:23.885 \longrightarrow 00:40:25.085$ actually just got approved last

NOTE Confidence: 0.9830792

 $00:40:25.085 \longrightarrow 00:40:25.585$ week,

NOTE Confidence: 0.9659461

 $00:40:25.910 \longrightarrow 00:40:27.910$ for hormone receptor positive breast

 $00:40:27.910 \longrightarrow 00:40:29.370$ cancer based on another study.

NOTE Confidence: 0.97830504

 $00:40:29.910 \longrightarrow 00:40:30.810$ And then lastly,

NOTE Confidence: 0.8225224

00:40:31.430 --> 00:40:31.930 HER3,

NOTE Confidence: 0.99541783

 $00:40:32.310 \longrightarrow 00:40:33.290$ which is another,

NOTE Confidence: 0.9650287

00:40:34.150 --> 00:40:35.989 tyrosine kinase. Actually, it's not

NOTE Confidence: 0.9650287

 $00:40:35.989 \longrightarrow 00:40:37.190$ a tyrosine kinase. It's it's

NOTE Confidence: 0.9650287

 $00:40:37.190 \longrightarrow 00:40:38.390$ related to the other tyrosine

NOTE Confidence: 0.9650287

 $00:40:38.390 \longrightarrow 00:40:40.695$ kinase, the HER2 tyros HER

NOTE Confidence: 0.9650287

 $00{:}40{:}40.695 \dashrightarrow 00{:}40{:}42.695$ family tyrosine kinases. It itself

NOTE Confidence: 0.9650287

 $00:40:42.695 \longrightarrow 00:40:44.075$ doesn't have an active kinase,

NOTE Confidence: 0.9927115

 $00{:}40{:}44.855 \to 00{:}40{:}46.215$ but it's important in in

NOTE Confidence: 0.9927115

 $00:40:46.215 \longrightarrow 00:40:46.715$ signaling,

NOTE Confidence: 0.95258415

 $00{:}40{:}47.175 \dashrightarrow 00{:}40{:}48.535$ and is overexpressed in a

NOTE Confidence: 0.95258415

 $00:40:48.535 \longrightarrow 00:40:49.675$ number of breast cancers.

NOTE Confidence: 0.89115834

 $00:40:50.295 \longrightarrow 00:40:52.295$ And there's a a conjugate

NOTE Confidence: 0.89115834

 $00{:}40{:}52.295 \rightarrow 00{:}40{:}53.835$ called HER3 DXD or pertitumab

 $00:40:53.975 \longrightarrow 00:40:54.475$ daroxetin,

NOTE Confidence: 0.97561055

 $00:40:55.030 \longrightarrow 00:40:56.230$ which we showed also has

NOTE Confidence: 0.97561055

 $00:40:56.230 \longrightarrow 00:40:58.090$ activity across breast cancers. But

NOTE Confidence: 0.97561055

 $00:40:58.230 \longrightarrow 00:40:59.110$ not really sure how this

NOTE Confidence: 0.97561055

 $00{:}40{:}59.110 \dashrightarrow 00{:}41{:}00.730$ one's gonna develop get developed

NOTE Confidence: 0.97561055

00:41:00.790 --> 00:41:01.290 because,

NOTE Confidence: 0.9610411

 $00:41:02.230 \longrightarrow 00:41:03.610$ the field is getting crowded,

NOTE Confidence: 0.8960732

 $00:41:03.990 \longrightarrow 00:41:04.710$ lots of,

NOTE Confidence: 0.97814286

 $00:41:05.270 \longrightarrow 00:41:06.710$ antibodies with the same payload.

NOTE Confidence: 0.97814286

 $00:41:06.710 \longrightarrow 00:41:07.990$ So where this one's gonna

NOTE Confidence: 0.97814286

 $00:41:07.990 \longrightarrow 00:41:09.050$ fit in is unclear.

NOTE Confidence: 0.99199337

 $00:41:11.744 \longrightarrow 00:41:13.765$ So there are other conjugates

NOTE Confidence: 0.99199337

00:41:13.825 --> 00:41:14.724 being developed.

NOTE Confidence: 0.9347702

 $00:41:15.665 \longrightarrow 00:41:17.605$ There are ones with fancy

NOTE Confidence: 0.9347702

 $00{:}41{:}17.665 {\:{\mbox{--}}\!\!>}\ 00{:}41{:}19.665$ new protein structures. So there's

 $00:41:19.665 \longrightarrow 00:41:20.165$ biparotropic

NOTE Confidence: 0.9680039

00:41:20.704 --> 00:41:22.145 ADCs that bind two different

NOTE Confidence: 0.9680039

 $00:41:22.145 \longrightarrow 00:41:23.445$ epitopes of the same,

NOTE Confidence: 0.97424066

00:41:23.825 --> 00:41:26.040 molecule. There's bispecific ADCs binding

NOTE Confidence: 0.97424066

 $00:41:26.040 \longrightarrow 00:41:27.100$ two different molecules.

NOTE Confidence: 0.98375326

00:41:27.400 --> 00:41:29.400 There's probody conjugates that get

NOTE Confidence: 0.98375326

00:41:29.400 --> 00:41:29.900 activated,

NOTE Confidence: 0.9934192

 $00:41:30.600 \longrightarrow 00:41:31.420$ in the microenvironment.

NOTE Confidence: 0.9974802

 $00:41:32.280 \longrightarrow 00:41:33.420$ There's new payloads

NOTE Confidence: 0.9665608

00:41:33.800 --> 00:41:36.200 beyond very potent cytotoxic drugs.

NOTE Confidence: 0.9665608

 $00:41:36.200 \longrightarrow 00:41:37.420$ There are targeted,

NOTE Confidence: 0.9592705

00:41:38.775 --> 00:41:40.214 therapy kinds of payloads like

NOTE Confidence: 0.9592705

 $00:41:40.214 \longrightarrow 00:41:42.714$ kinase inhibitors and apoptosis promoting

NOTE Confidence: 0.9592705

00:41:42.775 --> 00:41:44.315 drugs. There's immunomodulatory

NOTE Confidence: 0.9953583

00:41:45.174 --> 00:41:45.674 payloads,

NOTE Confidence: 0.9107342

 $00:41:46.295 \longrightarrow 00:41:46.795$ radionuclides,

 $00:41:47.255 \longrightarrow 00:41:47.755$ and,

NOTE Confidence: 0.9613646

00:41:48.535 --> 00:41:50.214 there are new antigens not

NOTE Confidence: 0.9613646

00:41:50.214 --> 00:41:51.414 targeting the tumor anymore, but

NOTE Confidence: 0.9613646

 $00:41:51.414 \longrightarrow 00:41:53.114$ actually targeting the microenvironment.

NOTE Confidence: 0.9613646

 $00:41:53.414 \longrightarrow 00:41:54.510$ All of these things are,

NOTE Confidence: 0.9613646

 $00:41:54.750 \longrightarrow 00:41:55.150$ currently,

NOTE Confidence: 0.99401164

 $00:41:55.550 \longrightarrow 00:41:56.850$ in development. So

NOTE Confidence: 0.9545464

 $00:41:57.230 \longrightarrow 00:41:58.510$ lots to more to come.

NOTE Confidence: 0.9545464

 $00:41:58.510 \longrightarrow 00:41:59.710$ I just wanted to close

NOTE Confidence: 0.9545464

 $00:41:59.710 \longrightarrow 00:42:01.150$ by bringing up a few

NOTE Confidence: 0.9545464

 $00{:}42{:}01.150 \dashrightarrow 00{:}42{:}02.270$ what I think are important

NOTE Confidence: 0.9545464

 $00:42:02.270 \longrightarrow 00:42:03.250$ unanswered questions.

NOTE Confidence: 0.9988214

 $00{:}42{:}03.790 \dashrightarrow 00{:}42{:}04.989$ One is and this is

NOTE Confidence: 0.9988214

 $00:42:04.989 \longrightarrow 00:42:05.570$ a little

NOTE Confidence: 0.9322093

 $00:42:05.950 \longrightarrow 00:42:06.930$ wonky, I appreciate.

 $00:42:08.285 \longrightarrow 00:42:09.565$ Should we be making more

NOTE Confidence: 0.96941894

 $00:42:09.565 \longrightarrow 00:42:11.985$ ADCs with non cleavable linkers?

NOTE Confidence: 0.96941894

 $00:42:12.045 \longrightarrow 00:42:13.085$ Right now, TDM one is

NOTE Confidence: 0.96941894

 $00:42:13.085 \longrightarrow 00:42:14.765$ the only approved ADC with

NOTE Confidence: 0.96941894

 $00:42:14.765 \longrightarrow 00:42:15.965$ a non cleavable linker. All

NOTE Confidence: 0.96941894

 $00:42:15.965 \longrightarrow 00:42:17.245$ the other ones have different

NOTE Confidence: 0.96941894

00:42:17.245 --> 00:42:18.705 types of cleavable linkers.

NOTE Confidence: 0.984359

 $00:42:20.855 \longrightarrow 00:42:21.355$ And,

NOTE Confidence: 0.96449053

 $00:42:23.049 \longrightarrow 00:42:24.410$ you know, there's reasons for

NOTE Confidence: 0.96449053

 $00:42:24.410 \longrightarrow 00:42:25.529$ the cleavable linkers. You get

NOTE Confidence: 0.96449053

 $00:42:25.529 \longrightarrow 00:42:26.670$ the bystander effect,

NOTE Confidence: 0.96950984

 $00:42:27.289 \longrightarrow 00:42:28.250$ but you also get more

NOTE Confidence: 0.96950984

 $00{:}42{:}28.250 \dashrightarrow 00{:}42{:}29.930$ toxicity. And I always wondered

NOTE Confidence: 0.96950984

 $00:42:29.930 \longrightarrow 00:42:30.809$ whether if you took a

NOTE Confidence: 0.96950984

00:42:30.809 --> 00:42:32.730 really potent cytotoxic drug and

NOTE Confidence: 0.96950984

 $00:42:32.730 \longrightarrow 00:42:33.710$ made it with a noncleavable

00:42:33.849 --> 00:42:34.809 linker, whether you could get

NOTE Confidence: 0.96950984

 $00:42:34.809 \longrightarrow 00:42:35.930$ efficacy and still keep the

NOTE Confidence: 0.96950984

 $00:42:35.930 \longrightarrow 00:42:37.230$ toxicity down. Because

NOTE Confidence: 0.96498936

00:42:37.545 --> 00:42:38.825 TDM one is still really

NOTE Confidence: 0.96498936

 $00:42:38.825 \longrightarrow 00:42:39.864$ the only drug with that

NOTE Confidence: 0.96498936

 $00:42:39.864 \longrightarrow 00:42:40.684$ really favorable,

NOTE Confidence: 0.97796094

00:42:41.625 --> 00:42:43.224 toxicity profile, which, again, was

NOTE Confidence: 0.97796094

 $00:42:43.224 \longrightarrow 00:42:44.344$ one of the original visions

NOTE Confidence: 0.97796094

 $00:42:44.344 \longrightarrow 00:42:45.165$ of an ADC.

NOTE Confidence: 0.98983675

00:42:47.145 --> 00:42:48.665 How should we sequence ADCs

NOTE Confidence: 0.98983675

 $00:42:48.665 \longrightarrow 00:42:49.944$ with different targets? So I

NOTE Confidence: 0.98983675

 $00:42:49.944 \longrightarrow 00:42:50.525$ I mentioned,

NOTE Confidence: 0.9708529

 $00:42:51.130 \longrightarrow 00:42:52.010$ we had a trial where

NOTE Confidence: 0.9708529

00:42:52.010 --> 00:42:53.609 we use the same target,

NOTE Confidence: 0.9708529

00:42:53.609 --> 00:42:55.290 but two different payloads, one

 $00:42:55.290 \longrightarrow 00:42:56.810$ ADC after another. What about

NOTE Confidence: 0.9708529

 $00:42:56.810 \longrightarrow 00:42:57.950$ the kind of the opposite?

NOTE Confidence: 0.9708529

 $00:42:58.170 \longrightarrow 00:42:58.969$ And now we have the

NOTE Confidence: 0.9708529

 $00:42:58.969 \longrightarrow 00:43:00.090$ tools to do that. So

NOTE Confidence: 0.9708529

 $00:43:00.090 \longrightarrow 00:43:01.770$ in the trade trial, which

NOTE Confidence: 0.9708529

 $00:43:01.770 \longrightarrow 00:43:03.450$ is gonna open here, hopefully

NOTE Confidence: 0.9708529

 $00:43:03.450 \longrightarrow 00:43:03.950$ soon,

NOTE Confidence: 0.94895935

00:43:04.955 --> 00:43:06.335 Patients are gonna be randomized

NOTE Confidence: 0.94895935

 $00{:}43{:}06.475 --> 00{:}43{:}08.495$ to either tDxD or dapodimab,

NOTE Confidence: 0.7622658

 $00:43:08.875 \longrightarrow 00:43:09.935$ the trop two ADC,

NOTE Confidence: 0.9550717

 $00{:}43{:}10.235 \dashrightarrow 00{:}43{:}11.435$ and then when they progress,

NOTE Confidence: 0.9550717

 $00:43:11.435 \longrightarrow 00:43:12.395$ they'll switch to the other

NOTE Confidence: 0.9550717

 $00:43:12.395 \longrightarrow 00:43:13.675$ one to see and then

NOTE Confidence: 0.9550717

 $00:43:13.675 \longrightarrow 00:43:14.635$ we'll try to figure out

NOTE Confidence: 0.9550717

 $00:43:14.635 \longrightarrow 00:43:16.315$ using biomarkers which is the

NOTE Confidence: 0.9550717

 $00:43:16.315 \longrightarrow 00:43:18.175$ best sequence for each individual

00:43:18.555 --> 00:43:19.675 answer. We don't know how

NOTE Confidence: 0.9914943

 $00:43:19.675 \longrightarrow 00:43:20.655$ to do that yet.

NOTE Confidence: 0.88484657

 $00:43:22.050 \longrightarrow 00:43:22.770$ And then,

NOTE Confidence: 0.97525245

 $00:43:23.489 \longrightarrow 00:43:23.989$ lastly,

NOTE Confidence: 0.9719373

 $00:43:24.610 \longrightarrow 00:43:25.570$ and this kinda gets back

NOTE Confidence: 0.9719373

 $00:43:25.570 \longrightarrow 00:43:26.450$ to the point I made

NOTE Confidence: 0.9719373

 $00:43:26.450 \longrightarrow 00:43:27.190$ at the beginning,

NOTE Confidence: 0.99730617

 $00:43:28.370 \longrightarrow 00:43:30.050$ can we get rid of

NOTE Confidence: 0.99730617

 $00:43:30.050 \longrightarrow 00:43:31.750$ conventional chemotherapy altogether?

NOTE Confidence: 0.98820865

 $00:43:32.770 \longrightarrow 00:43:34.105$ Ideally, why would you use

NOTE Confidence: 0.98820865

00:43:34.105 --> 00:43:36.265 conventional chemotherapy, which goes every-

where

NOTE Confidence: 0.98820865

 $00:43:36.265 \longrightarrow 00:43:37.225$ in the body and causes

NOTE Confidence: 0.98820865

00:43:37.225 --> 00:43:39.065 nonspecific toxicity? Why would you

NOTE Confidence: 0.98820865

 $00:43:39.065 \longrightarrow 00:43:39.945$ use that when you can

NOTE Confidence: 0.98820865

00:43:39.945 --> 00:43:40.985 link it to an antibody

 $00:43:40.985 \longrightarrow 00:43:42.025$ and deliver it to the

NOTE Confidence: 0.98820865

 $00:43:42.025 \longrightarrow 00:43:42.844$ cancer cell?

NOTE Confidence: 0.9042837

 $00:43:43.945 \longrightarrow 00:43:44.985$ To do that, you're gonna

NOTE Confidence: 0.9042837

00:43:44.985 --> 00:43:46.905 need anti ADCs with different

NOTE Confidence: 0.9042837

 $00:43:46.905 \longrightarrow 00:43:47.405$ payloads.

NOTE Confidence: 0.9645954

00:43:48.185 --> 00:43:49.405 Just like, you know, in

NOTE Confidence: 0.9645954

 $00:43:49.650 \longrightarrow 00:43:51.329$ practice with metastatic disease, we

NOTE Confidence: 0.9645954

 $00:43:51.329 \longrightarrow 00:43:53.650$ use chemotherapy a. Patients progress,

NOTE Confidence: 0.9645954

 $00:43:53.650 \longrightarrow 00:43:55.329$ we use chemotherapy b, and

NOTE Confidence: 0.9645954

 $00:43:55.329 \longrightarrow 00:43:56.069$ so on.

NOTE Confidence: 0.9500363

00:43:56.450 --> 00:43:57.890 You could do ADC a,

NOTE Confidence: 0.9500363

00:43:57.890 --> 00:44:00.210 ADC b, each just switching

NOTE Confidence: 0.9500363

 $00{:}44{:}00.210 --> 00{:}44{:}00.710 \ \mathrm{payloads}.$

NOTE Confidence: 0.97515976

00:44:01.329 --> 00:44:02.694 The problem is we don't

NOTE Confidence: 0.97515976

 $00:44:02.694 \longrightarrow 00:44:04.375$ have those drugs other than

00:44:04.375 --> 00:44:05.655 TDM one and TDXD I

NOTE Confidence: 0.97515976

 $00:44:05.655 \longrightarrow 00:44:06.535$ showed you. We don't have

NOTE Confidence: 0.97515976

 $00:44:06.535 \longrightarrow 00:44:07.755$ a lot of different payloads,

NOTE Confidence: 0.96706986

 $00:44:08.055 \longrightarrow 00:44:09.815$ and that's partly because the

NOTE Confidence: 0.96706986

 $00:44:09.815 \longrightarrow 00:44:11.594$ success of trastuzumab daroxetine

NOTE Confidence: 0.99709064

 $00:44:11.974 \longrightarrow 00:44:13.035$ was so high

NOTE Confidence: 0.9817437

 $00:44:13.335 \longrightarrow 00:44:14.694$ that everybody's jumping on the

NOTE Confidence: 0.9817437

00:44:14.694 --> 00:44:16.075 bandwagon of these topoisomerase

NOTE Confidence: 0.97079635

00:44:16.375 --> 00:44:17.275 inhibitor payloads.

NOTE Confidence: 0.98441076

 $00:44:17.840 \longrightarrow 00:44:18.640$ And you can see this

NOTE Confidence: 0.98441076 00:44:18.640 --> 00:44:19.120 is, NOTE Confidence: 0.9946509

 $00:44:19.600 \longrightarrow 00:44:20.640$ from a review that just

NOTE Confidence: 0.9946509

 $00:44:20.640 \longrightarrow 00:44:21.300$ came out,

NOTE Confidence: 0.9955303

00:44:22.800 --> 00:44:24.719 showing, the different payloads that

NOTE Confidence: 0.9955303

 $00:44:24.719 \longrightarrow 00:44:25.540$ are being used.

NOTE Confidence: 0.982975

 $00:44:26.080 \longrightarrow 00:44:27.460$ There's a hundred and seven

00:44:27.520 --> 00:44:29.219 in clinical development using,

NOTE Confidence: 0.89778095

 $00:44:29.775 \longrightarrow 00:44:31.635$ camptothecans or or basically topoisomerase

NOTE Confidence: 0.89778095

 $00:44:31.855 \longrightarrow 00:44:32.755$ inhibitor payloads.

NOTE Confidence: 0.94809055

 $00:44:33.295 \longrightarrow 00:44:34.335$ Almost all of them as

NOTE Confidence: 0.94809055

 $00:44:34.335 \longrightarrow 00:44:35.535$ shown in this graph are

NOTE Confidence: 0.94809055

 $00:44:35.535 \longrightarrow 00:44:36.755$ topoisomerase inhibitors.

NOTE Confidence: 0.9843567

 $00:44:37.214 \longrightarrow 00:44:38.114$ So they work,

NOTE Confidence: 0.93871367

 $00{:}44{:}39.055 \dashrightarrow 00{:}44{:}40.575$ but we're getting very crowded,

NOTE Confidence: 0.93871367

 $00:44:40.575 \longrightarrow 00:44:41.934$ and you can imagine, and

NOTE Confidence: 0.93871367

00:44:41.934 --> 00:44:43.395 we have data now developing,

NOTE Confidence: 0.98775154

 $00:44:43.820 \longrightarrow 00:44:45.340$ that cancers can become resistant

NOTE Confidence: 0.98775154

 $00:44:45.340 \longrightarrow 00:44:46.640$ to the payload by,

NOTE Confidence: 0.9812666

 $00{:}44{:}47.180 \dashrightarrow 00{:}44{:}48.160$ mutating topoisomerase.

NOTE Confidence: 0.9317063

 $00:44:50.540 \longrightarrow 00:44:52.320$ And then once you've got

NOTE Confidence: 0.9317063

 $00:44:52.540 \longrightarrow 00:44:53.739$ resistance to the payload, it

 $00:44:53.739 \longrightarrow 00:44:55.340$ doesn't matter which antibodies you

NOTE Confidence: 0.9317063

 $00{:}44{:}55.340 \to 00{:}44{:}56.145$ hook up to it. It's

NOTE Confidence: 0.9317063

 $00:44:56.145 \longrightarrow 00:44:57.505$ it's not gonna work. So

NOTE Confidence: 0.9317063

 $00:44:57.505 \longrightarrow 00:44:58.705$ we need to diversify our

NOTE Confidence: 0.9317063

 $00:44:58.705 \longrightarrow 00:44:59.205$ payloads.

NOTE Confidence: 0.9929877

 $00:44:59.585 \longrightarrow 00:45:00.945$ So with that, I will

NOTE Confidence: 0.9929877

 $00:45:00.945 \longrightarrow 00:45:02.545$ stop. I'm happy to take

NOTE Confidence: 0.9929877

 $00:45:02.545 \longrightarrow 00:45:03.045$ questions.

NOTE Confidence: 0.6822139

00:45:09.660 --> 00:45:10.160 Oh,

NOTE Confidence: 0.7503681

 $00:45:11.180 \longrightarrow 00:45:12.400$ yep. Dan.

NOTE Confidence: 0.8804015

00:45:17.260 --> 00:45:18.619 Excellent talk, and I have

NOTE Confidence: 0.8804015

 $00:45:18.619 \longrightarrow 00:45:19.280$ two questions.

NOTE Confidence: 0.9703931

 $00:45:19.660 \longrightarrow 00:45:20.480$ Number one,

NOTE Confidence: 0.9593014

 $00:45:20.780 \longrightarrow 00:45:22.400$ I'm fascinated by this,

NOTE Confidence: 0.9363801

 $00:45:23.175 \longrightarrow 00:45:25.495$ observation about responses in brain

NOTE Confidence: 0.9363801

 $00:45:25.495 \longrightarrow 00:45:25.995$ metastases.

00:45:27.015 --> 00:45:28.475 It's known that in hyperprolisular

NOTE Confidence: 0.95283324

 $00{:}45{:}28.695 \dashrightarrow 00{:}45{:}30.535$ vascular endothelium that HER-two neu is

NOTE Confidence: 0.95283324

 $00:45:30.535 \longrightarrow 00:45:32.055$ expressed. Have you looked at

NOTE Confidence: 0.95283324

 $00:45:32.055 \longrightarrow 00:45:33.415$ the HER-twoneu expression in the

NOTE Confidence: 0.95283324

00:45:33.415 --> 00:45:34.395 vascular endothelium

NOTE Confidence: 0.98310393

 $00:45:34.855 \longrightarrow 00:45:35.895$ in addition to the tumor

NOTE Confidence: 0.98310393

 $00:45:35.895 \longrightarrow 00:45:37.080$ cells in those brain mets?

NOTE Confidence: 0.98310393

00:45:37.239 --> 00:45:38.280 Because it would certainly make

NOTE Confidence: 0.98310393

 $00:45:38.280 \longrightarrow 00:45:39.640$ sense if they have a

NOTE Confidence: 0.98310393

 $00:45:39.640 \longrightarrow 00:45:40.760$ bystander effect,

NOTE Confidence: 0.9594895

 $00:45:41.080 \longrightarrow 00:45:42.040$ that may that may be

NOTE Confidence: 0.9594895

 $00{:}45{:}42.040 \dashrightarrow 00{:}45{:}43.500$ the actual mechanism of action.

NOTE Confidence: 0.9594895

 $00:45:43.640 \longrightarrow 00:45:44.600$ And the second question is

NOTE Confidence: 0.9594895

 $00:45:44.600 \longrightarrow 00:45:46.040$ about interstitial lumenitis. This is

NOTE Confidence: 0.9594895

 $00:45:46.040 \longrightarrow 00:45:47.500$ something we've seen with enfortumab

 $00:45:47.640 \longrightarrow 00:45:48.140$ vedotin.

NOTE Confidence: 0.95941335

 $00{:}45{:}49.175 \dashrightarrow 00{:}45{:}50.295$ It's not really clear whether

NOTE Confidence: 0.95941335

 $00:45:50.295 \longrightarrow 00:45:51.494$ that's because of the interaction

NOTE Confidence: 0.95941335

 $00:45:51.494 \longrightarrow 00:45:52.875$ between checkpoints and enfortumab.

NOTE Confidence: 0.9938281

 $00:45:53.415 \longrightarrow 00:45:54.215$ But what do you think

NOTE Confidence: 0.9938281

 $00:45:54.215 \longrightarrow 00:45:55.035$ is the mechanism,

NOTE Confidence: 0.98827076

 $00{:}45{:}55.415 \dashrightarrow 00{:}45{:}56.855$ with the HER2 targeted agents

NOTE Confidence: 0.98827076

 $00:45:56.855 \longrightarrow 00:45:58.375$ with that? Yeah. So both

NOTE Confidence: 0.98827076

 $00:45:58.375 \longrightarrow 00:45:59.035$ good questions.

NOTE Confidence: 0.99595433

00:45:59.734 --> 00:46:00.614 You know, when you look

NOTE Confidence: 0.99595433

 $00:46:00.614 \longrightarrow 00:46:00.855$ at the

NOTE Confidence: 0.9194228

00:46:01.580 --> 00:46:02.400 you know, I

NOTE Confidence: 0.99827623

 $00:46:03.180 \longrightarrow 00:46:03.820$ don't know

NOTE Confidence: 0.96429604

 $00:46:05.020 \longrightarrow 00:46:06.380$ I haven't seen data on

NOTE Confidence: 0.96429604

 $00:46:06.380 \longrightarrow 00:46:07.980$ looking at at the HER2

NOTE Confidence: 0.96429604

 $00{:}46{:}07.980 \dashrightarrow 00{:}46{:}09.200$ expression on the vasculature,

 $00:46:11.020 \longrightarrow 00:46:12.940$ around tumors specifically in solid

NOTE Confidence: 0.94490355

 $00{:}46{:}12.940 \dashrightarrow 00{:}46{:}14.219$ cancers. It's a great question

NOTE Confidence: 0.94490355 00:46:14.219 --> 00:46:14.719 and NOTE Confidence: 0.9817763

 $00:46:15.215 \longrightarrow 00:46:16.015$ should be able to be

NOTE Confidence: 0.9817763

 $00:46:16.015 \longrightarrow 00:46:17.055$ looked at. We do enough,

NOTE Confidence: 0.9817763

00:46:17.055 --> 00:46:18.335 you know, resections of these

NOTE Confidence: 0.9817763

 $00:46:18.335 \longrightarrow 00:46:18.835$ cancers.

NOTE Confidence: 0.9850587

00:46:20.015 --> 00:46:20.815 You know, it's,

NOTE Confidence: 0.9632029

 $00{:}46{:}22.415 \dashrightarrow 00{:}46{:}23.535$ you know, the the alternative

NOTE Confidence: 0.9632029

 $00:46:23.614 \longrightarrow 00:46:24.335$ you know, so if it's

NOTE Confidence: 0.9632029

 $00:46:24.335 \longrightarrow 00:46:25.375$ not just breakdown of the

NOTE Confidence: 0.9632029

 $00:46:25.375 \longrightarrow 00:46:26.355$ blood brain barrier,

NOTE Confidence: 0.9843833

 $00{:}46{:}27.135 --> 00{:}46{:}27.795 \text{ you know},$

NOTE Confidence: 0.98739475

 $00:46:28.100 \longrightarrow 00:46:29.219$ is it released in the

NOTE Confidence: 0.98739475

00:46:29.219 --> 00:46:29.719 microenvironment?

 $00:46:30.580 \longrightarrow 00:46:31.540$ There are some data that

NOTE Confidence: 0.9655115

 $00:46:31.540 \longrightarrow 00:46:32.580$ I didn't have time to

NOTE Confidence: 0.9655115

 $00:46:32.580 \longrightarrow 00:46:33.239$ show you.

NOTE Confidence: 0.9261859

00:46:35.700 --> 00:46:36.980 But I think very provocative

NOTE Confidence: 0.9261859

 $00:46:36.980 \longrightarrow 00:46:38.260$ data that was presented at

NOTE Confidence: 0.9261859

00:46:38.260 --> 00:46:39.620 our San Antonio Breast Cancer

NOTE Confidence: 0.9261859

 $00:46:39.620 \longrightarrow 00:46:41.205$ meeting last month, just as

NOTE Confidence: 0.9261859

 $00:46:41.205 \longrightarrow 00:46:42.325$ a poster because I don't

NOTE Confidence: 0.9261859

 $00:46:42.325 \longrightarrow 00:46:43.145$ think people appreciated

NOTE Confidence: 0.9603503

 $00:46:43.845 \longrightarrow 00:46:44.585$ the impact,

NOTE Confidence: 0.99725986

 $00{:}46{:}46.405 \dashrightarrow 00{:}46{:}47.945$ suggesting that it's actually

NOTE Confidence: 0.9136734

 $00:46:48.485 \longrightarrow 00:46:50.025$ cathepsins in the microenvironment.

NOTE Confidence: 0.9858144

 $00:46:50.325 \longrightarrow 00:46:52.265$ They're actually cleaving these conjugates,

NOTE Confidence: 0.9858144

 $00:46:52.405 \longrightarrow 00:46:53.364$ and that's why they work

NOTE Confidence: 0.9858144

 $00:46:53.364 \longrightarrow 00:46:55.099$ in, you know, potentially HER2

NOTE Confidence: 0.967241

00:46:55.559 --> 00:46:57.420 null or HER2 very low,

 $00:46:57.719 \longrightarrow 00:46:58.680$ because they're really they're hurt

NOTE Confidence: 0.93488437

 $00:46:58.760 \longrightarrow 00:46:59.559$ it's you don't need the

NOTE Confidence: 0.93488437

00:46:59.559 --> 00:47:01.579 HER2. It's just the microenvironment

NOTE Confidence: 0.96556586

 $00:47:02.039 \longrightarrow 00:47:03.660$ has enough cathepsins there,

NOTE Confidence: 0.99647164

 $00{:}47{:}04.279 \dashrightarrow 00{:}47{:}05.900$ that you get selective cleavage

NOTE Confidence: 0.99647164

 $00:47:05.960 \longrightarrow 00:47:06.940$ around the tumor.

NOTE Confidence: 0.855186

 $00:47:07.464 \longrightarrow 00:47:08.344$ So that could be a

NOTE Confidence: 0.855186

 $00{:}47{:}08.344 \dashrightarrow 00{:}47{:}09.944$ alternative explanation. But,

NOTE Confidence: 0.97741604

00:47:10.505 --> 00:47:12.045 also, if you had anchoring

NOTE Confidence: 0.97741604

 $00{:}47{:}12.105 \dashrightarrow 00{:}47{:}13.944$ because of HER2 over expression in

NOTE Confidence: 0.97741604

 $00{:}47{:}13.944 \dashrightarrow 00{:}47{:}14.605$ the vasculature,

NOTE Confidence: 0.98313457

00:47:15.305 --> 00:47:16.605 you could imagine,

NOTE Confidence: 0.9994459

 $00:47:17.224 \longrightarrow 00:47:18.605$ having efficacy there

NOTE Confidence: 0.8644271

 $00:47:20.010 \longrightarrow 00:47:20.750$ and perhaps

NOTE Confidence: 0.97235715

00:47:21.290 --> 00:47:23.930 causing more disruption by causing

 $00:47:23.930 \longrightarrow 00:47:25.790$ some apoptosis of the endothelium,

NOTE Confidence: 0.97235715

 $00:47:25.930 \longrightarrow 00:47:27.450$ causing more disruption, allowing more

NOTE Confidence: 0.97235715

 $00:47:27.450 \longrightarrow 00:47:28.489$ ADC in there. So I

NOTE Confidence: 0.97235715

00:47:28.489 --> 00:47:29.530 think that's a great question,

NOTE Confidence: 0.97235715

 $00:47:29.530 \longrightarrow 00:47:30.410$ and I don't have a

NOTE Confidence: 0.97235715

 $00:47:30.410 \longrightarrow 00:47:31.450$ great answer for that. And

NOTE Confidence: 0.97235715

 $00:47:31.450 \longrightarrow 00:47:32.590$ in terms of the ILD,

NOTE Confidence: 0.94241256

 $00:47:34.475 \longrightarrow 00:47:35.935$ we we we don't know

NOTE Confidence: 0.94241256

 $00{:}47{:}36.075 \dashrightarrow 00{:}47{:}37.775$ the the mechanism. It it,

NOTE Confidence: 0.98708856

00:47:38.635 --> 00:47:39.135 actually,

NOTE Confidence: 0.9561653

 $00:47:39.515 \longrightarrow 00:47:40.715$ Adriana Khan is looking at

NOTE Confidence: 0.9561653

 $00:47:40.715 \longrightarrow 00:47:42.575$ trying to do lung biopsies

NOTE Confidence: 0.9561653

00:47:42.635 --> 00:47:44.094 in patients who get pneumonitis

NOTE Confidence: 0.9561653

 $00:47:44.235 \longrightarrow 00:47:45.355$ or or who are getting

NOTE Confidence: 0.9561653

 $00:47:45.355 \longrightarrow 00:47:46.655$ these drugs and get pneumonitis,

NOTE Confidence: 0.93682736

 $00:47:47.380 \longrightarrow 00:47:48.820$ to try to kinda clarify

 $00:47:48.820 \longrightarrow 00:47:49.320$ that.

NOTE Confidence: 0.88943595

 $00:47:49.859 \longrightarrow 00:47:51.060$ You know, certainly, there is

NOTE Confidence: 0.88943595

00:47:51.060 --> 00:47:51.560 HER2,

NOTE Confidence: 0.9697744

 $00:47:52.260 \longrightarrow 00:47:54.340$ in in in some lung

NOTE Confidence: 0.9697744

 $00:47:54.340 \longrightarrow 00:47:54.840$ tissue,

NOTE Confidence: 0.95227695

 $00:47:56.820 \longrightarrow 00:47:58.900$ whether it's through direct target

NOTE Confidence: 0.95227695

00:47:58.900 --> 00:48:00.420 mediated, although as you pointed

NOTE Confidence: 0.95227695

 $00:48:00.420 \longrightarrow 00:48:01.844$ out, there are multiple targets

NOTE Confidence: 0.95227695

 $00:48:02.005 \longrightarrow 00:48:02.965$ that are that are seeing

NOTE Confidence: 0.95227695

00:48:02.965 --> 00:48:03.465 ILD.

NOTE Confidence: 0.99392545

 $00:48:04.005 \longrightarrow 00:48:04.744$ There are,

NOTE Confidence: 0.93652016

 $00:48:05.685 \longrightarrow 00:48:07.705$ you know, with TDM one,

NOTE Confidence: 0.93652016

 $00{:}48{:}07.844 \dashrightarrow 00{:}48{:}09.205$ which is HER2 target, you

NOTE Confidence: 0.93652016

00:48:09.205 --> 00:48:10.484 don't you know, the ILD

NOTE Confidence: 0.93652016

 $00:48:10.484 \longrightarrow 00:48:12.405$ rate is is very,

 $00:48:12.405 \longrightarrow 00:48:13.305$ very low.

NOTE Confidence: 0.9981122

 $00:48:13.765 \longrightarrow 00:48:15.065$ And so we have ILD

NOTE Confidence: 0.95466816

 $00:48:15.380 \longrightarrow 00:48:16.820$ in some drugs where you

NOTE Confidence: 0.95466816

 $00:48:16.820 \longrightarrow 00:48:18.100$ change the payload or change

NOTE Confidence: 0.95466816

 $00:48:18.100 \longrightarrow 00:48:19.380$ the linker and you you

NOTE Confidence: 0.95466816

 $00{:}48{:}19.380 --> 00{:}48{:}20.739$ you change the ILD rate

NOTE Confidence: 0.95466816

 $00:48:20.739 \longrightarrow 00:48:21.239$ substantially.

NOTE Confidence: 0.92955965

 $00:48:22.739 \longrightarrow 00:48:23.700$ So we don't know. You

NOTE Confidence: 0.92955965

 $00:48:23.700 \longrightarrow 00:48:25.000$ you know, is it macrophage

NOTE Confidence: 0.92955965

00:48:25.140 --> 00:48:26.820 uptake because of FC receptors?

NOTE Confidence: 0.92955965

 $00:48:26.820 \longrightarrow 00:48:27.540$ I think there's a lot

NOTE Confidence: 0.92955965

 $00:48:27.540 \longrightarrow 00:48:29.060$ of hypotheses, but I don't

NOTE Confidence: 0.92955965

 $00:48:29.060 \longrightarrow 00:48:30.280$ think there's any definitive,

NOTE Confidence: 0.8663461

 $00:48:31.135 \longrightarrow 00:48:31.635$ data.

NOTE Confidence: 0.9906477

 $00:48:32.175 \longrightarrow 00:48:33.375$ And, you know, it is

NOTE Confidence: 0.9906477

 $00{:}48{:}33.375 \dashrightarrow 00{:}48{:}34.335$ certainly a problem for some

 $00:48:34.335 \longrightarrow 00:48:35.635$ of these drugs that limits

NOTE Confidence: 0.99870765

 $00{:}48{:}35.935 \dashrightarrow 00{:}48{:}37.875$ their their, you know, applicability.

NOTE Confidence: 0.99884367

 $00:48:38.575 \longrightarrow 00:48:39.075$ Thanks.

NOTE Confidence: 0.9892976

 $00:48:40.735 \longrightarrow 00:48:41.235$ Yeah.

NOTE Confidence: 0.99781346

 $00{:}48{:}45.860 \dashrightarrow 00{:}48{:}46.360$ Okay.

NOTE Confidence: 0.98670465

 $00{:}48{:}47.140 --> 00{:}48{:}48.360$ Thank you for your talk.

NOTE Confidence: 0.9323555

 $00:48:48.739 \longrightarrow 00:48:50.020$ I had a question about

NOTE Confidence: 0.9323555

 $00:48:50.020 \longrightarrow 00:48:51.160$ the brain mets.

NOTE Confidence: 0.98711634

 $00{:}48{:}51.620 \dashrightarrow 00{:}48{:}53.000$ Have you seen any coexpression

NOTE Confidence: 0.9781136

 $00{:}48{:}53.380 \dashrightarrow 00{:}48{:}55.460$ of cell adhesion molecules that

NOTE Confidence: 0.9781136

 $00:48:55.460 \longrightarrow 00:48:56.500$ you could then use as

NOTE Confidence: 0.9781136

00:48:56.500 --> 00:48:58.775 a, like, HER2 bispecific

NOTE Confidence: 0.96091336

 $00:48:59.315 \longrightarrow 00:49:00.535$ to increase internalization

NOTE Confidence: 0.9415512

 $00:49:00.915 \longrightarrow 00:49:02.535$ in those brain meds specifically

NOTE Confidence: 0.9415512

 $00:49:02.594 \longrightarrow 00:49:03.954$ or the potential Yeah. So,

 $00:49:03.954 \longrightarrow 00:49:04.915$ I mean, again, this gets

NOTE Confidence: 0.9415512

 $00{:}49{:}04.915 \dashrightarrow 00{:}49{:}06.835$ back to, Dan's question and

NOTE Confidence: 0.9415512

 $00:49:06.835 \longrightarrow 00:49:07.494$ and then,

NOTE Confidence: 0.9962598

00:49:08.194 --> 00:49:08.855 you know,

NOTE Confidence: 0.9997093

 $00:49:09.315 \longrightarrow 00:49:10.915$ whether we can learn from

NOTE Confidence: 0.9997093

 $00:49:10.915 \longrightarrow 00:49:11.815$ some of these

NOTE Confidence: 0.9574404

 $00:49:12.890 \longrightarrow 00:49:14.489$ datasets where people are doing

NOTE Confidence: 0.9574404

 $00:49:14.489 \longrightarrow 00:49:16.270$ resections of of brain metastases

NOTE Confidence: 0.9574404

 $00:49:16.410 \longrightarrow 00:49:18.110$ and and looking at, dysregulation

NOTE Confidence: 0.9574404

 $00:49:18.250 \longrightarrow 00:49:19.690$ of adhesion molecules and as

NOTE Confidence: 0.9574404

 $00{:}49{:}19.690 \dashrightarrow 00{:}49{:}20.890$ a way of potentially doing

NOTE Confidence: 0.9574404

 $00:49:20.890 \longrightarrow 00:49:22.250$ bispecifics. I mean, there have

NOTE Confidence: 0.9574404

 $00:49:22.250 \longrightarrow 00:49:23.150$ been some

NOTE Confidence: 0.94011956

00:49:24.414 --> 00:49:26.734 ADCs looking at at those

NOTE Confidence: 0.94011956

 $00:49:26.815 \longrightarrow 00:49:28.414$ at at adhesion molecules to

NOTE Confidence: 0.94011956

 $00:49:28.414 \longrightarrow 00:49:29.295$ try to get at the

 $00:49:29.295 \longrightarrow 00:49:31.375$ at the, microenvironment, but I

NOTE Confidence: 0.94011956

 $00:49:31.375 \longrightarrow 00:49:32.174$ I don't know of any

NOTE Confidence: 0.94011956

 $00:49:32.174 \longrightarrow 00:49:33.855$ of that with her too.

NOTE Confidence: 0.94011956

 $00:49:34.174 \longrightarrow 00:49:35.055$ But it's a good idea

NOTE Confidence: 0.94011956

 $00:49:35.055 \longrightarrow 00:49:36.255$ and and kinda looking at

NOTE Confidence: 0.94011956

 $00:49:36.255 \longrightarrow 00:49:37.394$ that. Because, again, the BRAINMET

NOTE Confidence: 0.94011956

 $00:49:37.454 \longrightarrow 00:49:38.335$ issue is a is a

NOTE Confidence: 0.94011956

 $00:49:38.335 \longrightarrow 00:49:40.109$ real problem. And, where we've

NOTE Confidence: 0.94011956

 $00:49:40.109 \longrightarrow 00:49:41.549$ seen we see benefit with

NOTE Confidence: 0.94011956

 $00:49:41.549 \longrightarrow 00:49:42.750$ ADCs in the brain as

NOTE Confidence: 0.94011956

 $00:49:42.750 \longrightarrow 00:49:43.950$ I showed you, but they're

NOTE Confidence: 0.94011956 00:49:43.950 --> 00:49:44.450 not,

NOTE Confidence: 0.98842204

 $00:49:44.750 \longrightarrow 00:49:45.630$ you know, they're not,

NOTE Confidence: 0.9752918

 $00:49:46.349 \longrightarrow 00:49:48.430$ eliminating the brain metastases. And,

NOTE Confidence: 0.9752918

 $00:49:48.430 \longrightarrow 00:49:49.549$ generally, what we see with

00:49:49.549 --> 00:49:51.469 our patients, once a patient

NOTE Confidence: 0.9752918

00:49:51.469 --> 00:49:52.450 has brain metastases,

NOTE Confidence: 0.99529684

00:49:53.390 --> 00:49:54.769 that's progressed after radiation,

NOTE Confidence: 0.94132596

 $00:49:55.230 \longrightarrow 00:49:56.565$ they always progress in the

NOTE Confidence: 0.94132596

 $00:49:56.565 \longrightarrow 00:49:57.925$ brain. And so it becomes

NOTE Confidence: 0.94132596

 $00:49:57.925 \longrightarrow 00:49:59.945$ the rate limiting step for

NOTE Confidence: 0.94132596

 $00:50:00.244 \longrightarrow 00:50:01.205$ a lot of patients. So

NOTE Confidence: 0.94132596

 $00:50:01.205 \longrightarrow 00:50:02.325$ we we need new treatments,

NOTE Confidence: 0.94132596

 $00{:}50{:}02.325 \to 00{:}50{:}03.705$ but that's a good question.

NOTE Confidence: 0.94132596

00:50:03.765 --> 00:50:05.445 Yeah. Great talk, Ian. I'm

NOTE Confidence: 0.94132596

 $00:50:05.445 \longrightarrow 00:50:06.585$ one of the best molecular

NOTE Confidence: 0.94132596

 $00:50:06.805 \longrightarrow 00:50:07.305$ pathologist.

NOTE Confidence: 0.9115724

 $00:50:07.779 \longrightarrow 00:50:09.380$ The trial you presented, was

NOTE Confidence: 0.9115724

 $00:50:09.380 \longrightarrow 00:50:11.299$ AutoMedigar when you predicted the

NOTE Confidence: 0.9115724

 $00:50:11.299 \longrightarrow 00:50:12.900$ pathologic complete response by the

NOTE Confidence: 0.9115724

 $00:50:12.900 \longrightarrow 00:50:13.400$ heterogeneity

00:50:13.779 --> 00:50:14.839 Yeah. In HER2.

NOTE Confidence: 0.91271585

 $00{:}50{:}15.380 \dashrightarrow 00{:}50{:}17.059$ I we encounter heterogeneity on

NOTE Confidence: 0.91271585

 $00:50:17.059 \longrightarrow 00:50:18.180$ IHC all the time. And

NOTE Confidence: 0.91271585

 $00:50:18.180 \longrightarrow 00:50:19.299$ sometime when we go for

NOTE Confidence: 0.91271585

00:50:19.299 --> 00:50:20.900 fish, it doesn't translate to

NOTE Confidence: 0.91271585

 $00{:}50{:}20.900 \dashrightarrow 00{:}50{:}22.665$ heterogeneity in fish in this

NOTE Confidence: 0.91271585

 $00:50:22.825 \longrightarrow 00:50:24.685$ area. But also on FISH,

NOTE Confidence: 0.9927094

 $00:50:24.985 \longrightarrow 00:50:26.425$ any FISH I review, there

NOTE Confidence: 0.9927094

00:50:26.425 --> 00:50:27.705 is negative cells in the

NOTE Confidence: 0.9927094

00:50:27.705 --> 00:50:28.205 FISH.

NOTE Confidence: 0.94988877

 $00:50:28.905 \longrightarrow 00:50:29.945$ Can how can we make

NOTE Confidence: 0.94988877

00:50:29.945 --> 00:50:31.165 this clinically applicable?

NOTE Confidence: 0.9477374

 $00{:}50{:}31.625 --> 00{:}50{:}33.385$ And can this patient go

NOTE Confidence: 0.9477374

 $00:50:33.385 \longrightarrow 00:50:35.065$ instead of going getting new

NOTE Confidence: 0.9477374

00:50:35.065 --> 00:50:36.910 adjuvant antibody drug conjugate? Because

00:50:36.910 --> 00:50:38.450 they're not gonna achieve BCR

NOTE Confidence: 0.9477374

 $00:50:38.590 \longrightarrow 00:50:40.350$ with the regular regimen. Thank

NOTE Confidence: 0.9477374 00:50:40.350 --> 00:50:40.850 you.

NOTE Confidence: 0.9445479

 $00:50:41.310 \longrightarrow 00:50:42.910$ Yeah. So, I mean, with

NOTE Confidence: 0.9445479

00:50:42.910 --> 00:50:45.570 TBM one, we've definitely seen

NOTE Confidence: 0.9445479 00:50:45.790 --> 00:50:46.530 in in

NOTE Confidence: 0.95960575

 $00:50:46.989 \longrightarrow 00:50:48.030$ in both of the studies

NOTE Confidence: 0.95960575

 $00:50:48.030 \longrightarrow 00:50:49.150$ I showed you and and

NOTE Confidence: 0.95960575

 $00{:}50{:}49.150 \dashrightarrow 00{:}50{:}50.430$ pretty much every study of

NOTE Confidence: 0.95960575

00:50:50.430 --> 00:50:52.235 TBM one, which, again, non

NOTE Confidence: 0.95960575

 $00{:}50{:}52.235 \to 00{:}50{:}53.835$ cleavable link are very dependent

NOTE Confidence: 0.95960575

 $00:50:53.835 \longrightarrow 00:50:54.975$ on HER2 expression,

NOTE Confidence: 0.9945505

 $00:50:55.435 \longrightarrow 00:50:57.535$ that you see less substantially

NOTE Confidence: 0.9945505

 $00:50:57.594 \longrightarrow 00:50:59.035$ less activity as you go

NOTE Confidence: 0.9945505

 $00:50:59.035 \longrightarrow 00:51:00.635$ down to either lower expression

NOTE Confidence: 0.9945505

00:51:00.635 --> 00:51:02.015 levels of HER2 or heterogeneity.

 $00:51:02.795 \longrightarrow 00:51:03.995$ But in truth, we don't

NOTE Confidence: 0.94645244

 $00:51:03.995 \longrightarrow 00:51:05.114$ use TDM one in the

NOTE Confidence: 0.94645244

00:51:05.114 --> 00:51:06.719 neoadjuvant setting. It's not it's

NOTE Confidence: 0.94645244

00:51:06.719 --> 00:51:07.380 it's not clinically

NOTE Confidence: 0.9597503

 $00:51:08.319 \longrightarrow 00:51:08.819$ used.

NOTE Confidence: 0.9730716

 $00:51:10.000 \longrightarrow 00:51:10.500$ And

NOTE Confidence: 0.9558946

00:51:11.280 --> 00:51:12.880 as Eric has been potting

NOTE Confidence: 0.9558946

 $00:51:12.880 \longrightarrow 00:51:13.859$ me for years

NOTE Confidence: 0.9457678

 $00{:}51{:}14.160 --> 00{:}51{:}15.359$ to go back and redo

NOTE Confidence: 0.9457678

00:51:15.359 --> 00:51:16.960 that trial of heterogeneity with

NOTE Confidence: 0.9457678

 $00:51:16.960 \longrightarrow 00:51:18.239$ one of these conjugates that

NOTE Confidence: 0.9457678

 $00:51:18.239 \longrightarrow 00:51:20.000$ has by standard effect to

NOTE Confidence: 0.9457678

 $00{:}51{:}20.000 \dashrightarrow 00{:}51{:}22.185$ see whether we eliminate that

NOTE Confidence: 0.9457678

00:51:22.505 --> 00:51:23.005 disparity.

NOTE Confidence: 0.9307345

00:51:24.025 --> 00:51:25.305 You would expect we would

 $00:51:25.305 \longrightarrow 00:51:26.925$ if the hypothesis was correct,

NOTE Confidence: 0.9741073

 $00:51:27.545 \longrightarrow 00:51:28.585$ but we haven't proven it.

NOTE Confidence: 0.9741073

 $00:51:28.585 \longrightarrow 00:51:29.785$ But one of the as

NOTE Confidence: 0.9741073

 $00:51:29.785 \longrightarrow 00:51:30.825$ I said, there's a big

NOTE Confidence: 0.9741073

 $00:51:30.825 \longrightarrow 00:51:32.425$ trial that's just been it's

NOTE Confidence: 0.9741073

 $00{:}51{:}32.425 \dashrightarrow 00{:}51{:}33.545$ been completed. We're waiting for

NOTE Confidence: 0.9741073

 $00:51:33.545 \longrightarrow 00:51:34.585$ the results. We should get

NOTE Confidence: 0.9741073

 $00:51:34.585 \longrightarrow 00:51:35.945$ it sometime this year of

NOTE Confidence: 0.9741073

 $00:51:35.945 \longrightarrow 00:51:36.445$ neoadjuvant

NOTE Confidence: 0.8919727

00:51:36.745 --> 00:51:37.245 TDXD,

NOTE Confidence: 0.9812144

 $00:51:37.860 \longrightarrow 00:51:39.080$ the one with the payload,

NOTE Confidence: 0.9689232

 $00:51:39.860 \longrightarrow 00:51:40.900$ spreading, the one with,

NOTE Confidence: 0.9337611

 $00:51:41.860 \longrightarrow 00:51:42.920$ bystander effect.

NOTE Confidence: 0.8049592

00:51:44.260 --> 00:51:45.239 And, hopefully,

NOTE Confidence: 0.9728249

 $00:51:46.980 \longrightarrow 00:51:47.780$ I'm not involved in that

NOTE Confidence: 0.9728249

 $00:51:47.780 \longrightarrow 00:51:48.680$ trial, but, hopefully,

 $00:51:49.220 \longrightarrow 00:51:50.420$ they'll look at that question

NOTE Confidence: 0.9175464

 $00:51:50.420 \longrightarrow 00:51:52.065$ and and hope and,

NOTE Confidence: 0.9175464

 $00:51:52.065 \longrightarrow 00:51:53.344$ hopefully, we won't see that

NOTE Confidence: 0.9175464

00:51:53.344 --> 00:51:54.325 just big disparity

NOTE Confidence: 0.92149884

00:51:54.705 --> 00:51:55.925 by HER2 level,

NOTE Confidence: 0.9991467

 $00:51:56.465 \longrightarrow 00:51:57.665$ because of the unique features

NOTE Confidence: 0.9991467

 $00:51:57.665 \longrightarrow 00:51:58.565$ of this conjugate.

NOTE Confidence: 0.96577424

 $00:51:59.105 \longrightarrow 00:52:00.145$ But if we do, then,

NOTE Confidence: 0.96577424

00:52:00.145 --> 00:52:01.185 again, it brings up your

NOTE Confidence: 0.96577424

00:52:01.185 --> 00:52:02.625 point and says, hey. You

NOTE Confidence: 0.96577424

 $00:52:02.625 \longrightarrow 00:52:03.744$ know, a a one size

NOTE Confidence: 0.96577424

 $00:52:03.744 \longrightarrow 00:52:05.289$ fits all approach is not

NOTE Confidence: 0.96577424

 $00{:}52{:}05.289 \rightarrow 00{:}52{:}06.809$ right, and the heterogeneous cancer

NOTE Confidence: 0.96577424

00:52:06.809 --> 00:52:08.010 should be treated in different

NOTE Confidence: 0.96577424

 $00:52:08.010 \longrightarrow 00:52:08.510$ ways,

 $00:52:09.770 \longrightarrow 00:52:10.890$ which probably is

NOTE Confidence: 0.97852546

00:52:11.529 --> 00:52:13.049 you know? I didn't have

NOTE Confidence: 0.97852546

 $00{:}52{:}13.049 \dashrightarrow 00{:}52{:}14.170$ time to talk about resistance

NOTE Confidence: 0.97852546

 $00:52:14.170 \longrightarrow 00:52:14.910$ or biomarkers,

NOTE Confidence: 0.9962648

 $00:52:16.170 \longrightarrow 00:52:17.505$ but we're not good at

NOTE Confidence: 0.9962648

00:52:17.505 --> 00:52:18.545 figuring out either one of

NOTE Confidence: 0.9962648

 $00:52:18.545 \longrightarrow 00:52:19.045$ those,

NOTE Confidence: 0.9990063

 $00:52:19.585 \longrightarrow 00:52:20.704$ areas right now. We need

NOTE Confidence: 0.9990063

 $00:52:20.704 \longrightarrow 00:52:21.664$ a lot more work on

NOTE Confidence: 0.9990063

 $00:52:21.664 \longrightarrow 00:52:22.164$ identifying

NOTE Confidence: 0.991664

 $00{:}52{:}22.785 \dashrightarrow 00{:}52{:}24.065$ whether there are biomarkers that

NOTE Confidence: 0.991664

00:52:24.065 --> 00:52:25.105 predict benefit of any of

NOTE Confidence: 0.991664

00:52:25.105 --> 00:52:26.384 these drugs. We haven't been

NOTE Confidence: 0.991664

 $00:52:26.384 \longrightarrow 00:52:27.184$ able to figure that out

NOTE Confidence: 0.991664

 $00:52:27.184 \longrightarrow 00:52:27.984$ yet. Eric, do you have

NOTE Confidence: 0.991664

 $00:52:27.984 \longrightarrow 00:52:28.565$ a follow-up?

 $00:52:30.400 \longrightarrow 00:52:31.540$ Question from online.

NOTE Confidence: 0.8943226

 $00:52:32.080 \longrightarrow 00:52:33.700$ So this is the limitation

NOTE Confidence: 0.8943226

 $00:52:33.840 \longrightarrow 00:52:34.500$ of PCR

NOTE Confidence: 0.8465879

 $00:52:34.880 \longrightarrow 00:52:36.020$ versus long term.

NOTE Confidence: 0.96406966

 $00{:}52{:}36.719 \dashrightarrow 00{:}52{:}38.719$ Because just because someone doesn't

NOTE Confidence: 0.96406966

00:52:38.719 --> 00:52:39.700 achieve a PCR

NOTE Confidence: 0.65669197

00:52:40.320 --> 00:52:42.400 doesn't necessarily mean for going

NOTE Confidence: 0.65669197

 $00:52:42.400 \longrightarrow 00:52:43.540$ to have a good

NOTE Confidence: 0.9520136

 $00:52:43.840 \longrightarrow 00:52:44.340$ answer.

NOTE Confidence: 0.84442

 $00:52:44.645 \longrightarrow 00:52:46.085$ So some of those cells

NOTE Confidence: 0.84442

 $00:52:46.085 \longrightarrow 00:52:47.045$ that may be first and

NOTE Confidence: 0.84442

 $00:52:47.045 \longrightarrow 00:52:47.545$ negatives

NOTE Confidence: 0.85325694

00:52:48.085 --> 00:52:50.105 may also be ER positive

NOTE Confidence: 0.85325694

00:52:50.165 --> 00:52:51.785 in response to anything therapy,

NOTE Confidence: 0.85325694

 $00:52:51.844 \longrightarrow 00:52:52.744$ maybe biologically

 $00:52:53.125 \longrightarrow 00:52:53.864$ less aggressive.

NOTE Confidence: 0.9991655

 $00:52:54.565 \longrightarrow 00:52:56.025$ So it's it's not

NOTE Confidence: 0.8736976

00:52:57.080 --> 00:52:58.280 absolutely the case when you

NOTE Confidence: 0.8736976

 $00:52:58.280 \longrightarrow 00:52:59.880$ have to eradicate every single

NOTE Confidence: 0.8736976

 $00:52:59.880 \longrightarrow 00:53:00.700$ one of their

NOTE Confidence: 0.92255014

 $00:53:01.080 \longrightarrow 00:53:02.540$ cell. The question

NOTE Confidence: 0.7009845

 $00:53:04.520 \longrightarrow 00:53:05.020$ online,

NOTE Confidence: 0.98604643 00:53:05.800 --> 00:53:06.300 was,

NOTE Confidence: 0.9722866

 $00{:}53{:}06.920 --> 00{:}53{:}07.880$ do you think it would

NOTE Confidence: 0.9722866

00:53:07.880 --> 00:53:10.360 be possible using antibody drug

NOTE Confidence: 0.9722866

 $00{:}53{:}10.360 --> 00{:}53{:}10.860 \ {\rm conjugate}$

NOTE Confidence: 0.92130375

 $00:53:11.255 \longrightarrow 00:53:13.755$ technology to deliver non chemotherapy

NOTE Confidence: 0.867363

 $00:53:14.215 \longrightarrow 00:53:15.195$ agents like,

NOTE Confidence: 0.9765433

 $00:53:16.855 \longrightarrow 00:53:17.835$ immune checkpoints

NOTE Confidence: 0.9485687

 $00:53:18.135 \longrightarrow 00:53:19.114$ or such?

NOTE Confidence: 0.930881

 $00:53:19.895 \longrightarrow 00:53:21.094$ Yeah. So, yeah, so it's

00:53:21.094 --> 00:53:22.055 a great question, and then

NOTE Confidence: 0.930881

 $00:53:22.055 \longrightarrow 00:53:22.855$ there's been a lot of

NOTE Confidence: 0.930881

 $00:53:22.855 \longrightarrow 00:53:25.350$ interest in in delivering

NOTE Confidence: 0.930881

 $00:53:25.410 \longrightarrow 00:53:26.469$ everything with that,

NOTE Confidence: 0.9636701

 $00:53:27.090 \longrightarrow 00:53:27.590$ antisense,

NOTE Confidence: 0.97324103

00:53:28.530 --> 00:53:29.830 you know, as I said,

NOTE Confidence: 0.7119164

00:53:30.210 --> 00:53:31.190 DNA damage,

NOTE Confidence: 0.962941

 $00{:}53{:}32.369 \dashrightarrow 00{:}53{:}34.070$ inhibit you know, repair inhibitors,

NOTE Confidence: 0.9772008

 $00{:}53{:}35.650 --> 00{:}53{:}36.850$ I think you name it.

NOTE Confidence: 0.9772008

 $00:53:36.850 \longrightarrow 00:53:38.390$ I think the the problem

NOTE Confidence: 0.9928721

 $00:53:39.195 \longrightarrow 00:53:40.875$ the the concern people have

NOTE Confidence: 0.9928721

 $00:53:40.875 \longrightarrow 00:53:42.335$ with going that direction,

NOTE Confidence: 0.975631

 $00:53:43.035 \longrightarrow 00:53:43.995$ not that it's not being

NOTE Confidence: 0.975631

 $00:53:43.995 \longrightarrow 00:53:45.114$ tried, but the concern is

NOTE Confidence: 0.975631

00:53:45.114 --> 00:53:46.735 just gonna be, you know,

 $00:53:48.795 \longrightarrow 00:53:50.235$ the amount of ADC that

NOTE Confidence: 0.9585555

 $00{:}53{:}50.235 \dashrightarrow 00{:}53{:}51.594$ actually gets the tumor cell

NOTE Confidence: 0.9585555

 $00:53:51.594 \longrightarrow 00:53:52.495$ is very low,

NOTE Confidence: 0.9540519

 $00:53:53.289 \longrightarrow 00:53:54.489$ because they get taken up.

NOTE Confidence: 0.9540519

 $00:53:54.489 \longrightarrow 00:53:55.230$ Even though,

NOTE Confidence: 0.9710372

00:53:56.170 --> 00:53:57.049 you know, we talk about

NOTE Confidence: 0.9710372

 $00:53:57.049 \longrightarrow 00:53:58.270$ it being a guided missile,

NOTE Confidence: 0.998506

 $00:53:58.650 \longrightarrow 00:53:59.930$ most of the drug actually

NOTE Confidence: 0.998506

 $00:53:59.930 \longrightarrow 00:54:00.989$ ends up in just

NOTE Confidence: 0.9540679

 $00:54:02.329 \longrightarrow 00:54:03.770$ random tissue just because it

NOTE Confidence: 0.9540679

 $00{:}54{:}03.849 {\:{\circ}{\circ}{\circ}\:} > 00{:}54{:}05.710$ just antibodies get stuck places.

NOTE Confidence: 0.9540679

00:54:05.930 --> 00:54:07.724 So, you know, data suggests

NOTE Confidence: 0.9540679

 $00:54:07.724 \longrightarrow 00:54:08.765$ that, like, one percent of

NOTE Confidence: 0.9540679

 $00:54:08.765 \longrightarrow 00:54:09.724$ the dose that you give

NOTE Confidence: 0.9540679

 $00:54:09.724 \longrightarrow 00:54:10.924$ actually gets to the tumor.

NOTE Confidence: 0.9540679

00:54:10.924 --> 00:54:12.125 So you don't really getting

 $00:54:12.125 \longrightarrow 00:54:13.325$ a whole lot of of

NOTE Confidence: 0.9540679

 $00:54:13.325 \longrightarrow 00:54:15.164$ the payload to the cancer

NOTE Confidence: 0.9540679

 $00:54:15.164 \longrightarrow 00:54:16.065$ cell. And so

NOTE Confidence: 0.9987168

 $00:54:16.684 \longrightarrow 00:54:17.885$ there's been a push to

NOTE Confidence: 0.9987168

00:54:17.885 --> 00:54:19.664 get very high potency

NOTE Confidence: 0.9985857

 $00:54:20.760 \longrightarrow 00:54:21.260$ payloads

NOTE Confidence: 0.97036713

 $00:54:21.719 \longrightarrow 00:54:22.520$ with the idea that you

NOTE Confidence: 0.97036713

 $00:54:22.520 \longrightarrow 00:54:23.320$ can get away with that

NOTE Confidence: 0.97036713

 $00:54:23.320 \longrightarrow 00:54:24.860$ because they're being somewhat selectively

NOTE Confidence: 0.97036713

 $00:54:24.920 \longrightarrow 00:54:25.420$ delivered,

NOTE Confidence: 0.98670846

 $00:54:26.280 \longrightarrow 00:54:27.400$ because you you we're not

NOTE Confidence: 0.98670846

 $00:54:27.400 \longrightarrow 00:54:28.360$ getting a whole lot into

NOTE Confidence: 0.98670846

 $00{:}54{:}28.360 \dashrightarrow 00{:}54{:}29.480$ the cancer, so you you

NOTE Confidence: 0.98670846

 $00:54:29.480 \longrightarrow 00:54:30.280$ want what you get in

NOTE Confidence: 0.98670846

 $00:54:30.280 \longrightarrow 00:54:31.660$ there to be very potent.

 $00:54:31.719 \longrightarrow 00:54:32.840$ And the problem with most

NOTE Confidence: 0.98670846

 $00:54:32.840 \longrightarrow 00:54:34.460$ of these small molecules,

NOTE Confidence: 0.99449575

 $00:54:35.685 \longrightarrow 00:54:36.965$ is that they're not as

NOTE Confidence: 0.99449575

 $00:54:36.965 \longrightarrow 00:54:38.725$ potent as as they need

NOTE Confidence: 0.99449575

 $00:54:38.725 \longrightarrow 00:54:40.085$ to be or the concern

NOTE Confidence: 0.99449575

 $00:54:40.085 \longrightarrow 00:54:40.885$ is they're not as potent

NOTE Confidence: 0.99449575

 $00:54:40.885 \longrightarrow 00:54:41.605$ as they need to be.

NOTE Confidence: 0.99449575

00:54:41.605 --> 00:54:42.485 We'll see. I mean, again,

NOTE Confidence: 0.99449575

 $00:54:42.485 \longrightarrow 00:54:43.285$ there's a lot of them

NOTE Confidence: 0.99449575

00:54:43.285 --> 00:54:44.645 in development, but that's the

NOTE Confidence: 0.99449575

00:54:44.645 --> 00:54:45.545 problem with,

NOTE Confidence: 0.92173445

 $00:54:46.565 \longrightarrow 00:54:47.765$ with your payload is if

NOTE Confidence: 0.92173445

00:54:47.765 --> 00:54:48.425 it's not

NOTE Confidence: 0.99966073

 $00:54:48.930 \longrightarrow 00:54:49.670$ quite potent,

NOTE Confidence: 0.9671221

 $00:54:50.609 \longrightarrow 00:54:51.890$ it may not be effective

NOTE Confidence: 0.9671221

 $00:54:51.890 \longrightarrow 00:54:52.950$ enough even if

 $00:54:53.489 \longrightarrow 00:54:54.150$ the general

NOTE Confidence: 0.9954277

 $00{:}54{:}54.450 --> 00{:}54{:}55.650$ hypothesis is a good one

NOTE Confidence: 0.9954277

 $00:54:55.650 \longrightarrow 00:54:56.609$ of of doing that.

NOTE Confidence: 0.9954277

 $00:54:56.609 \longrightarrow 00:54:57.969$ So but, you know, none

NOTE Confidence: 0.9954277

00:54:57.969 --> 00:54:58.930 of them have been approved

NOTE Confidence: 0.9954277

 $00:54:58.930 \longrightarrow 00:54:59.890$ as far as I know.

NOTE Confidence: 0.9954277

 $00:54:59.890 \longrightarrow 00:55:00.770$ We'll have to we'll have

NOTE Confidence: 0.9954277

 $00:55:00.770 \longrightarrow 00:55:01.730$ to see as they pan

NOTE Confidence: 0.9954277

 $00:55:01.730 \longrightarrow 00:55:02.530$ out. It's a it's a

NOTE Confidence: 0.9954277

 $00:55:02.530 \longrightarrow 00:55:03.190$ good idea.

NOTE Confidence: 0.9335475

 $00:55:03.569 \longrightarrow 00:55:04.545$ Did did you have a

NOTE Confidence: 0.9335475

 $00:55:04.625 \longrightarrow 00:55:05.125$ question?

NOTE Confidence: 0.97098863

 $00{:}55{:}06.224 --> 00{:}55{:}06.724 \ \mathrm{Yeah}.$

NOTE Confidence: 0.9015487

 $00:55:17.200 \longrightarrow 00:55:19.200$ Is is autoimmune, like is

NOTE Confidence: 0.9015487

 $00:55:19.200 \longrightarrow 00:55:19.700$ autoimmune

 $00:55:20.080 \longrightarrow 00:55:20.580$ toxicity?

NOTE Confidence: 0.9479253

 $00{:}55{:}21.680 {\:{\mbox{--}}}{\:{\mbox{-}}} 00{:}55{:}24.000$ So well, autoimmune meaning anti

NOTE Confidence: 0.9479253

 $00:55:24.000 \longrightarrow 00:55:24.500$ antibody.

NOTE Confidence: 0.92439127

 $00:55:25.120 \longrightarrow 00:55:26.719$ Yeah. So so,

NOTE Confidence: 0.81073403

 $00:55:32.005 \longrightarrow 00:55:34.105$ antihuman antibodies or anti

NOTE Confidence: 0.97260547

 $00:55:34.725 \longrightarrow 00:55:35.705$ conjugate antibodies

NOTE Confidence: 0.96418935

 $00:55:36.085 \longrightarrow 00:55:37.205$ don't seem to be a

NOTE Confidence: 0.96418935

 $00:55:37.205 \longrightarrow 00:55:38.565$ big problem with these. It's

NOTE Confidence: 0.96418935

 $00{:}55{:}38.565 {\:\dashrightarrow\:} 00{:}55{:}39.765$ it's a good question because

NOTE Confidence: 0.96418935

00:55:39.765 --> 00:55:40.885 you would expect you've, you

NOTE Confidence: 0.96418935

 $00:55:40.885 \longrightarrow 00:55:41.844$ know, you've got a a

NOTE Confidence: 0.96418935

 $00:55:41.844 \longrightarrow 00:55:44.350$ humanized antibody. You've got derivation

NOTE Confidence: 0.96418935

 $00:55:44.489 \longrightarrow 00:55:45.469$ of that antibody.

NOTE Confidence: 0.9988389

00:55:45.770 --> 00:55:46.830 Could that be immunogenic?

NOTE Confidence: 0.96594995

 $00:55:48.410 \longrightarrow 00:55:49.930$ It's it hasn't been a

NOTE Confidence: 0.96594995

 $00:55:49.930 \longrightarrow 00:55:50.670$ a problem.

00:55:52.570 --> 00:55:53.950 You don't see much hypersensitivity

NOTE Confidence: 0.9202275

 $00:55:54.410 \longrightarrow 00:55:55.070$ with these.

NOTE Confidence: 0.8636359

 $00:55:55.770 \longrightarrow 00:55:56.650$ I mean, you can't at,

NOTE Confidence: 0.8636359

00:55:56.650 --> 00:55:57.710 you know, low percentages.

NOTE Confidence: 0.9814002

00:55:58.570 --> 00:56:00.545 But but antibody you know,

NOTE Confidence: 0.9814002

 $00:56:00.545 \longrightarrow 00:56:02.625$ anti ADC antibodies haven't been

NOTE Confidence: 0.9814002

00:56:02.625 --> 00:56:03.605 clinically significant,

NOTE Confidence: 0.9827094

 $00{:}56{:}04.145 \dashrightarrow 00{:}56{:}05.585$ and autoimmune disease really hasn't

NOTE Confidence: 0.9827094

 $00:56:05.585 \longrightarrow 00:56:06.545$ been. You know, whether the

NOTE Confidence: 0.9827094

 $00:56:06.545 \longrightarrow 00:56:07.825$ the pneumonitis that we see

NOTE Confidence: 0.9827094

 $00:56:07.825 \longrightarrow 00:56:09.265$ could be an autoimmune reaction

NOTE Confidence: 0.9827094

00:56:09.265 --> 00:56:10.944 is certainly possible, but but

NOTE Confidence: 0.9827094

 $00:56:10.944 \longrightarrow 00:56:12.385$ we other than that, we

NOTE Confidence: 0.9827094

00:56:12.385 --> 00:56:13.605 really haven't seen it.

NOTE Confidence: 0.96399003

00:56:24.769 --> 00:56:26.390 Yeah. So, you know, meaning

 $00:56:26.450 \longrightarrow 00:56:28.130$ if the ADC bot is

NOTE Confidence: 0.96399003

 $00:56:28.130 \longrightarrow 00:56:29.845$ is encounters an immune cell,

NOTE Confidence: 0.96399003

 $00:56:29.845 \longrightarrow 00:56:30.885$ it kills it because of

NOTE Confidence: 0.96399003

 $00:56:30.885 \longrightarrow 00:56:31.625$ the cytotoxic

NOTE Confidence: 0.9441903

00:56:31.925 --> 00:56:33.285 moiety. Yeah. I think that

NOTE Confidence: 0.9441903

00:56:33.285 --> 00:56:35.625 that's that's certainly possible.

NOTE Confidence: 0.980385

00:56:36.805 --> 00:56:37.205 But,

NOTE Confidence: 0.9054052

 $00:56:37.605 \longrightarrow 00:56:38.905$ and then that's a good

NOTE Confidence: 0.9054052

 $00:56:39.045 \longrightarrow 00:56:39.545$ thought.

NOTE Confidence: 0.90857244

00:56:40.085 --> 00:56:41.364 Fortunately, I said clinically, it

NOTE Confidence: 0.90857244

 $00:56:41.364 \longrightarrow 00:56:42.405$ just really hasn't been an

NOTE Confidence: 0.90857244

 $00:56:42.405 \longrightarrow 00:56:42.905$ issue.

NOTE Confidence: 0.4563213

 $00:56:49.680 \longrightarrow 00:56:50.160$ Pan,

NOTE Confidence: 0.796416

 $00{:}56{:}51.200 \dashrightarrow 00{:}56{:}52.319$ I had, like, twenty questions,

NOTE Confidence: 0.796416

 $00{:}56{:}52.319 \dashrightarrow 00{:}56{:}54.020$ but I'll Absolutely. Eliminate them.

NOTE Confidence: 0.987937

 $00:56:55.040 \longrightarrow 00:56:55.619$ So so

 $00:56:56.305 \longrightarrow 00:56:57.585$ with with the ultra low,

NOTE Confidence: 0.97009665

 $00{:}56{:}57.585 \dashrightarrow 00{:}56{:}58.705$ you're you're assuming that you're

NOTE Confidence: 0.97009665

 $00:56:58.705 \longrightarrow 00:56:59.844$ dealing with with

NOTE Confidence: 0.9561364

00:57:00.225 --> 00:57:01.665 probably a small percentage of

NOTE Confidence: 0.9561364

 $00:57:01.665 \longrightarrow 00:57:03.045$ cells that are actually expressing.

NOTE Confidence: 0.91358006

 $00:57:04.225 \longrightarrow 00:57:05.585$ By definition. And I guess

NOTE Confidence: 0.91358006

 $00:57:05.585 \longrightarrow 00:57:06.625$ the I understand the idea

NOTE Confidence: 0.91358006

00:57:06.625 --> 00:57:07.825 of cathepsins doing this. But

NOTE Confidence: 0.91358006

 $00:57:07.825 \longrightarrow 00:57:08.705$ I guess the other question

NOTE Confidence: 0.91358006

 $00:57:08.705 \longrightarrow 00:57:10.325$ is for the spreading effect,

NOTE Confidence: 0.91358006

 $00.57:10.599 \longrightarrow 00.57:11.079$ do we think this is

NOTE Confidence: 0.91358006

00:57:11.079 --> 00:57:12.440 apoptotic cell death, or do

NOTE Confidence: 0.91358006

 $00:57:12.440 \longrightarrow 00:57:13.079$ we think this is cell

NOTE Confidence: 0.91358006

 $00:57:13.079 \longrightarrow 00:57:14.760$ death that's actually messier? And

NOTE Confidence: 0.91358006 00:57:14.760 --> 00:57:15.420 if so,

 $00:57:16.440 \longrightarrow 00:57:18.140$ has anyone thought of immune

NOTE Confidence: 0.9764181

00:57:19.000 --> 00:57:19.740 in combination,

NOTE Confidence: 0.80875677

00:57:20.119 --> 00:57:21.640 you know, like p one?

NOTE Confidence: 0.80875677

00:57:21.640 --> 00:57:22.760 So I didn't talk about

NOTE Confidence: 0.80875677

00:57:22.760 --> 00:57:23.880 biomarkers. I'm sorry. I was

NOTE Confidence: 0.80875677

 $00{:}57{:}23.880 \to 00{:}57{:}24.599$ just last night. I don't

NOTE Confidence: 0.80875677

00:57:24.599 --> 00:57:25.725 wanna forget. Forget. Brady and

NOTE Confidence: 0.80875677

00:57:25.725 --> 00:57:27.405 Anna's thing. I know David

NOTE Confidence: 0.80875677

00:57:27.405 --> 00:57:28.705 Brim is gonna be doing,

NOTE Confidence: 0.95770425

00:57:29.165 --> 00:57:30.525 QIF. Are you also gonna

NOTE Confidence: 0.95770425

 $00{:}57{:}30.525 \dashrightarrow 00{:}57{:}31.485$ be doing IHC at the

NOTE Confidence: 0.95770425

00:57:31.485 --> 00:57:32.285 same time? Because I think

NOTE Confidence: 0.95770425

 $00:57:32.285 \longrightarrow 00:57:33.325$ you sort of I go

NOTE Confidence: 0.95770425

 $00:57:33.325 \longrightarrow 00:57:34.305$ on and do both

NOTE Confidence: 0.96031785

00:57:34.925 --> 00:57:36.285 because I mean, at least

NOTE Confidence: 0.96031785

00:57:36.285 --> 00:57:37.485 David's not here. Right? He's

00:57:37.485 --> 00:57:38.145 been testing,

NOTE Confidence: 0.99489754 $00:57:39.730 \longrightarrow 00:57:40.230$ you NOTE Confidence: 0.8530746

00:57:42.850 --> 00:57:44.370 know, Yeah. We're we're actually

NOTE Confidence: 0.8530746

 $00:57:44.690 \longrightarrow 00:57:45.410$ see if it's covered because

NOTE Confidence: 0.8530746

 $00:57:45.490 \longrightarrow 00:57:46.850$ Yeah. So the actual correlate.

NOTE Confidence: 0.8530746

00:57:46.850 --> 00:57:48.630 Yeah. Yeah. The actual analysis

NOTE Confidence: 0.8530746

 $00.57.48.770 \longrightarrow 00.57.49.970$ plan is to do multiple

NOTE Confidence: 0.8530746

 $00:57:49.970 \longrightarrow 00:57:51.430 \text{ HER2 assays, both}$

NOTE Confidence: 0.9982893

 $00:57:51.744 \longrightarrow 00:57:52.724$ protein and genomics

NOTE Confidence: 0.9503128

00:57:53.105 --> 00:57:53.984 to try to come up

NOTE Confidence: 0.9503128

 $00:57:53.984 \longrightarrow 00:57:55.105$ with, you know, the best

NOTE Confidence: 0.9503128

 $00:57:55.105 \longrightarrow 00:57:55.605$ predictor.

NOTE Confidence: 0.923928

00:57:56.705 --> 00:57:58.244 So good question.

NOTE Confidence: 0.9774887

00:57:59.984 --> 00:58:01.685 In terms of of immunogenic

NOTE Confidence: 0.9774887

 $00:58:01.825 \longrightarrow 00:58:02.865$ cell death, it certainly looks

 $00:58:02.865 \longrightarrow 00:58:04.244$ like these are causing immunogenic

NOTE Confidence: 0.9774887

 $00:58:04.385 \longrightarrow 00:58:05.125$ cell death.

NOTE Confidence: 0.95738256

00:58:06.000 --> 00:58:07.920 You know, again, the payloads

NOTE Confidence: 0.95738256

 $00:58:07.920 \longrightarrow 00:58:10.080$ are standard chemotherapies, essentially, and

NOTE Confidence: 0.95738256

 $00:58:10.080 \longrightarrow 00:58:10.720$ you're getting a lot of

NOTE Confidence: 0.95738256

00:58:10.720 --> 00:58:11.760 it. You know, they're they're

NOTE Confidence: 0.95738256

 $00:58:11.760 \longrightarrow 00:58:13.120$ potent. So there's there are

NOTE Confidence: 0.95738256

 $00:58:13.120 \longrightarrow 00:58:14.480$ actually some interesting papers that

NOTE Confidence: 0.95738256

 $00:58:14.480 \longrightarrow 00:58:16.580$ you get particularly good immunogenic

NOTE Confidence: 0.95738256

 $00:58:16.720 \longrightarrow 00:58:17.840$ cell death for reasons that

NOTE Confidence: 0.95738256

 $00:58:17.840 \longrightarrow 00:58:18.640$ I I don't know how

NOTE Confidence: 0.95738256

 $00:58:18.640 \longrightarrow 00:58:20.155$ well they they've been validated.

NOTE Confidence: 0.9789109

 $00{:}58{:}21.255 \dashrightarrow 00{:}58{:}22.795$ And there there are combinations

NOTE Confidence: 0.9565772 00:58:23.255 --> 00:58:23.755 of,

NOTE Confidence: 0.8050108

00:58:24.295 --> 00:58:26.474 ADCs plus checkpoint inhibitors,

NOTE Confidence: 0.971712

 $00{:}58{:}26.775 \dashrightarrow 00{:}58{:}28.395$ which have shown some promise.

00:58:30.295 --> 00:58:31.770 In smaller studies, there's some

NOTE Confidence: 0.94778115

00:58:31.770 --> 00:58:33.210 studies that have shown incredible,

NOTE Confidence: 0.94778115

00:58:33.210 --> 00:58:34.490 you know, response rates, eighty,

NOTE Confidence: 0.94778115

 $00:58:34.490 \longrightarrow 00:58:35.310$ ninety percent,

NOTE Confidence: 0.95298046

 $00:58:36.570 \longrightarrow 00:58:37.850$ and with and there have

NOTE Confidence: 0.95298046

 $00:58:37.850 \longrightarrow 00:58:39.610$ been some small randomized trials

NOTE Confidence: 0.95298046

00:58:39.610 --> 00:58:41.150 of of TDM one plus,

NOTE Confidence: 0.9344907

00:58:41.930 --> 00:58:43.550 checkpoint inhibitors, which show

NOTE Confidence: 0.9195554

 $00:58:44.244 \longrightarrow 00:58:46.025$ a signal, but not overwhelming

NOTE Confidence: 0.9195554

 $00:58:46.165 \longrightarrow 00:58:47.785$ signal. So I think,

NOTE Confidence: 0.98327994

 $00:58:49.925 \longrightarrow 00:58:51.065$ we'll have to wait,

NOTE Confidence: 0.99908936 00:58:51.765 --> 00:58:52.265 for NOTE Confidence: 0.8945533

 $00:58:52.645 \longrightarrow 00:58:54.085$ there are randomized trials right

NOTE Confidence: 0.8945533

 $00:58:54.085 \longrightarrow 00:58:55.845$ now with the FOC two

NOTE Confidence: 0.8945533

00:58:55.845 --> 00:58:57.480 ADCs ADCs with or without,

 $00:58:58.100 \longrightarrow 00:58:59.000$ checkpoint inhibitors,

NOTE Confidence: 0.9924315

 $00:58:59.540 \longrightarrow 00:59:00.040$ being,

NOTE Confidence: 0.9413259

 $00:59:01.140 \longrightarrow 00:59:02.340$ being conducted, and we should

NOTE Confidence: 0.9413259

 $00:59:02.340 \longrightarrow 00:59:03.460$ have the results actually pretty

NOTE Confidence: 0.9413259

 $00:59:03.460 \longrightarrow 00:59:03.960$ quickly.

NOTE Confidence: 0.993603

 $00:59:04.420 \longrightarrow 00:59:05.380$ The hope is that those

NOTE Confidence: 0.993603

 $00:59:05.380 \longrightarrow 00:59:06.900$ are gonna be, you know,

NOTE Confidence: 0.993603

 $00:59:06.900 \longrightarrow 00:59:07.380$ really,

NOTE Confidence: 0.876835

 $00{:}59{:}07.780 \dashrightarrow 00{:}59{:}08.920$ impressive combinations,

NOTE Confidence: 0.9902297

 $00:59:09.460 \longrightarrow 00:59:11.060$ both because we know that,

NOTE Confidence: 0.9902297

00:59:11.060 --> 00:59:11.640 you know,

NOTE Confidence: 0.941445

 $00:59:11.975 \longrightarrow 00:59:13.975$ checkpoint inhibitors plus chemotherapy work

NOTE Confidence: 0.941445

 $00:59:13.975 \longrightarrow 00:59:15.495$ well in triple negative breast

NOTE Confidence: 0.941445

 $00:59:15.495 \longrightarrow 00:59:17.655$ cancer, but particularly because of

NOTE Confidence: 0.941445

 $00:59:17.655 \longrightarrow 00:59:18.935$ the the having an

NOTE Confidence: 0.941445

00:59:18.935 --> 00:59:20.615 antibody there, maybe you're getting

00:59:20.615 --> 00:59:21.115 more,

NOTE Confidence: 0.95162326

 $00{:}59{:}21.815 \dashrightarrow 00{:}59{:}23.575$ antigen presentation, maybe you're getting

NOTE Confidence: 0.95162326

00:59:23.575 --> 00:59:24.855 more immunogenic cell death that

NOTE Confidence: 0.95162326

00:59:24.855 --> 00:59:25.975 it's really gonna be,

NOTE Confidence: 0.98901457

 $00{:}59{:}27.200 \to 00{:}59{:}28.720$ truly synergistic. So it's a

NOTE Confidence: 0.98901457

 $00:59:28.720 \longrightarrow 00:59:29.920$ great question, and we'll have

NOTE Confidence: 0.98901457

 $00:59:29.920 \longrightarrow 00:59:30.720$ data by the end of

NOTE Confidence: 0.98901457

 $00:59:30.720 \longrightarrow 00:59:31.380$ this year

NOTE Confidence: 0.9984144

 $00:59:31.680 \longrightarrow 00:59:32.339$ on that.

NOTE Confidence: 0.8824676

 $00:59:33.359 \longrightarrow 00:59:33.859$ Barbara?

NOTE Confidence: 0.9458466

 $00:59:39.325 \longrightarrow 00:59:41.565$ Wonderful talk. And I'm so

NOTE Confidence: 0.9458466

00:59:41.565 --> 00:59:43.885 fascinated by the HER2 low

NOTE Confidence: 0.9458466

00:59:43.885 --> 00:59:44.865 because, I guess,

NOTE Confidence: 0.9707919

 $00:59:45.405 \longrightarrow 00:59:46.205$ I think we have some

NOTE Confidence: 0.9707919

 $00:59:46.205 \longrightarrow 00:59:47.165$ head and neck cancers that

 $00:59:47.165 \longrightarrow 00:59:48.625$ are like that. But so,

NOTE Confidence: 0.9707919

 $00{:}59{:}48.765 \dashrightarrow 00{:}59{:}49.565$ you know, in the in

NOTE Confidence: 0.9707919

 $00:59:49.565 \longrightarrow 00:59:50.305$ the amplified,

NOTE Confidence: 0.95731205

 $00:59:50.845 \longrightarrow 00:59:51.645$ you always have the same

NOTE Confidence: 0.95731205

00:59:51.645 --> 00:59:52.760 target, and you're just changing

NOTE Confidence: 0.95731205

 $00{:}59{:}52.760 \dashrightarrow 00{:}59{:}53.800$ your payload, you're changing your

NOTE Confidence: 0.95731205

 $00:59:53.800 \longrightarrow 00:59:54.680$ link area, and it keeps

NOTE Confidence: 0.95731205

 $00.59:54.680 \longrightarrow 00:59:55.579$ working for years.

NOTE Confidence: 0.9834628

 $00:59:56.040 \longrightarrow 00:59:57.260$ And in the HER2

NOTE Confidence: 0.99285215 00:59:57.640 --> 00:59:58.140 low,

NOTE Confidence: 0.96799016

 $00{:}59{:}59.079 \dashrightarrow 01{:}00{:}00.359$ I'm assuming that to the

NOTE Confidence: 0.96799016

 $01:00:00.359 \longrightarrow 01:00:01.740$ extent that HER2

NOTE Confidence: 0.99887335

 $01:00:02.040 \longrightarrow 01:00:03.420$ is doing something biologically,

NOTE Confidence: 0.9781745

 $01:00:03.720 \longrightarrow 01:00:04.540$ it's heterodimerizing

NOTE Confidence: 0.96402425

01:00:05.079 --> 01:00:07.635 with EGFR or HER3. Right?

NOTE Confidence: 0.9385328

 $01:00:08.035 \longrightarrow 01:00:09.635$ And so I wondered either

01:00:09.635 --> 01:00:11.415 with a panHER kinase inhibitor

NOTE Confidence: 0.9801036 01:00:12.035 --> 01:00:12.535 or, NOTE Confidence: 0.9713469

01:00:12.995 --> 01:00:14.595 you know, cetuximab or something

NOTE Confidence: 0.9713469

 $01:00:14.595 \longrightarrow 01:00:15.795$ like that, have there been

NOTE Confidence: 0.9713469

01:00:15.795 --> 01:00:17.335 attempts to kinda cotarget

NOTE Confidence: 0.94699407

 $01:00:18.355 \longrightarrow 01:00:20.130$ what HER2 is is hanging

NOTE Confidence: 0.94699407

 $01:00:20.130 \longrightarrow 01:00:21.170$ out with in the in

NOTE Confidence: 0.94699407

 $01:00:21.170 \longrightarrow 01:00:22.770$ those cancers? Yeah. So great

NOTE Confidence: 0.94699407

01:00:22.770 --> 01:00:23.990 question as always, Barbara.

NOTE Confidence: 0.9857225

01:00:25.010 --> 01:00:26.529 So as I was gonna

NOTE Confidence: 0.9857225

 $01:00:26.529 \longrightarrow 01:00:27.410$ tell Mike, you know, so

NOTE Confidence: 0.9857225

 $01{:}00{:}27.410 \dashrightarrow 01{:}00{:}29.109$ we didn't talk about biomarkers

NOTE Confidence: 0.9857225

 $01{:}00{:}29.170 \dashrightarrow 01{:}00{:}30.450$ or resistance. We also didn't

NOTE Confidence: 0.9857225

 $01:00:30.450 \longrightarrow 01:00:31.349$ talk about combinations.

NOTE Confidence: 0.9769732

 $01:00:32.865 \longrightarrow 01:00:34.465$ Combining things with ADCs has

01:00:34.465 --> 01:00:35.745 been more complicated than we

NOTE Confidence: 0.9769732

 $01:00:35.745 \longrightarrow 01:00:37.185$ would like. The the checkpoint

NOTE Confidence: 0.9769732

 $01:00:37.185 \longrightarrow 01:00:38.645$ inhibitors actually are an exception.

NOTE Confidence: 0.99231464

 $01:00:40.145 \longrightarrow 01:00:41.505$ There have been studies looking

NOTE Confidence: 0.99231464

 $01:00:41.505 \longrightarrow 01:00:43.185$ at kinase inhibitors for the

NOTE Confidence: 0.99231464

01:00:43.185 --> 01:00:44.485 reason you talked about.

NOTE Confidence: 0.9790307

 $01:00:46.040 \longrightarrow 01:00:47.320$ So far, the data don't

NOTE Confidence: 0.9790307

 $01:00:47.320 \longrightarrow 01:00:48.140$ look great.

NOTE Confidence: 0.9438835

01:00:50.760 --> 01:00:51.720 It's funny you bring that

NOTE Confidence: 0.9438835

 $01:00:51.720 \longrightarrow 01:00:53.080$ up. Jingde and I are

NOTE Confidence: 0.9438835

 $01{:}00{:}53.080 --> 01{:}00{:}53.560 \; just,$

NOTE Confidence: 0.9540246

01:00:53.960 --> 01:00:55.500 in the process of submitting,

NOTE Confidence: 0.8342963 01:00:56.609 --> 01:00:57.109 a NOTE Confidence: 0.52796936

 $01:00:58.455 \longrightarrow 01:00:58.955$ concept

NOTE Confidence: 0.973918

 $01{:}00{:}59.255 --> 01{:}00{:}59.755 \text{ for,}$

NOTE Confidence: 0.9405926

 $01:01:00.775 \longrightarrow 01:01:02.055$ the combination of a HER2

 $01:01:02.055 \longrightarrow 01:01:04.055$ ADC plus the HER3 ADC

NOTE Confidence: 0.9405926

01:01:04.055 --> 01:01:05.195 that you're working on,

NOTE Confidence: 0.96484464

 $01:01:05.735 \longrightarrow 01:01:07.255$ for that very reason. Also,

NOTE Confidence: 0.96484464

01:01:07.255 --> 01:01:08.715 knowing that HER3 gets upregulated

NOTE Confidence: 0.96484464

 $01:01:08.855 \longrightarrow 01:01:09.915$ when you block HER2,

NOTE Confidence: 0.991449

01:01:10.480 --> 01:01:11.440 can you, you know, can

NOTE Confidence: 0.991449

01:01:11.440 --> 01:01:12.960 you leverage that by combining

NOTE Confidence: 0.991449

 $01:01:12.960 \longrightarrow 01:01:13.860$ those two ADCs?

NOTE Confidence: 0.9943261

01:01:14.560 --> 01:01:15.300 But just

NOTE Confidence: 0.9830502

 $01:01:16.240 \longrightarrow 01:01:18.000$ from lots of unfortunate personal

NOTE Confidence: 0.9830502

01:01:18.000 --> 01:01:19.760 experience, combining ADCs with other

NOTE Confidence: 0.9830502

 $01:01:19.760 \longrightarrow 01:01:20.640$ drugs has not been as

NOTE Confidence: 0.9830502

01:01:20.640 --> 01:01:21.541 easy as we would have

NOTE Confidence: 0.9830502

 $01:01:21.701 \longrightarrow 01:01:22.201$ thought.

NOTE Confidence: 0.9666532

 $01:01:22.741 \longrightarrow 01:01:23.941$ Even TDM one, which, you

01:01:23.941 --> 01:01:25.301 know, is such a good

NOTE Confidence: 0.9666532

01:01:25.301 --> 01:01:27.321 toxicity profile, it's been hard.

NOTE Confidence: 0.9791586 01:01:28.021 --> 01:01:28.521 So NOTE Confidence: 0.8430106

01:01:30.901 --> 01:01:32.441 Alright. Thank you very