
Clinical Trials Flowcharts

March 2025

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To refer a patient:

To learn more about a specific trial, contact the MOG leader listed, or call the clinical trials hotline at 319-353-8155.

All calls to the clinical trials hotline will be returned within 48 hours.

The clinical trials team will then work with you to get your patient enrolled, when appropriate.

Clinical Trials Hotline
319-353-8155



Mimi McKay, MPH, BSN
Clinical Trial Navigator
marie-mckay@uiowa.edu

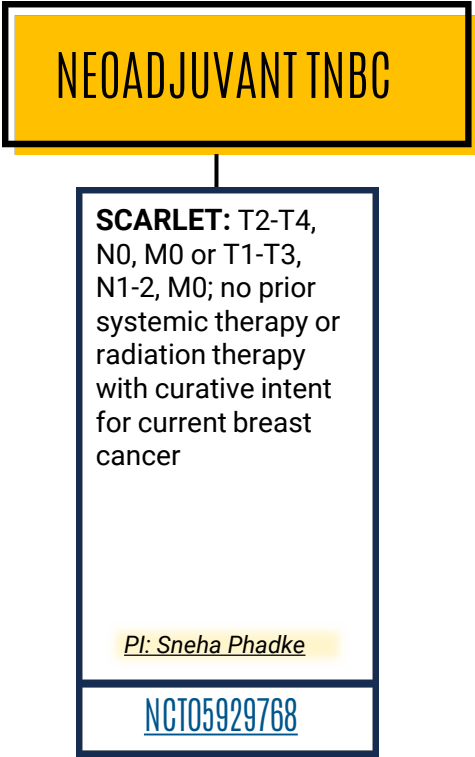
Breast Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

BREAST CANCER

OPEN

PENDING



BREAST CANCER

☐ OPEN

☐ PENDING

ADJUVANT

HER 2 -

TRIPLE NEGATIVE

ER +

Ascent05: Adequate excision and surgical removal of all clinical evidence of disease in the breast and/or LN and have adequately recovered from surgery

PI: Praveen Vikas

[NCT05633654](#)

Optim-ICE: T1cN1-2 or T2-4N0-2; no residual disease or LN after neoadjuvant therapy; neoadjuvant chemo + pembro x 6 cycles; < 12 weeks between surgery and randomization

PI: Sneha Phadke

[NCT05812807](#)

RaPHLRR: Locoregional recurrence; adequate local treatment for locoregional recurrence; Enrolled within 6 mo of last local treatment

PI: Sneha Phadke

[NCT05467891](#)

Cambria: must have had definitive locoregional therapy +/- adjuvant systemic therapy; completed at least 2 yrs (but no more than 5) of adjuvant ET (and is still receiving)

PI: Sneha Phadke

[NCT05774951](#)

BR009: premenopausal; postoperative pT1-3; ipsilateral nodes pN0 or pN1; if node negative, oncotype DX RS RS 21-25 or 16-20 with high clinical risk disease; if 1-3 nodes+ oncotype DX RS 26

PI: Sneha Phadke

[NCT05879926](#)

ADE-MI: HR+HER2- who are prescribed abemaciclib

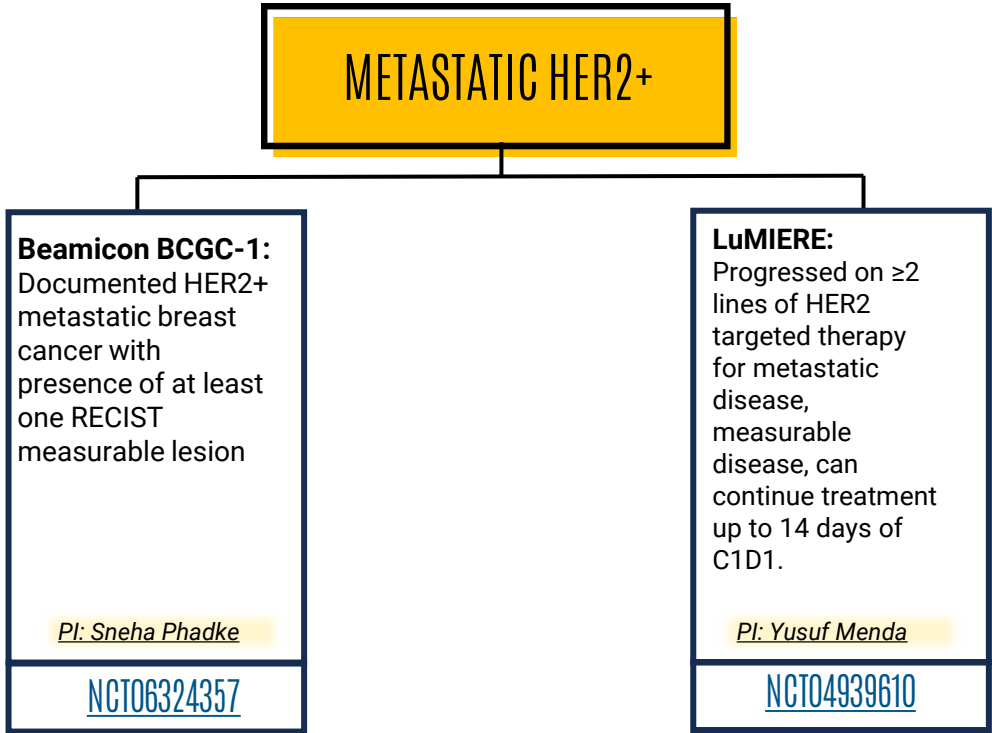
PI: Sneha Phadke

[NCT06169371](#)

BREAST CANCER

☐ OPEN

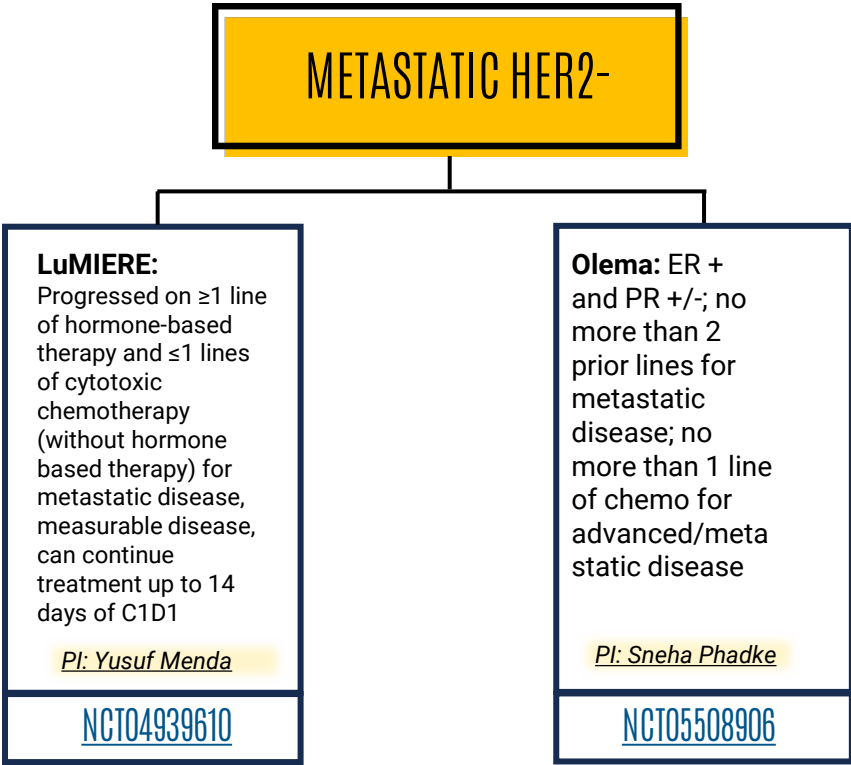
☐ PENDING



BREAST CANCER

☐ OPEN

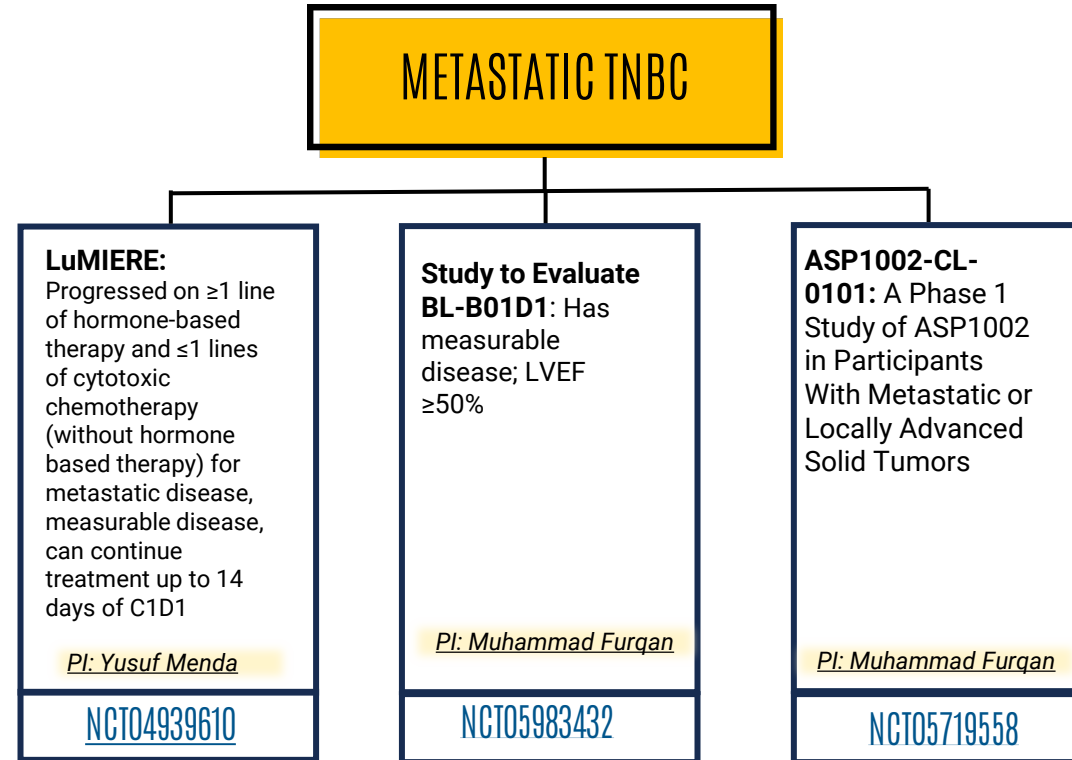
☐ PENDING



BREAST CANCER

☐ OPEN

☐ PENDING

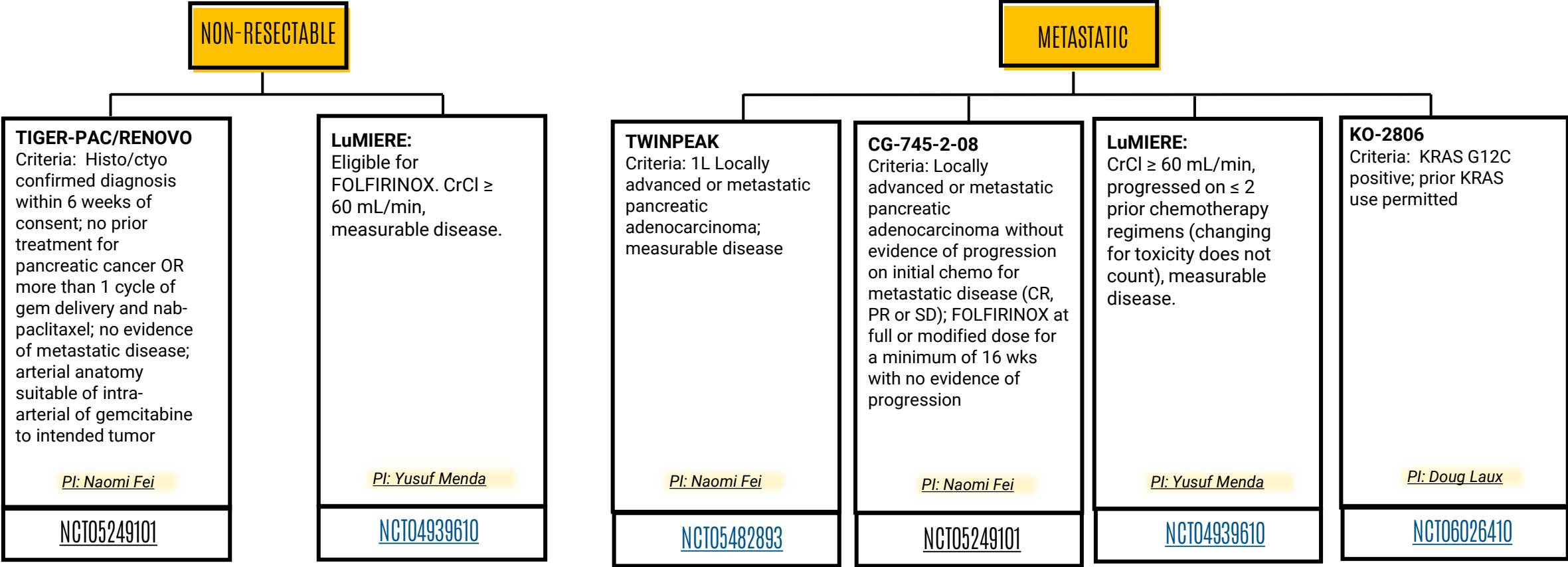


Gastrointestinal Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

PANCREATIC CANCER

☐ OPEN
 ☒ PENDING



COLORECTAL CANCER

☐ OPEN

☐ PENDING

NEOADJUVANT

Dostarlimab
Criteria: Biopsy proven Stage II or III dMMR amenable to en bloc surgical resection; biopsy specimen has enough tissue for 4-6 FFPE slides; absence of metastatic disease

PI: Saima Sharif

NCT05239546

ADJUVANT

NRG-GI008
Criteria: T1-3, N1/N1c confirmed adenocarcinoma with RO resection; no radiographic evidence of overt metastatic disease; distal extent of tumor ≥12 cm from anal verge on colonoscopy or above peritoneal reflection as documented during surgery or on path specimen; must have had en bloc complete gross resection of tumor (curative resection); microsatellite stable or intact mismatch repair proteins through CLIA approved testing

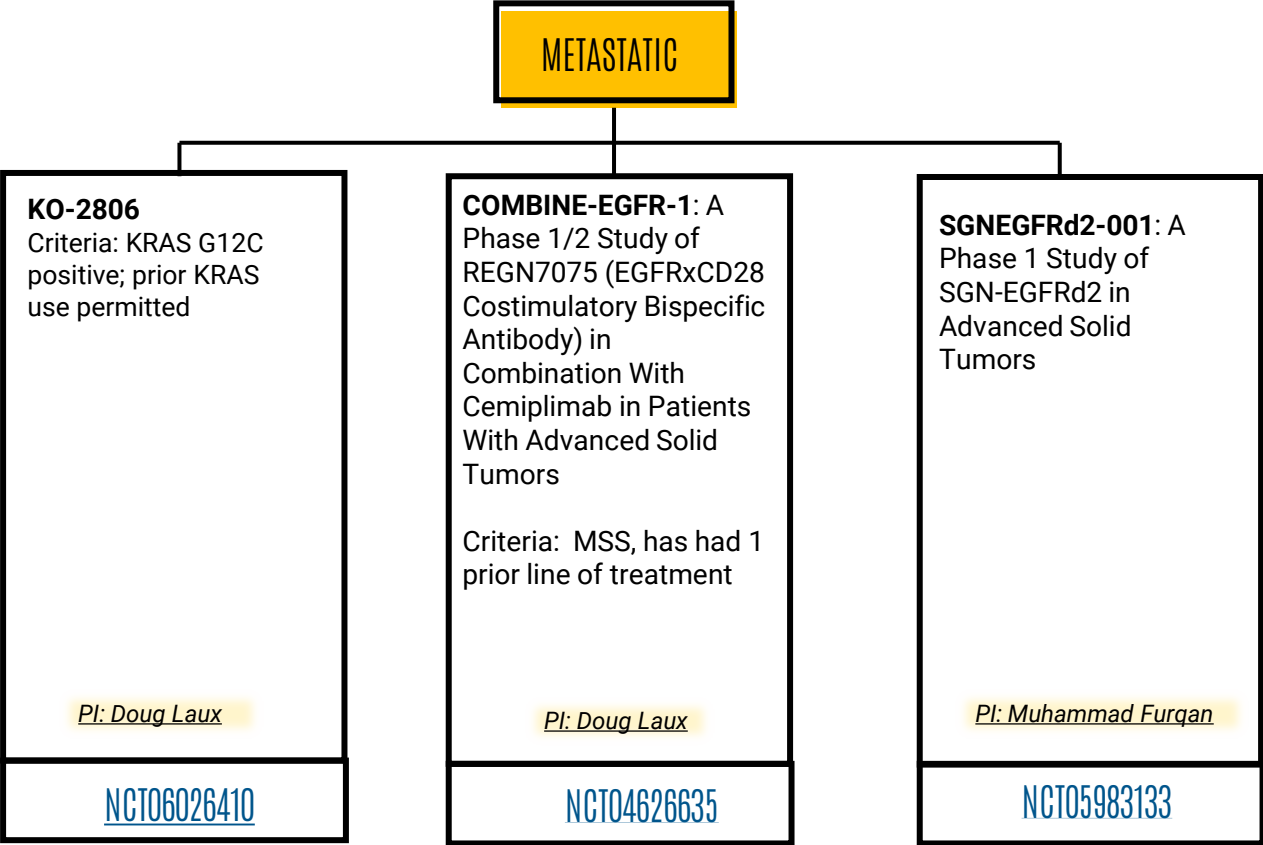
PI: Saima Sharif

NCT05174169

COLORECTAL CANCER

OPEN

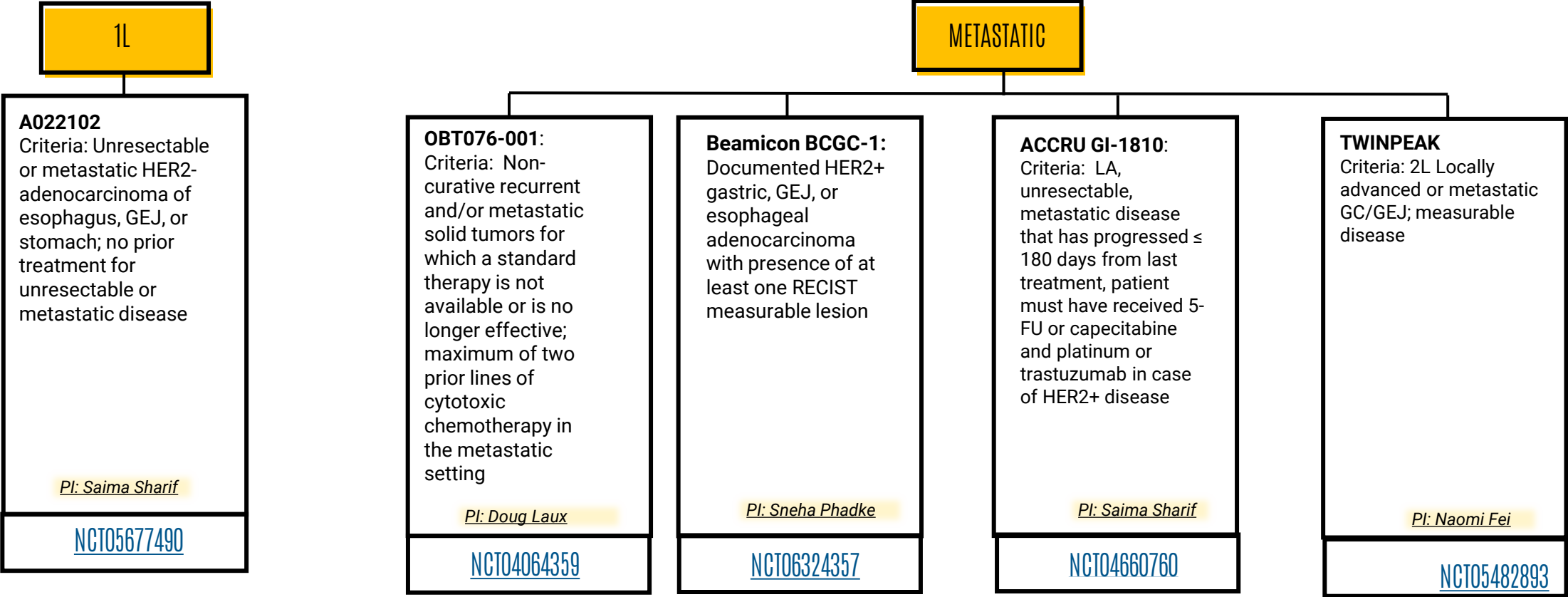
PENDING



GASTRIC/GASTROESOPHAGEAL CANCER

☐ OPEN

☐ PENDING



HEPATOCELLULAR CARCINOMA

☐ OPEN

☐ PENDING

UNRESECTABLE

ROUTE90:
Criteria: Confirmed diagnosis of HCC, LIRADS 5 or biopsy; One lesion \geq 2 cm in diameter, no more than 3 lesions; Max 3 lesions and single lesion size \leq 8 cm & sum tumor dimensions of \leq 12 cm; Evidence that $>$ 33% of the total liver volume is disease-free; No extra hepatic disease

PI: Michael Hummel

[NCT05953337](#)

Genitourinary Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

BLADDER CANCER

☐ OPEN

☐ PENDING

NMIBC

Adapt

Criteria: Histologically confirmed urothelial carcinoma of bladder (Ta, T1, or Tis) on TURBT; BCG unresponsive disease (persistent CIS with or without the presence of Ta or T1 tumors within 12 months of completion of BCG, or recurrent high-grade Ta or T1 tumors within 6 months of completion of adequate BCG therapy)

PI: Michael O'Donnell

[NCT03317158](#)

Bridge

Criteria: High-grade non-muscle invasive urothelial carcinoma of the bladder; must have all visible papillary tumor resected by the treating urologist at the site registering the patient; no prior intravesical therapy for bladder cancer with the exception of perioperative chemotherapy at the time of TURBT

PI: Michael O'Donnell

[NCT05538663](#)

NEOADJUVANT

EA8192

Criteria: High grade upper tract urothelial carcinoma proven by biopsy with 12 weeks of randomization; no component of small cell/neuroendocrine carcinoma; no evidence of metastatic disease or enlarged LN

PI: Umar Farooq

[NCT04628767](#)

V940-005

Criteria: muscle-invasive urothelial carcinoma

PI: Mohammed Milhem

[NCT06305767](#)

ADJUVANT

V940-005

Criteria: muscle-invasive urothelial carcinoma; high-risk pathologic disease after radical resection

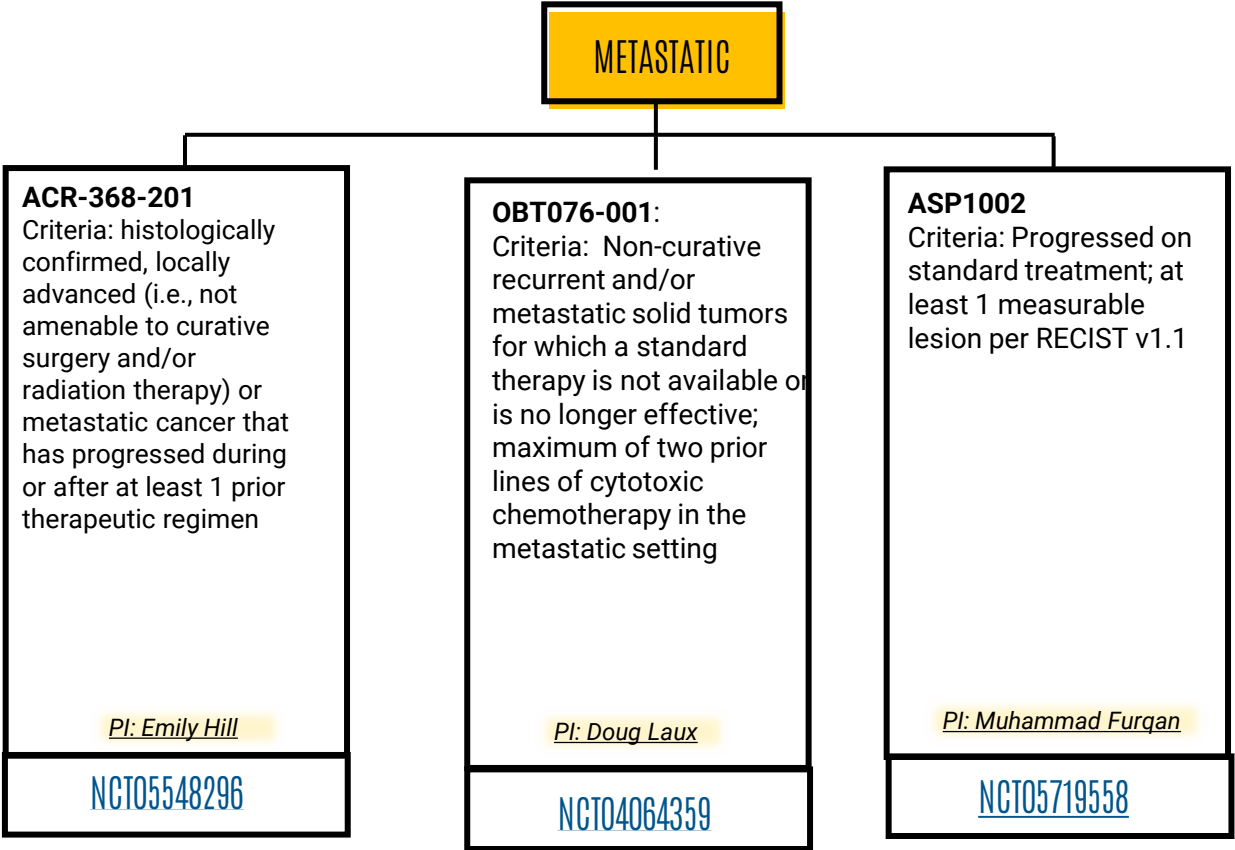
PI: Mohammed Milhem

[NCT06305767](#)

BLADDER CANCER

OPEN

PENDING



PROSTATE CANCER

☐ OPEN

☐ PENDING

METASTATIC HORMONE SENSITIVE

S1802
Criteria: Adenocarcinoma of prostate; no prior local therapy for prostate adenocarcinoma; evidence of metastatic disease on bone scan and CT or MRI; received no more than 28 weeks of standard systemic therapy(SST); no progression while on SST; must have surgically resectable disease per urology consult

PI: Joseph Caster

[NCT03678025](#)

METASTATIC CRPC

MK-5684-003
Criteria: Adenocarcinoma of prostate; progression while on ADT; has progressed on 1 novel hormonal agent; has received at least 1 but no more than 2 taxane based chemo regimens for metastatic CRPC

PI: Doug Laux

[NCT06136624](#)

Alphabreak:
Criteria: Open label, non-randomized. CrCl ≥ 60 mL/min, progressed after ≥2 of Pluvicto, no liver mets (phase 2), measurable disease

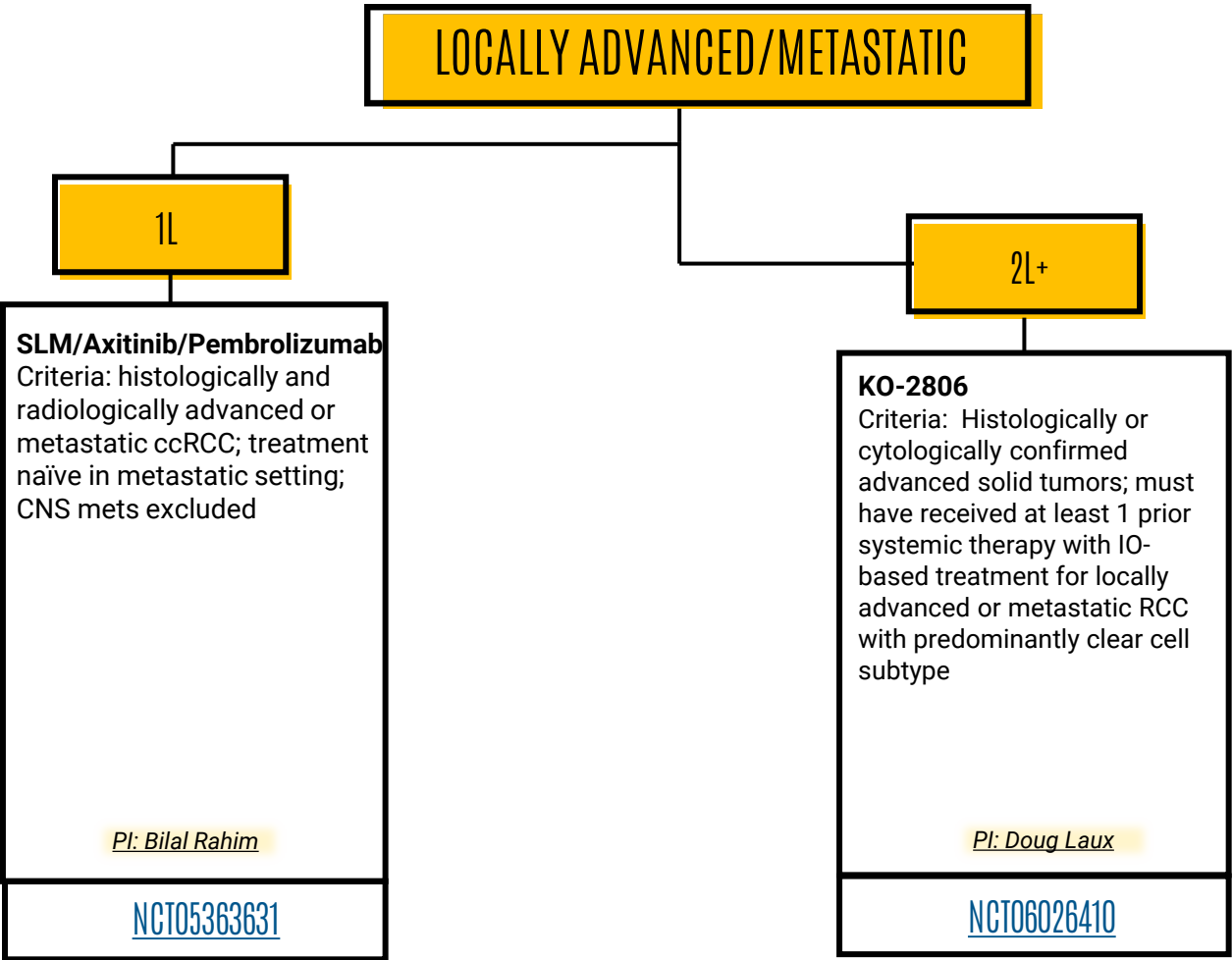
PI: Yusuf Menda
coPI: Kristin Plichta

[NCT06402331](#)

KIDNEY CANCER

OPEN

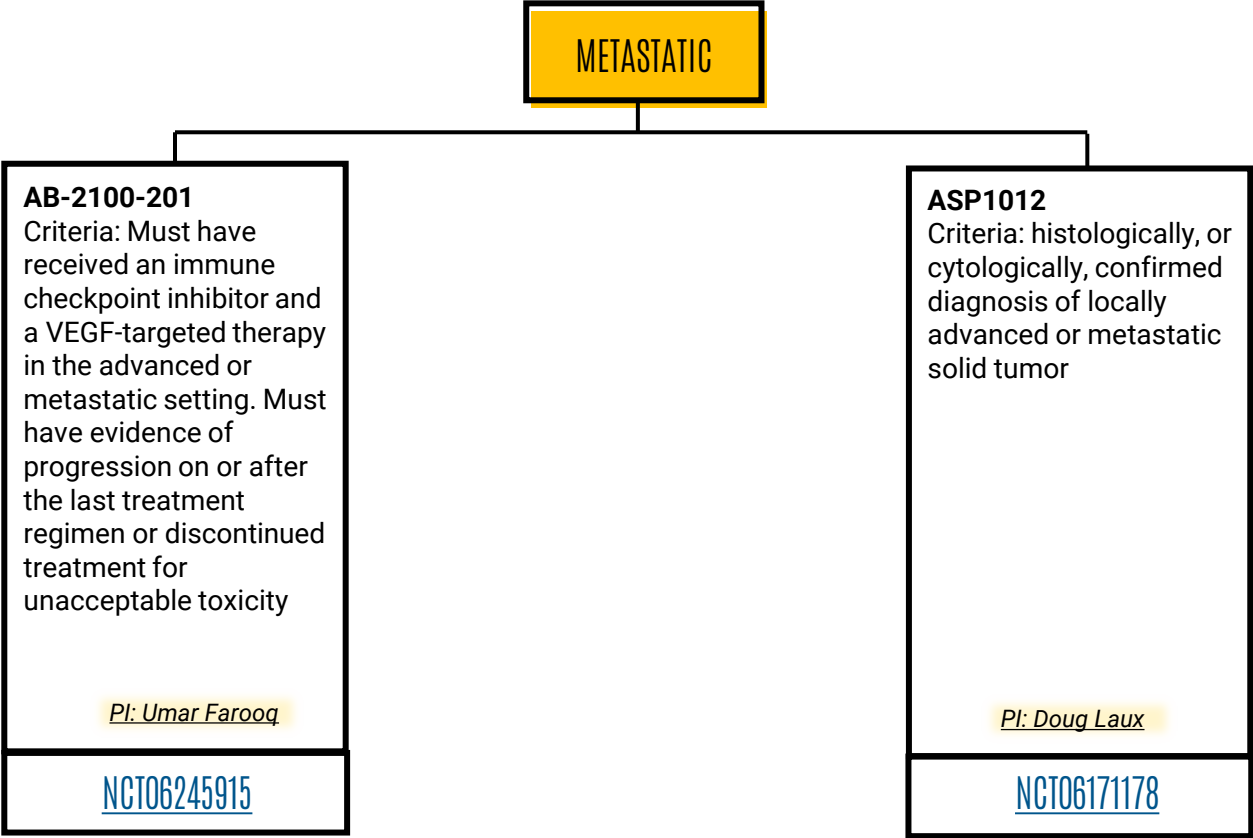
PENDING



KIDNEY CANCER

☐ OPEN

☐ PENDING



Gynecologic Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

OVARIAN CANCER

OPEN

PENDING

LOW GRADE SEROUS CARCINOMA

NRG-GY019 :
Criteria: Newly diagnosed, stage II-IV low-grade serous ovarian, fallopian tube and primary peritoneal cancers; must have undergone an attempt at maximal upfront cytoreductive surgery, with either optimal (≤ 1 cm diameter residual disease/nodule) or suboptimal residual disease (> 1 cm diameter residual disease/nodule) allowed; must enroll within 8 weeks of primary surgery
PI: David Bender

NCT04095364

HIGH GRADE SEROUS CARCINOMA

GOG-3078-GLORIOSA (Maintenance therapy):
Criteria: Recurrent (1st recurrence), platinum-sensitive high-grade serous epithelial ovarian, primary peritoneal, or fallopian tube cancer; FRa-High; subjects who have not progressed after second-line platinum-based chemotherapy plus bevacizumab; prior PARP required if BRCA mutated; must be randomized within 8 weeks from last dose of platinum-based triplet therapy
PI: David Bender

NCT05445778

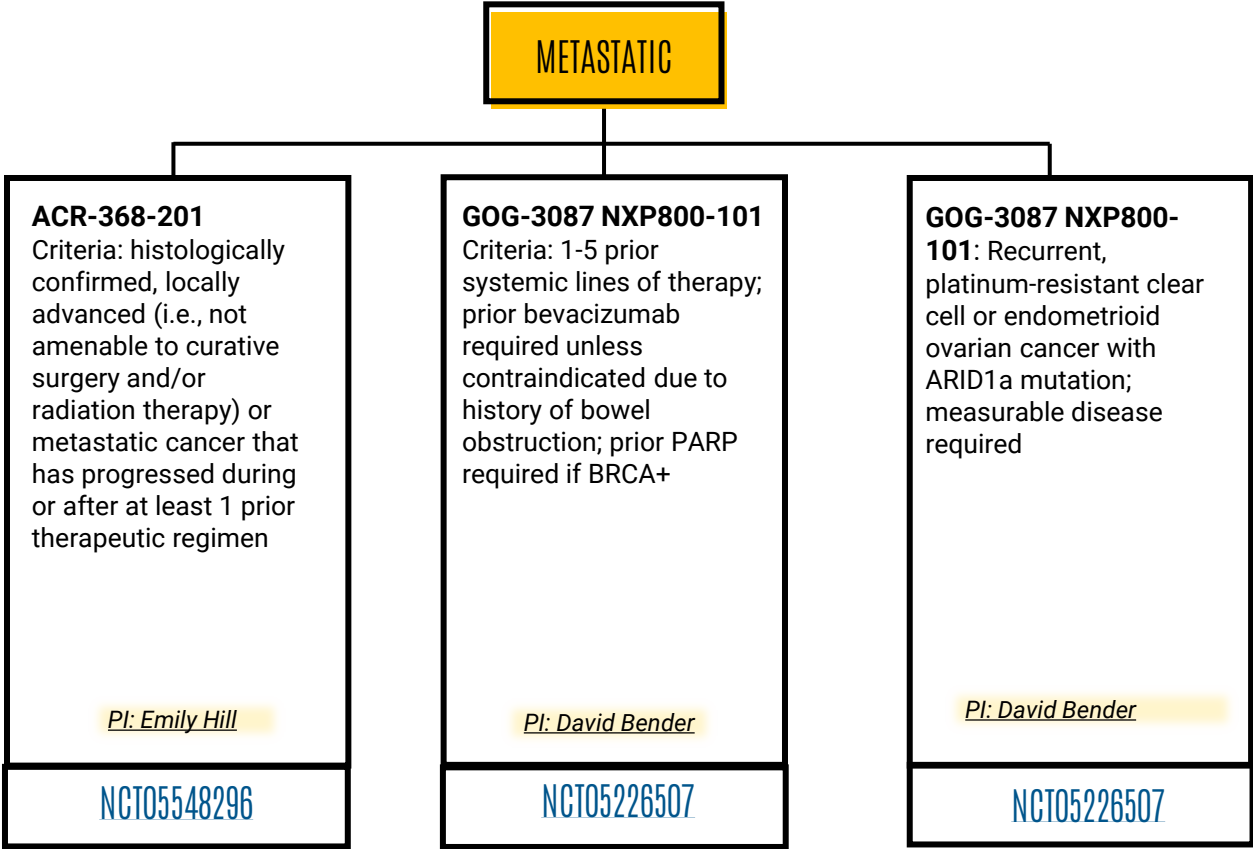
GOG-3086 REFRAme-01:
Criteria: Recurrent, platinum-resistant high-grade serous ovarian, fallopian tube, or primary peritoneal cancer; FOLR1 expression $\geq 25\%$ on central lab screening IHC testing; measurable disease required; Up to 3 prior regimens – no prior FOLR1-targeting ADC; prior bevacizumab required unless contraindicated
PI: David Bender

NCT05870748

OVARIAN CANCER

OPEN

PENDING



ENDOMETRIAL CANCER

☐ OPEN

☐ PENDING

NEWLY DIAGNOSED HER2+

NRG-GY026 :
Criteria: stage IA-IVB, non-recurrent, chemo-naive, HER2+ endometrial serous carcinoma or endometrial carcinosarcoma; must have myoinvasive disease; must be within 8 weeks of primary surgery (or endometrial biopsy in patients who never undergo hysterectomy) at the time of study registration; no prior radiation therapy, biologic, or targeted therapy for endometrial cancer
PI: David Bender

NCT05256225

RECURRENT dMMR

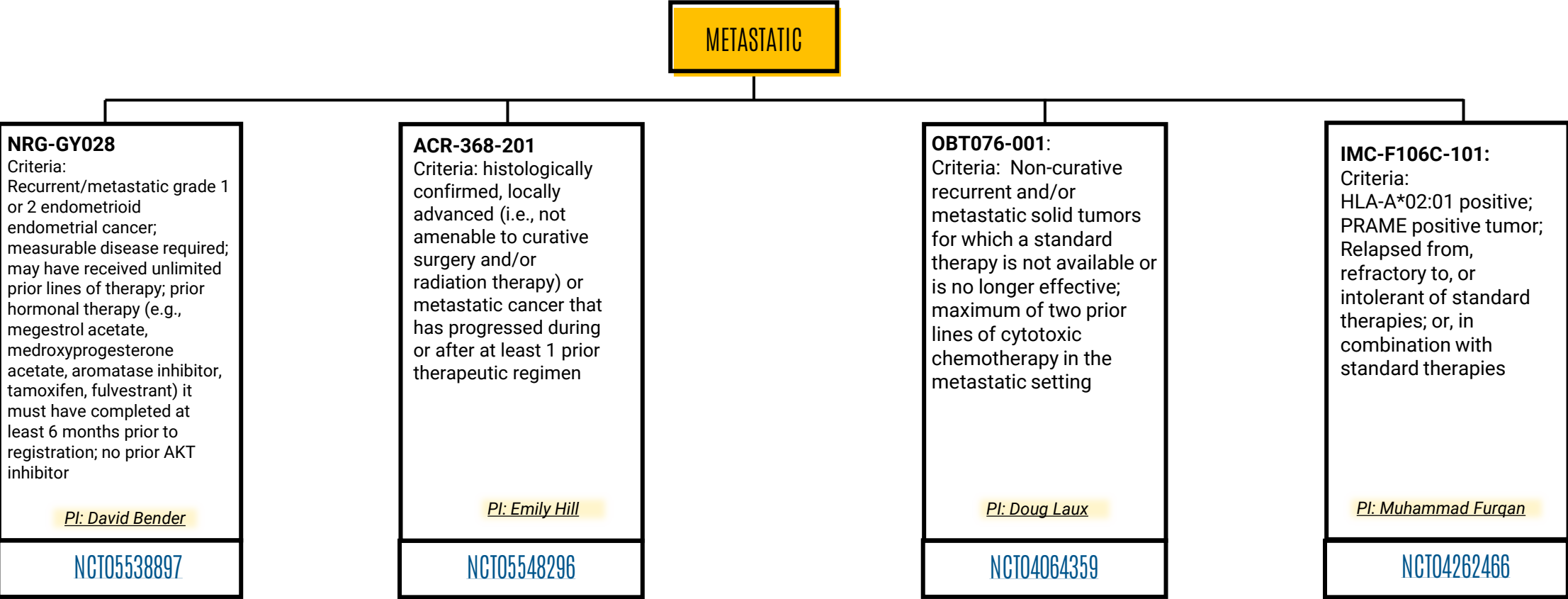
NRG-GY025:
Criteria: Recurrent MMR-deficient endometrial cancer; serous and carcinosarcoma subtypes excluded; measurable or detectable disease required; patients may have received up to 2 prior lines of systemic therapy; prior anti-PD1/PD-L1 therapy is allowed if given in combination with chemotherapy or radiation therapy in adjuvant or primary metastatic/recurrent settings; must have had a complete response and have disease progression/relapse with treatment-free interval of 12 months or more from last dose of therapy with immune check inhibition
PI: David Bender

NCT05112601

ENDOMETRIAL CANCER

OPEN

PENDING



CERVICAL CANCER

OPEN

PENDING

METASTATIC

BGB-A317-A3055-101: A Phase 1a/1b Study Investigating the Safety, Tolerability, Pharmacokinetics, Pharmacodynamics, and Preliminary Antitumor Activity of BGB-A3055, Alone and in Combination With Tislelizumab in Patients With Selected Advanced or Metastatic Solid Tumors

PI: Muhammad Furqan

NCT05935098

GERM CELL TUMOR

☐ OPEN

☐ PENDING

LOW OR STANDARD RISK

AGCT1531 :
Criteria: Low risk stage I immature teratoma (IT);
site: ovarian; tumor markers:
alpha-FP =< 1,000 ng/mL,
beta-HCG institutional
normal; all ages
Standard risk 2 (SR2)
Site: ovarian; stage: COG
stage II and III, FIGO stage IC,
II and III; histology: must
contain at least one of the
following: yolk sac tumor,
embryonal carcinoma, or
choriocarcinoma; age < 25

PI: David Dickens

NCT03067181

INTERMEDIATE OR POOR RISK

AGCT1532:
Criteria: Histologically or
cytologically confirmed germ
cell; or Exceptionally raised
tumour markers (AFP ≥
1000ng/mL and/or HCG ≥ 5000
IU/L) without histologic or
cytologic confirmation in the rare
case where pattern of
metastases consistent with GCT,
high tumour burden, and a need
to start therapy urgently; Primary
arising in testis, ovary, retro-
peritoneum, or mediastinum;
Intermediate or poor prognosis
as defined by IGCCC
classification³

PI: David Dickens

NCT02582697

BRCA1 OVARIAN CANCER RISK REDUCTION

OPEN

PENDING

INTERMEDIATE OR POOR RISK

NRG-CC008:
Criteria: Individuals 35-50 years of age, inclusive; positive CLIA-approved test results for pathogenic or likely pathogenic germline BRCA1 mutation in the patient; non-randomized prospective trial comparing the non-inferiority of salpingectomy to salpingo-oophorectomy to reduce the risk of ovarian cancer among BRCA1 carriers; patient choice of bilateral salpingectomy or bilateral salpingo-oophorectomy (with or without hysterectomy); no prior radiation to the abdomen/pelvis; no prior hormonal therapy within 90 days *PI: David Bender*

NCT04251052

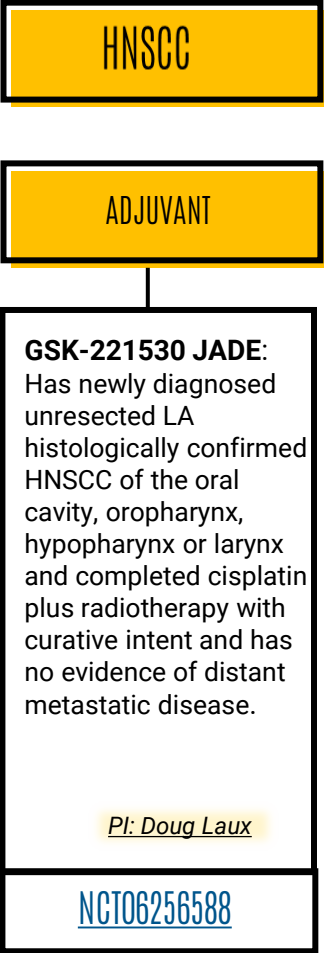
Head and Neck Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

HEAD AND NECK CANCER

☐ OPEN

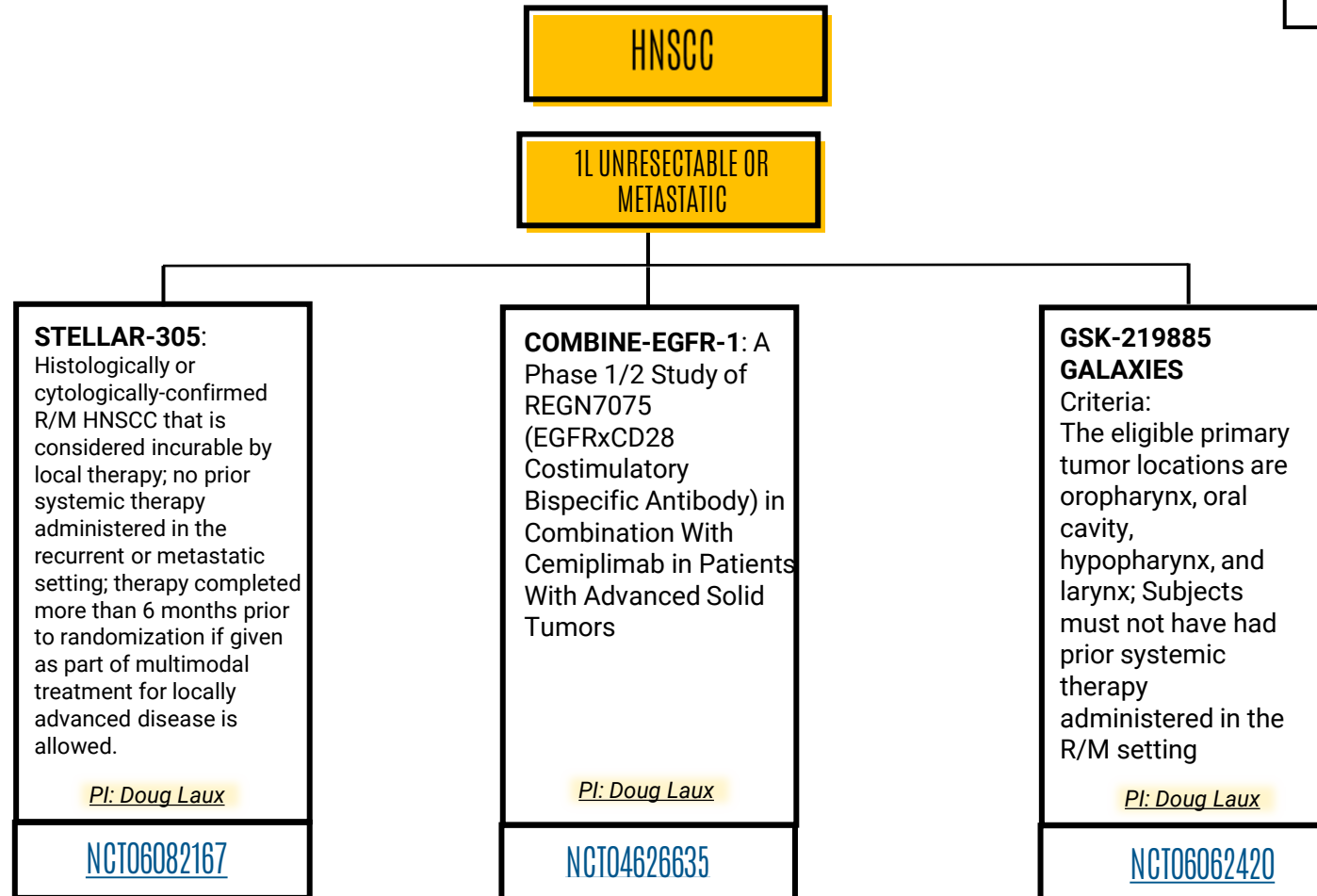
☐ PENDING



HEAD AND NECK CANCER

☐ OPEN

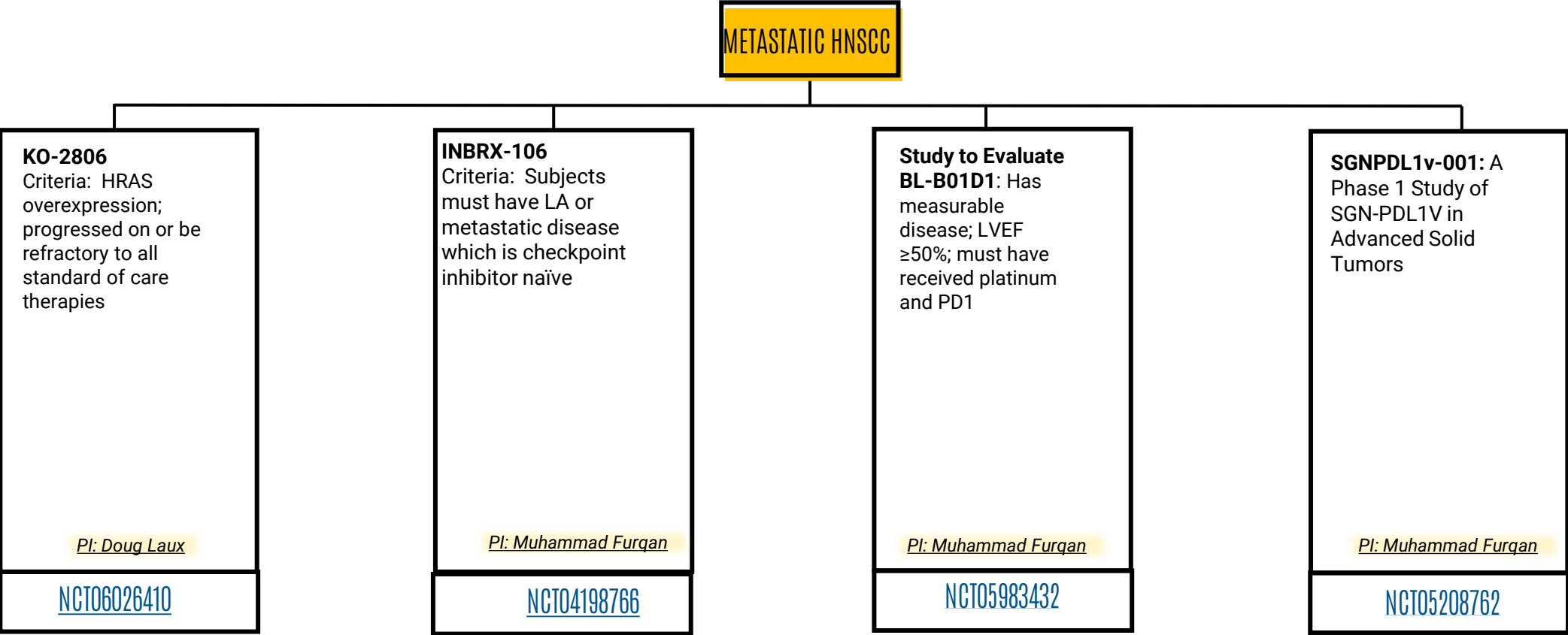
☐ PENDING



HEAD AND NECK CANCER

OPEN

PENDING



HEAD AND NECK CANCER

☐ OPEN

☐ PENDING

NASOPHARYNGEAL

**Study to Evaluate
BL-B01D1:** Has
measurable
disease; LVEF
≥50%; must have
received platinum
and PD1

PI: Muhammad Furqan

NCT05983432

HEAD AND NECK CANCER



☐ OPEN

☐ PENDING

THYROID CANCER

EA3231:
Dedifferentiated thyroid cancer; BRAF V600E+; must have been previously treated with or deemed ineligible for treatment with Iodine-131; must have had prior treatment lenvatinib and/or sorafenib

PI: Doug Laux

[NCT06475989](#)

NON-MELANOMA SKIN CANCER

☐ OPEN

☐ PENDING

CUTANEOUS SQUAMOUS
CELL

1L

COMBINE-EGFR-1: A
Phase 1/2 Study of
REGN7075
(EGFRxCD28
Costimulatory
Bispecific Antibody) in
Combination With
Cemiplimab in Patients
With Advanced Solid
Tumors

PI: Doug Laux

[NCT04626635](#)

MERKEL, BASAL, SCC

Replimune IGYTE
Criteria: Locally
advanced or
metastatic NMSC not
considered treatable
by surgery; must have
received 8 wks of anti-
PD1/PDL1 as their
last line of therapy
and progressed while
on treatment

PI: Doug Laux

[NCT: 03767348](#)

MERKEL CELL

HCRN MCC20-443
Criteria: Histological or
cytological evidence of
Merkel cell cancer per
AJCC, 8th ed; presence
of somatostatin
receptors by Ga-68
dotatate imaging;
progress on treatment
with anti-PD1/L1
administered either as
monotherapy or in
combination with other
check point inhibitors
or other therapies

PI: Doug Laux

[NCT: 05583708](#)

Leukemia

Clinical Trials

Clinical Trials Hotline: 319-353-8155

ACUTE MYELOID LEUKEMIA (AML)



OPEN



PENDING

NEWLY DIAGNOSED

MM1YA-S01:

Newly diagnosed untreated AML, high-risk AML; therapy-related AML; AML with myelodysplasia related changes are eligible; FLT3 and t(9;22) excluded

PI: *Prajwal Dhakal*

[NCT05554406](#)

MM1YA-CTG01:

Must have been assigned to this study based on presence of an actionable mutation following screening on MYELOMATCH; Age 18-59 at time of induction

PI: *Prajwal Dhakal*

[NCT05554393](#)

KO-MEN-007

Criteria: Newly diagnosed or relapsed/refractory AML with NPM1 or KMT2A rearrangement

PI: *Gerik Sutamtewagul*

[NCT: 05735184](#)

OncoVerity

A Study Comparing Venetoclax and Azacitidine Plus Cusatuzumab to Venetoclax and Azacitidine in Newly Diagnosed AML Ineligible for Intensive Therapy

PI: *Gerik Sutamtewagul*

[NCT06384261](#)

MYELOMATCH:

A Screening Study to Assign People With Myeloid Cancer to a Treatment Study or Standard of Care Treatment Within myeloMATCH

PI: *Prajwal Dhakal*

[NCT05564390](#)

MM10A-EA02:

Must have been assigned to this study based screening from MYELOMATCH; must be ≥60 years of age or <60 and better served by azanucleoside-based therapy rather than intensive therapy based on clinical status

PI: *Prajwal Dhakal*

[NCT06317649](#)

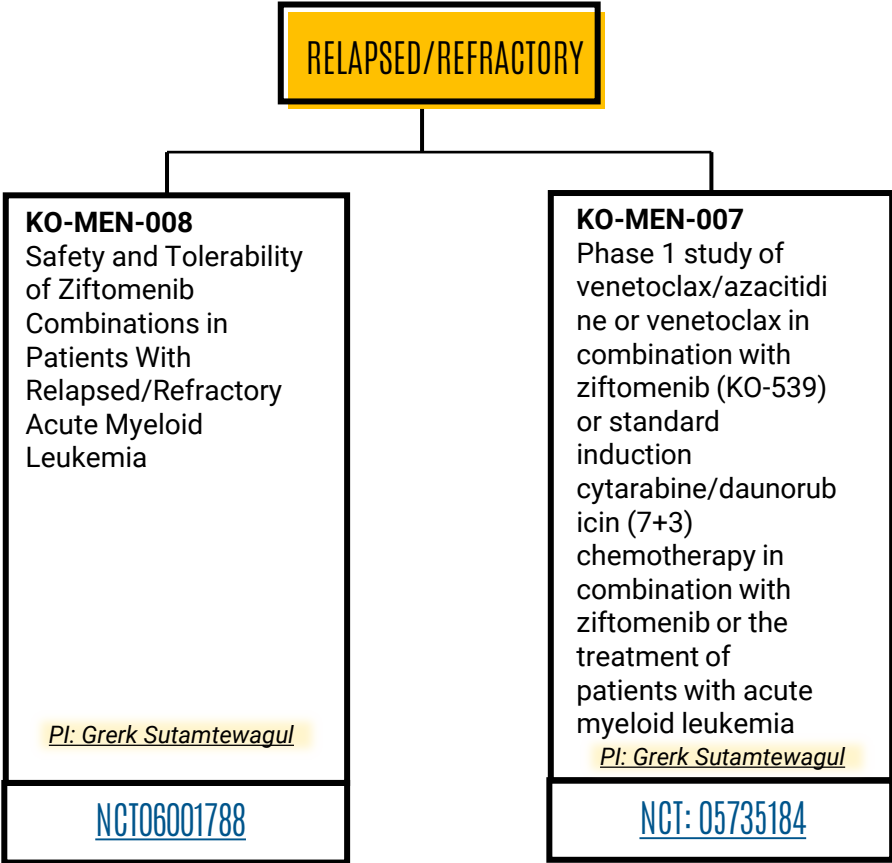
ACUTE MYELOID LEUKEMIA (AML)



OPEN



PENDING



MALIGNANT HEME (OTHER)

☐ OPEN

☐ PENDING

NEWLY DIAGNOSED MDS

SY-1425-301

Criteria: Must be RARA-positive based on investigational assay; diagnosis of MDS according to WHO classification and classified as very high, high, or intermediate risk per IPSS

PI: *Grerk Sutamtewagul*

[NCT: 04797780](#)

MF, MDS, MDS/MPN, ET

LIMBER

Criteria: Received at least 1 prior line of therapy; R/R or intolerant to the last therapy; no therapy that would provide clinical benefit in the opinion of the investigator

PI: *Kittika Poonsombudlert*

[NCT04279847](#)

ANY MYELOID MALIGNANCY

CA055-001

Criteria: Moderate or severe hepatic impairment as defined by National Cancer Institute Organ Dysfunction Working Group criteria

PI: *Grerk Sutamtewagul*

[NCT: 05209295](#)

Lymphoma

Clinical Trials

Clinical Trials Hotline: 319-353-8155

LARGE CELL LYMPHOMAS

☐ OPEN

☐ PENDING

FRONTLINE

ZUMA-23
Study to Compare
Axicabtagene
Ciloleucel With
Standard of Care
Therapy as First-line
Treatment in
Participants With
High-risk Large B-cell
Lymphoma (ZUMA-23)

PI: Umar Farooq

[NCT05605899](#)

SKYGLO
An Open-Label Study
Comparing Glofitamab
and Polatuzumab
Vedotin + Rituximab,
Cyclophosphamide,
Doxorubicin, and
Prednisone Versus
Pola-R-CHP in
Previously Untreated
Patients With Large B-
Cell Lymphoma

PI: Eric Mou

[NCT06047080](#)

ANHL1931
Nivolumab in
Combination With
Chemo-Immunotherapy
for the Treatment of
Newly Diagnosed
Primary Mediastinal B-
Cell Lymphoma

PI: David Dickens

[NCT04759586](#)

Cholecalciferol in
Improving Survival in
Patients With Newly
Diagnosed Cancer With
Vitamin D Insufficiency

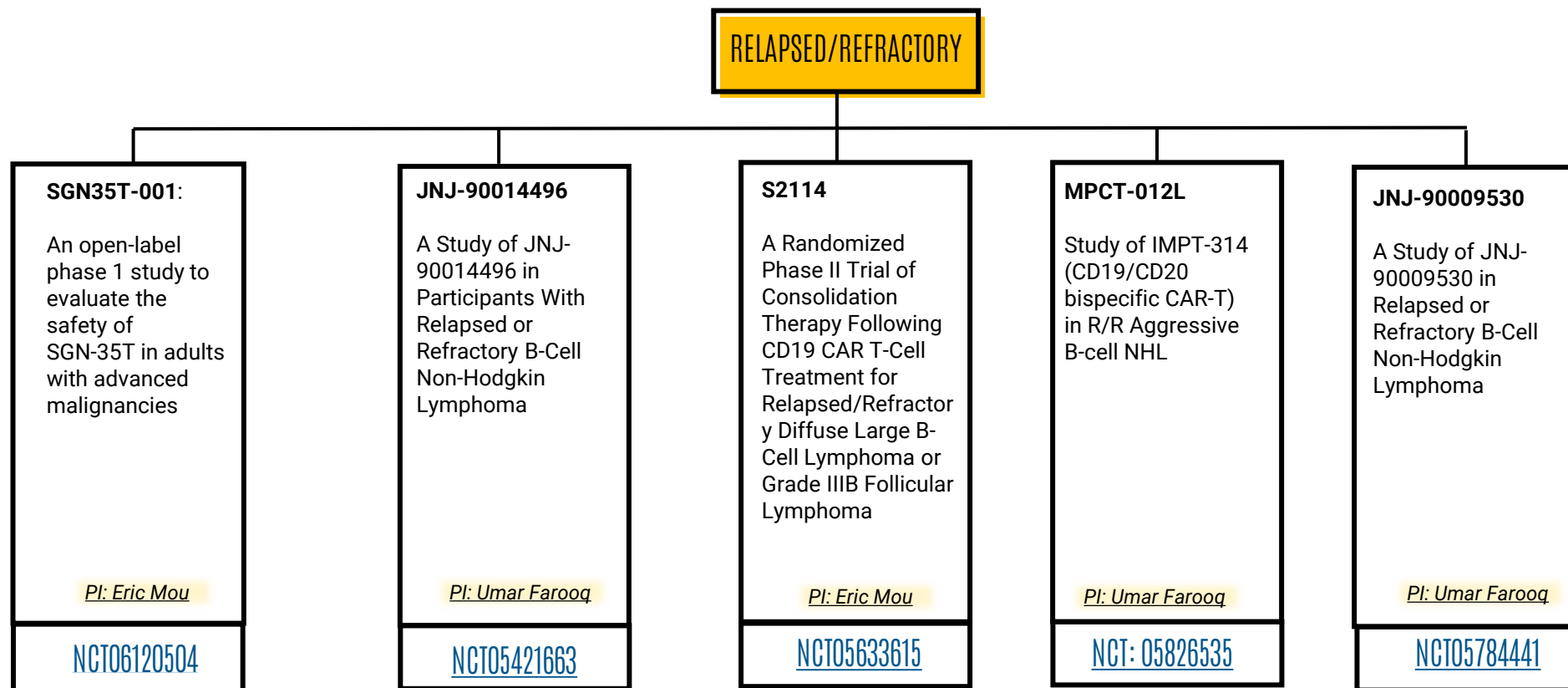
PI: Brian Link

[NCT01787409](#)

LARGE CELL LYMPHOMAS

☐ OPEN

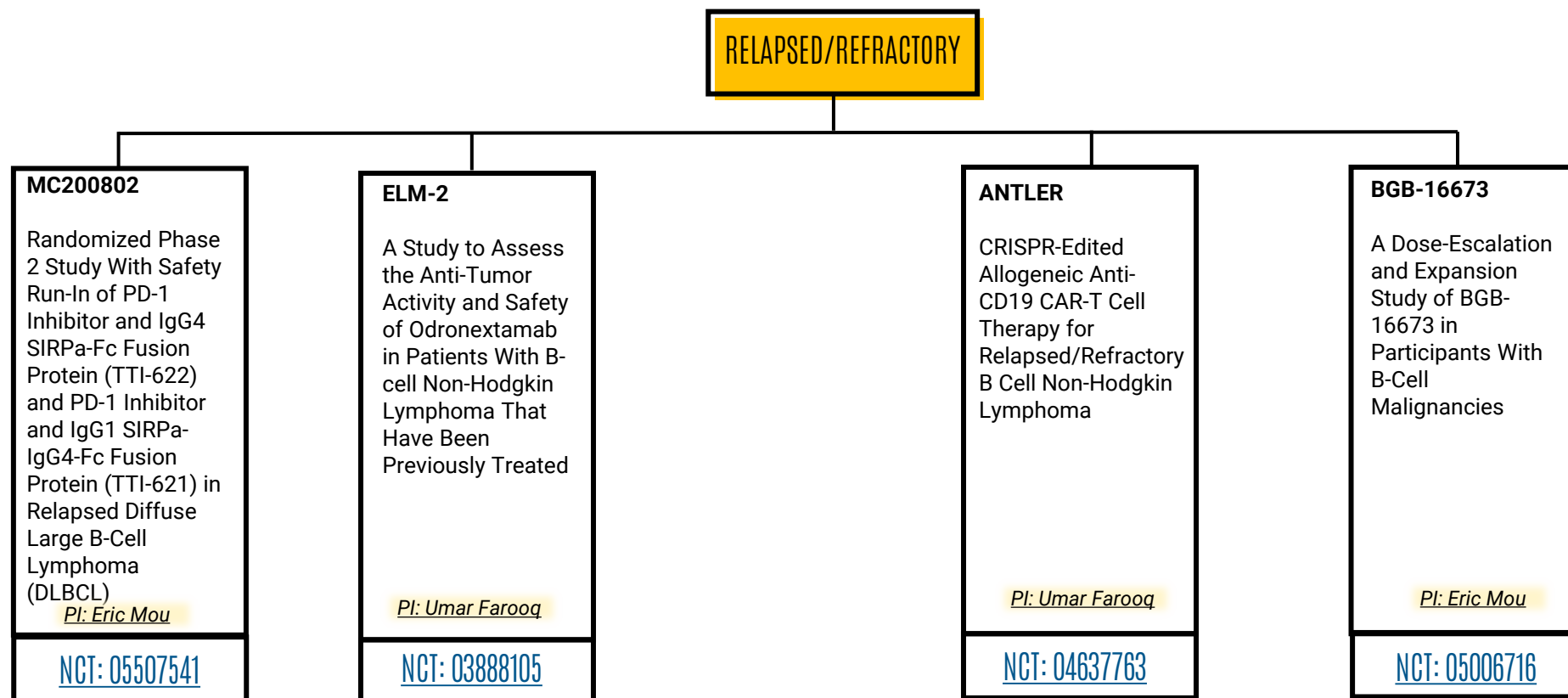
☐ PENDING



LARGE CELL LYMPHOMAS

☐ OPEN

☐ PENDING



MANTLE CELL LYMPHOMA

☐ OPEN

☐ PENDING

FRONTLINE

A052101:
A Randomized Phase 3 Trial of Continuous vs. Intermittent Maintenance Therapy with Zanubrutinib as Upfront Treatment in Older Patients (Age \geq 70 or \geq 60 with selected comorbidities) with Mantle Cell Lymphoma
PI: Umar Farooq
[NCT: 05976763](#)

RELAPSED/REFRACTORY

SGN35T-001:
An open-label phase 1 study to evaluate the safety of SGN-35T in adults with advanced malignancies
PI: Eric Mou
[NCT06120504](#)

ELM-2
A Study to Assess the Anti-Tumor Activity and Safety of Odronextamab in Patients With B-cell Non-Hodgkin Lymphoma That Have Been Previously Treated
PI: Umar Farooq
[NCT: 03888105](#)

BGB-16673
A Dose-Escalation and Expansion Study of BGB-16673 in Participants With B-Cell Malignancies
PI: Eric Mou
[NCT: 05006716](#)

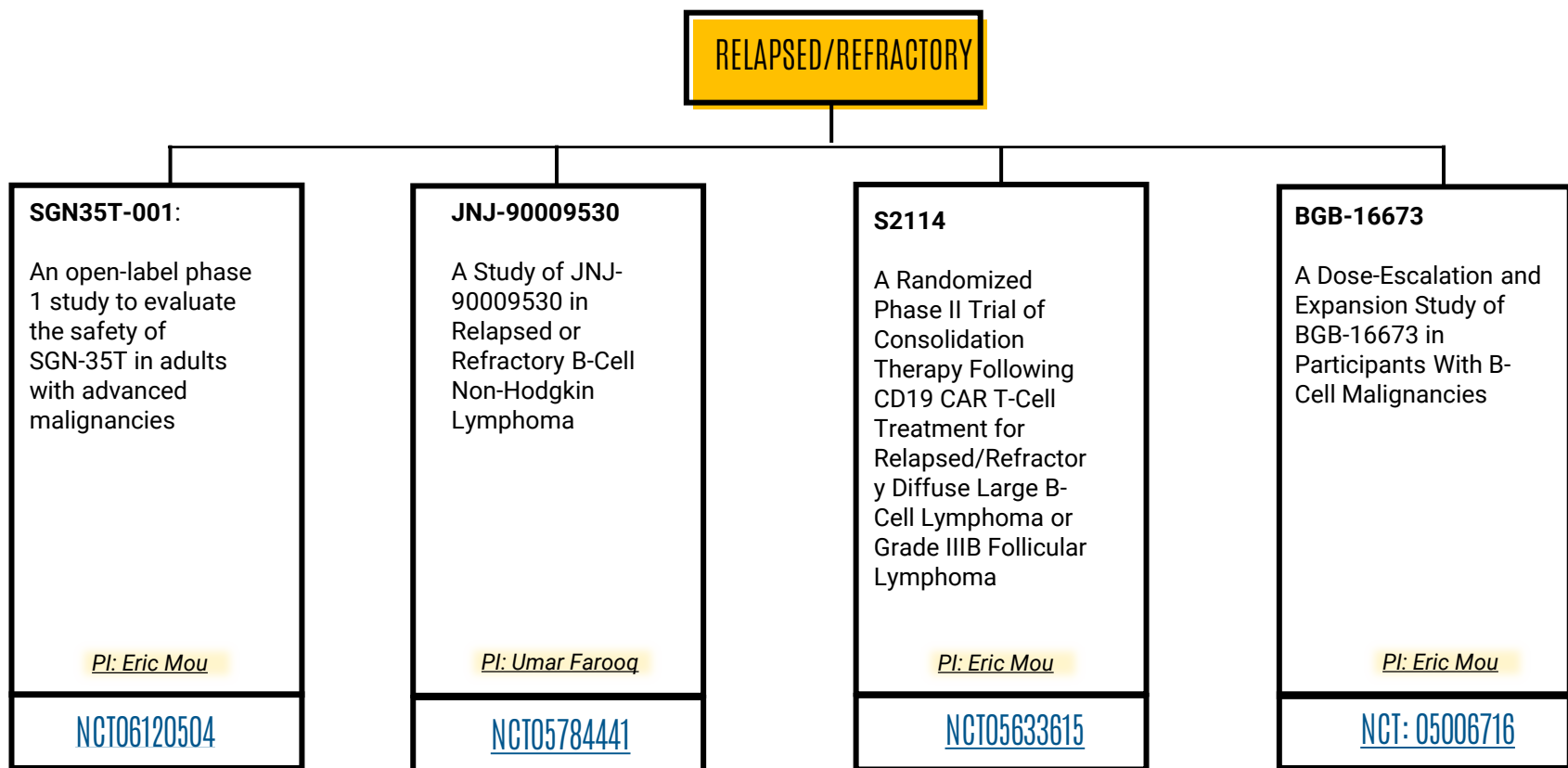
FOLLICULAR LYMPHOMA



OPEN



PENDING



CLL/SLL



OPEN



PENDING

FRONTLINE

BELLWAVE-011:

A Phase 3,
Randomized Study to
Compare
Nemtabrutinib
Versus Comparator
(Investigator's
Choice of Ibrutinib or
Acalabrutinib) in
Participants With
Untreated Chronic
Lymphocytic
Leukemia/Small
Lymphocytic
Lymphoma

PI: Eric Mou

[NCT06136559](#)

RELAPSED/REFRACTORY

BGB-16673

A Dose-Escalation and
Expansion Study of
BGB-16673 in
Participants With B-
Cell Malignancies

PI: Eric Mou

[NCT: 05006716](#)

HODGKIN LYMPHOMA

☐ OPEN

☐ PENDING

FRONTLINE

AHOD2131:
A Randomized Phase 3
Interim Response
Adapted Trial Comparing
Standard Therapy with
Immuno-oncology
Therapy for Children and
Adults with Newly
Diagnosed Stage I and II
Classic Hodgkin
Lymphoma

PI: David Dickens

NCT05675410

RELAPSED/REFRACTORY

BTCRC HEM 15-027:
Phase I/II Study of
Nivolumab in
Combination with
Ruxolitinib in Relapsed
or Refractory Classical
Hodgkin Lymphoma

PI: Umar Farooq

NCT03681561

SGN35T-001:
An open-label phase 1
study to evaluate the
safety of
SGN-35T in adults
with advanced
malignancies

PI: Eric Mou

NCT06120504

T-CELL LYMPHOMA

☐ OPEN

☐ PENDING

FRONTLINE

A051902:

A Randomized Phase II Study of CHO(E)P vs CC-486-CHO(E)P vs Duvelisib-CHO(E)P in Previously Untreated CD30 Negative (<10%) Peripheral T-Cell Lymphomas

PI: Umar Farooq

[NCT: 04803201](#)

Cholecalciferol in Improving Survival in Patients With Newly Diagnosed Cancer With Vitamin D Insufficiency

PI: Brian Link

[NCT01787409](#)

RELAPSED/REFRACTORY

SGN35T-001:

An open-label phase 1 study to evaluate the safety of SGN-35T in adults with advanced malignancies

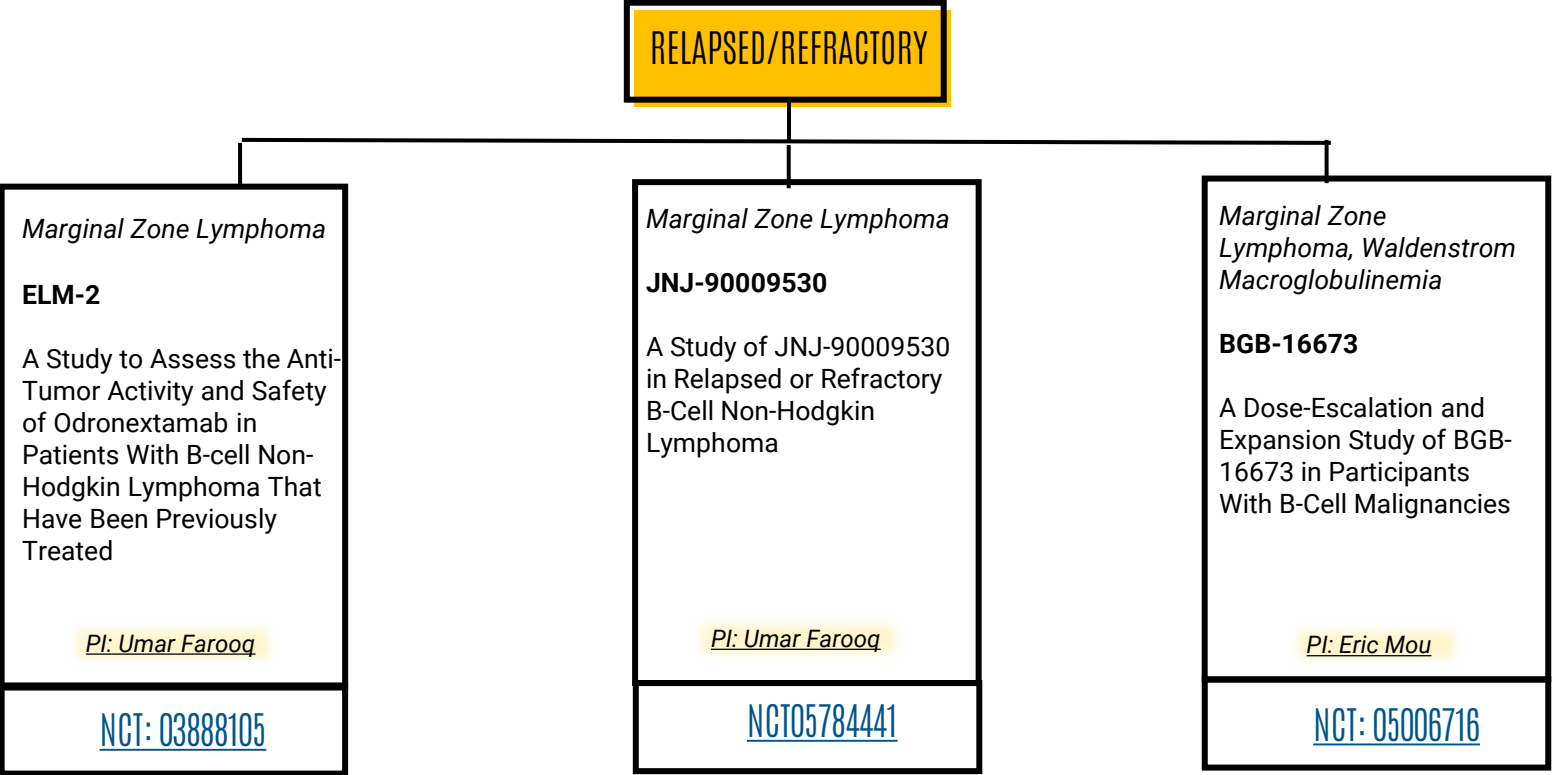
PI: Eric Mou

[NCT06120504](#)

OTHER LYMPHOMAS

OPEN

PENDING



Melanoma

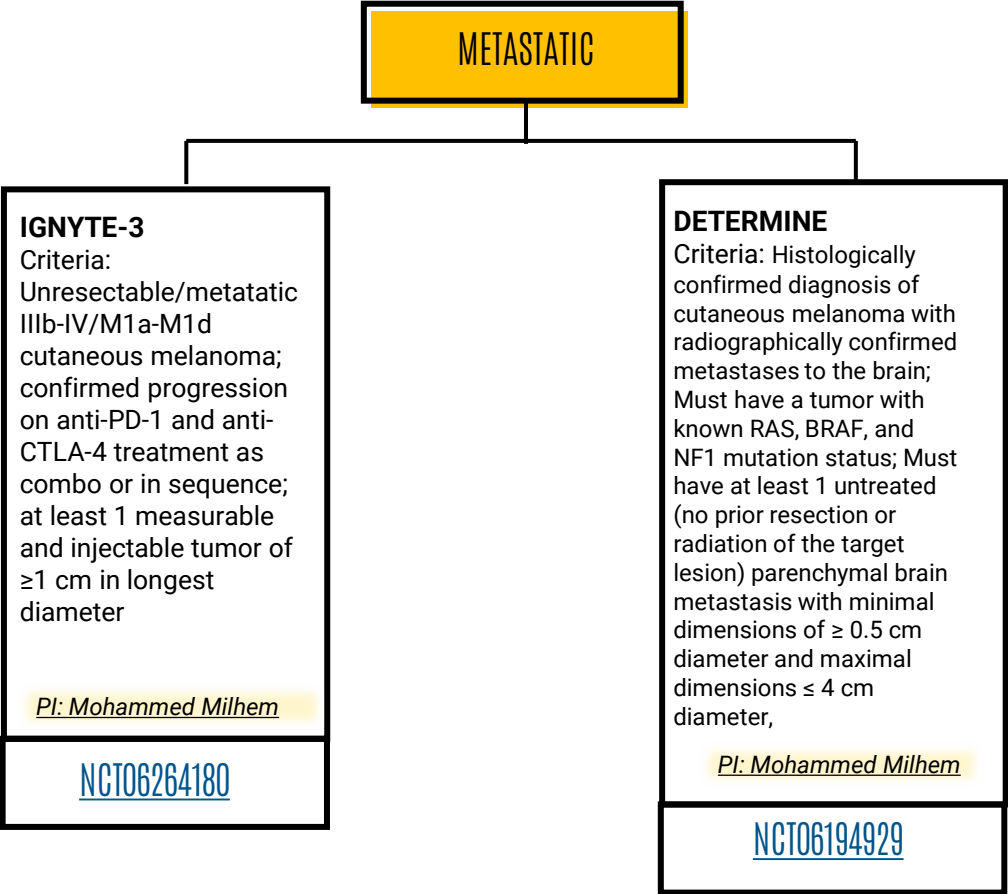
Clinical Trials

Clinical Trials Hotline: 319-353-8155

CUTANEOUS MELANOMA

OPEN

PENDING



UVEAL MELANOMA

OPEN

PENDING

1L

IDE196-002
Criteria: HLA-A*02:01
negative patients
(Testing can be done at
U of Iowa)
Treatment naïve patients
with metastatic uveal
melanoma

Investigational Agent:
Darovasertib + Crizotinib
vs investigator choice

PI: Asad Javed

[NCT05987332](#)

Checkpoint Inhibitor
Naïve

RP2-202
Criteria: Disease not
amenable to surgical
resection; at least 1
measurable and
injectable tumor of ≥ 1
cm in longest diameter (≥
1.5 cm in the shortest
axis for LN); willing to
provide tumor biopsy
samples

PI: Asad Javed

[NCT06581406](#)

Myeloma

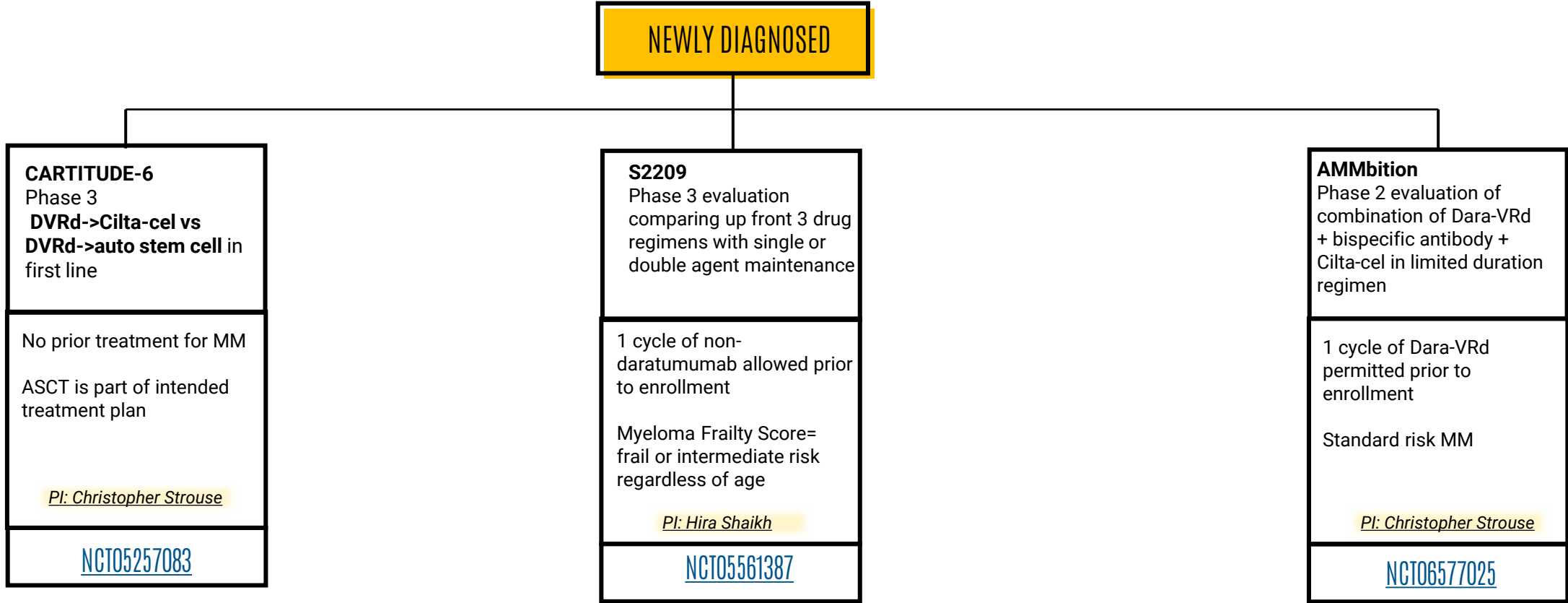
Clinical Trials

Clinical Trials Hotline: 319-353-8155

MULTIPLE MYELOMA

OPEN

PENDING



MULTIPLE MYELOMA (CONT'D)

OPEN

PENDING

RELAPSED/REFRACTORY

Ascorbic Acid + Melphalan
High Dose Ascorbic Acid is hypothesized to have synergy with melphalan. This is a phase 1 dose escalation trial.

3+ prior lines of therapy
Prior exposure to IMiD, PI, Anti-CD38 antibody required

PI: Christopher Strouse

[NCT: 03602235](#)

C1071020 – Elranatamab + Carfilzomib / anti-CD47 antibody
Testing combinations with anti-BCMA bispecific antibody.

Arm 1: Elra + Carf
1-3 prior lines
Prior carfilzomib is OK

Arm 2: Elra + anti-CD47
3+ prior lines of therapy
Refractory to IMiD, PI, anti-CD38 antibody

PI: Hira Shaikh

[NCT: 05675449](#)

P-BCMA-ALLO1
Allogeneic anti-BCMA CAR-T cells.

EITHER

- 2+ prior lines of therapy
- Refractory to PI, IMiD, anti-CD38 antibody

OR

- 3+ prior lines of therapy
- Exposure to PI, IMiD, anti-CD38 antibody

PI: Christopher Strouse

[NCT: 04960579](#)

QUINTESENTIAL
Autologous anti-GPRC5d CAR-T cells

3+ prior lines
Prior treatment with anti-BCMA therapy is **required**

PI: Christopher Strouse

[NCT: 06121843](#)

LimiTEC

Limited duration therapy of teclistamab

Patients achieving VGPR or better after 6 cycles of teclistamab (less than 9).

Telephone consenting and remote monitoring is possible (no need to visit Iowa City)

PI: Hira Shaikh

[NCT05932680](#)

MonumentAL-8
Combination anti-GPRC5d bispecific antibody + anti-BCMA CAR T cells for high risk myeloma

3+ prior lines
Exposure to IMiD, PI, anti-CD38 antibody
“High Risk” myeloma = 1 of:

- Cyto t[4;14, t[14;16], or - 17p
- Baseline ISS Stage III
- Extramedullary plasmacytoma

No prior anti-BCMA therapy

PI: Christopher Strouse

[NCT06550895](#)

MULTIPLE MYELOMA

OPEN

PENDING

SMOLDERING MYELOMA

Ecog-Acrin 173

Phase 3 Pre-emptive tx
for high risk smoldering
myeloma

Dara-Rd x2 years

Vs

Rd x 2 years

"High Risk" SMM = 2 of these:

>2.0 g/dl m-protein

Cyto: +1q, t[4;14], -17p, -13q

>20% PCs in marrow

Involved light chains 20x greater than uninvolved

Dx in last 1 year, no myeloma defining criteria

PI: Christopher Strouse

NCT: 03937635

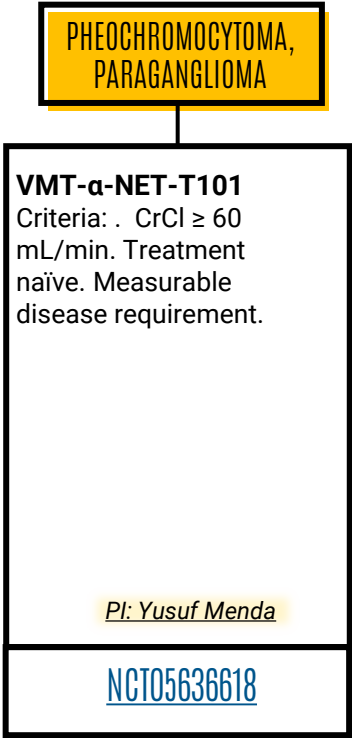
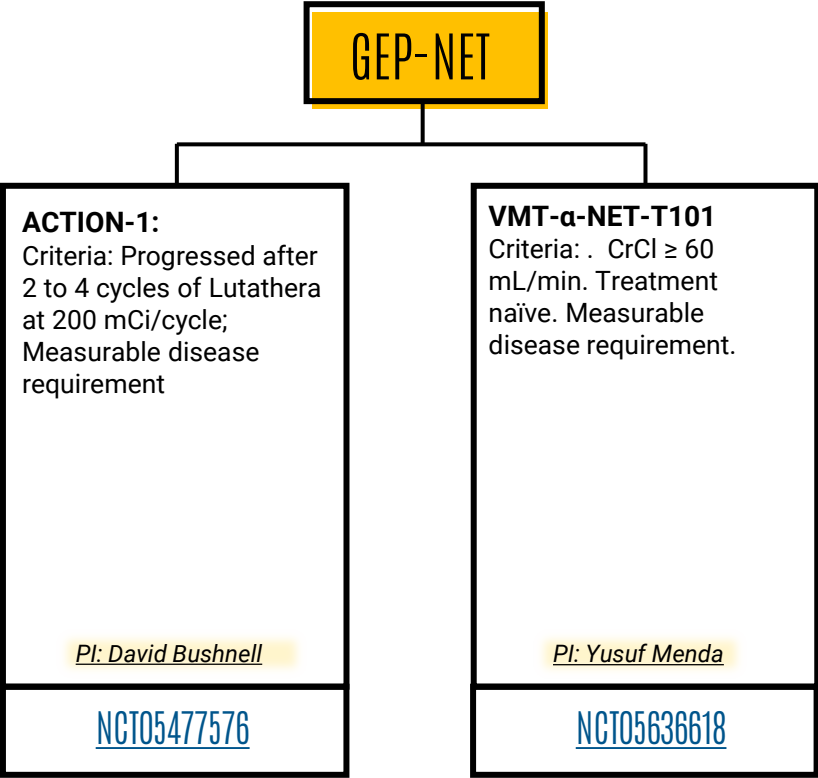
Neuroendocrine Clinical Trials

Clinical Trials Hotline: 319-353-8155

NEUROENDOCRINE CANCER

OPEN

PENDING



Sarcoma

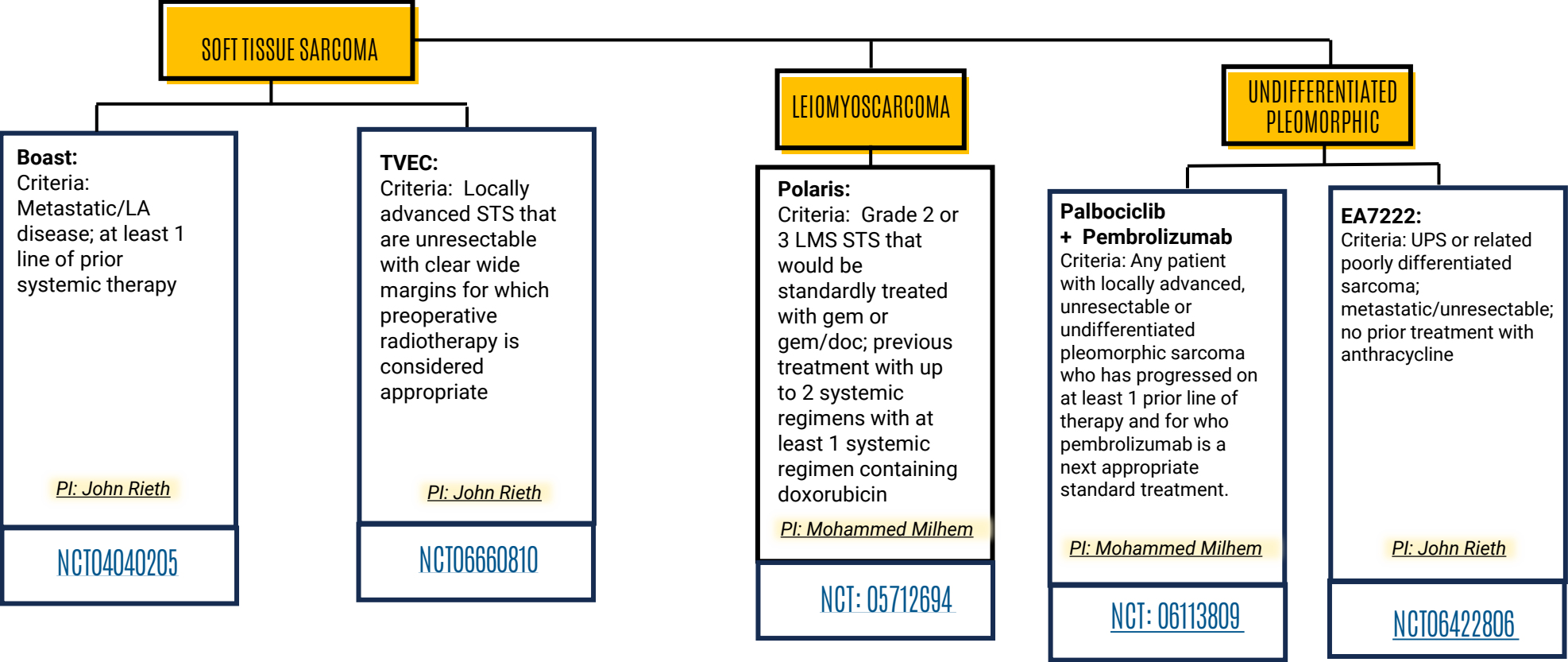
Clinical Trials

Clinical Trials Hotline: 319-353-8155

SARCOMA

OPEN

PENDING



SARCOMA

OPEN

PENDING

ANGIOSARCOMA

IGNYTE

Criteria: locally advanced or metastatic disease; at least 1 measurable and injectable lesion; must have received 8 weeks of anti-PD1 as last line of therapy and progressed while on treatment

PI: Doug Laux

NCT: 03767348

CHONDROSARCOMA

CHONQUER

Criteria: LA/metastatic chondrosarcoma grades 1, 2, 3, not eligible for a curative resection; have received 0-1 prior systemic treatments in LA/metastatic setting

PI: John Rieth

NCT06127407

INBRX-109

Criteria: Conventional chondrosarcoma, unresectable or metastatic (clear-cell, mesenchymal, extraskeletal myxoid, myxoid, and dedifferentiated chondrosarcoma are not eligible)

PI: Mohammed Milhem

NCT: 04950075

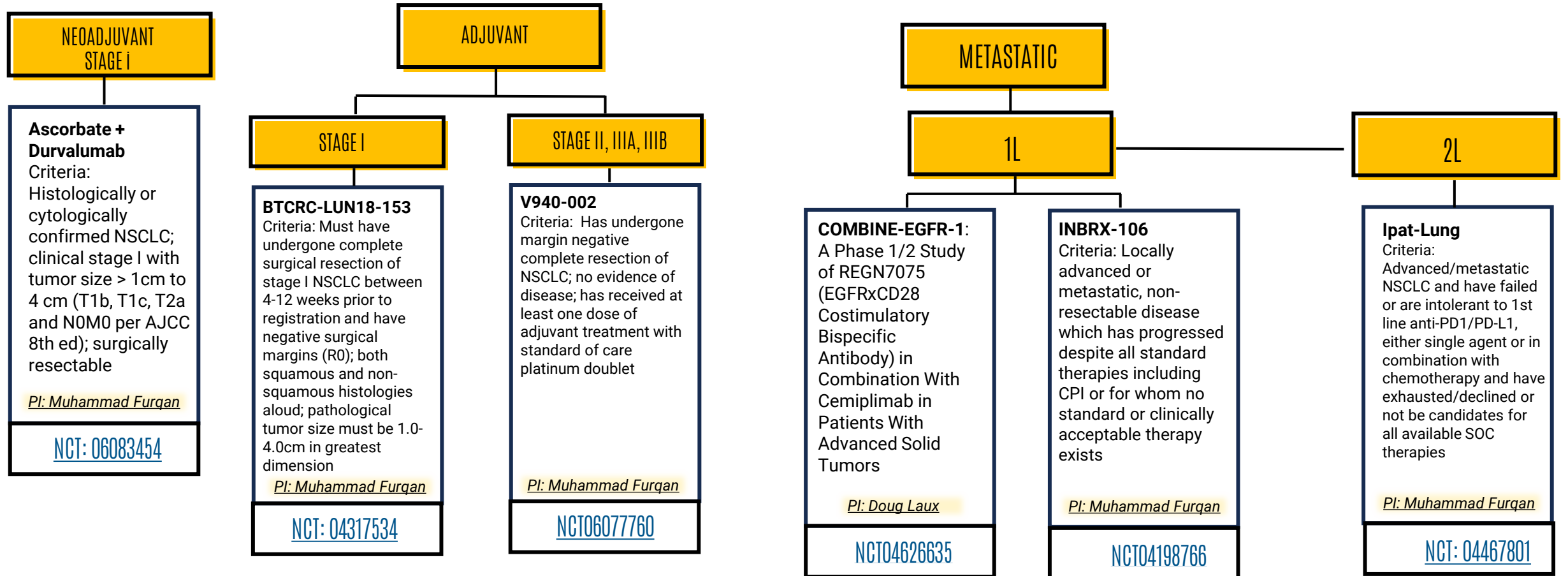
Thoracic Cancer Clinical Trials

Clinical Trials Hotline: 319-353-8155

NON-SMALL CELL LUNG CANCER

☐ OPEN

☐ PENDING



NON-SMALL CELL LUNG CANCER

☐ OPEN

☐ PENDING

METASTATIC 3RD LINE+

IMC-F106C-101: Criteria: Relapsed from, refractory to, or intolerant of standard therapies; or, in combination with standard therapies

PI: Muhammad Furqan

NCT04262466

OBT076-001: Criteria: Subject has received a maximum of two prior lines of cytotoxic chemotherapy in the metastatic setting; subject has tumor that is positive for CD205 antigen by IHC staining

PI: Doug Laux

NCT04064359

SGNEGFRd2-001: A Phase 1 Study of SGN-EGFRd2 in Advanced Solid Tumors

PI: Muhammad Furqan

NCT05983133

INBRX-106: Criteria: Locally advanced or metastatic, non-resectable disease, which has progressed despite all standard therapies including CPI or for whom no standard or clinically acceptable therapy exists

PI: Muhammad Furqan

NCT04198766

SGNPDL1v-001: SGN-PDL1V alone and with pembrolizumab in participants with solid tumors

PI: Doug Laux

NCT05208762

Study to Evaluate BL-B01D1:

Criteria: Has measurable disease; LVEF $\geq 50\%$

PI: Muhammad Furqan

NCT05983432

KO-2806
Criteria: KRAS G12C; prior use of KRAS permitted

PI: Doug Laux

NCT06026410

SMALL CELL LUNG CANCER



OPEN



PENDING

1L

MOZART:

Criteria: Extensive disease IV SCLC, or T3-4 disease due to multiple lung nodules that are too extensive for radiation; No prior systemic therapy for small-cell lung cancer, with the following exceptions: Up to one cycle of platinum doublet chemotherapy with or without durvalumab is allowed up to 4 weeks prior to registration on this study

PI: Muhammad Furqan

[NCT05903092](#)

2ND LINE+

M23-385: Criteria: Histologically or cytologically confirmed SCLC that is relapsed or refractory (R/R) following at least 1 prior platinum-containing chemotherapy and with no curative therapy available

PI: Muhammad Furqan

[NCT05599984](#)

Study to Evaluate BL-B01D1: Has measurable disease; LVEF $\geq 50\%$

PI: Muhammad Furqan

[NCT05983432](#)

BTCRC-LUN20-462

Criteria: Histologically or cytologically documented diagnosis of extensive stage SCLC and have progressed or recurred after platinum-based chemotherapy with immunotherapy; max of 2 prior lines of systemic therapy in the metastatic setting

PI: Muhammad Furqan

[NCT: 04919382](#)

Cancer Services – Quad Cities

Clinical Trials

Clinical Trials Hotline: 319-353-8155

THORACIC CANCER

☐ OPEN

☐ PENDING

SCLC

BTCRC-LUN20-462
Criteria: Histologically or cytologically documented diagnosis of extensive stage SCLC and have progressed or recurred after platinum-based chemotherapy with immunotherapy; max of 2 prior lines of systemic therapy in the metastatic setting

PI: Muhammad Furqan

[NCT: 04919382](#)

BREAST CANCER

☐ OPEN

☐ PENDING

TRIPLE NEGATIVE

SCARLET: T2-T4, N0, M0 or T1-T3, N1-2, M0; no prior systemic therapy or radiation therapy with curative intent for current breast cancer

PI: Sneha Phadke

[NCT05929768](#)

Optim-ICE: T1cN1-2 or T2-4N0-2; no residual disease or LN after neoadjuvant therapy; neoadjuvant chemo+pembro x 6 cycles; < 12 weeks between surgery and randomization

PI: Sneha Phadke

[NCT05812807](#)

ER+

Cambria: must have had definitive locoregional therapy +/- adjuvant systemic therapy; completed at least 2 yrs (but no more than 5) of adjuvant ET (and is still receiving)

PI: Sneha Phadke

[NCT05774951](#)

ADE-MI: HR+HER2- who are prescribed abemaciclib

PI: Sneha Phadke

[NCT06169371](#)

BR009: premenopausal; postoperative pT1-3; ipsilateral nodes pN0 or pN1; if node negative, oncotype DX RS RS 21-25 or 16-20 with high clinical risk disease; if 1-3 nodes+ oncotype DX RS 26

PI: Sneha Phadke

[NCT05879926](#)

HEAD AND NECK CANCER

☐ OPEN

☐ PENDING

THYROID CANCER

EA3231:

Dedifferentiated thyroid cancer; BRAF V600E+; must have been previously treated with or deemed ineligible for treatment with Iodine-131; must have had prior treatment lenvatinib and/or sorafenib

PI: Doug Laux

[NCT06475989](#)

GI CANCER

OPEN

PENDING

COLON

NRG-GI008
Criteria: T1-3, N1/N1c confirmed adenocarcinoma with RO resection; no radiographic evidence of overt metastatic disease; distal extent of tumor ≥12 cm from anal verge on colonoscopy or above peritoneal reflection as documented during surgery or on path specimen; must have had en bloc complete gross resection of tumor (curative resection); microsatellite stable or intact mismatch repair proteins through CLIA approved testing
PI: Saima Sharif

NCT: 05174169

GEJ

A022102
Criteria: Unresectable or metastatic HER2-adenocarcinoma of esophagus, GEJ, or stomach; no prior treatment for unresectable or metastatic disease

PI: Saima Sharif

NCT05677490

MULTIPLE MYELOMA

☐ OPEN

☐ PENDING

SMOLDERING MYELOMA

Ecog-Acrin 173
Phase 3 Pre-emptive tx
for high risk smoldering
myeloma
Dara-Rd x2 years
Vs
Rd x 2 years

"High Risk" SMM = 2 of these:

- >2.0 g/dl m-protein
- Cyto: +1q, t[4;14], -17p, -13q
- >20% PCs in marrow
- Involved light chains 20x greater than uninvolved

Dx in last 1 year, no myeloma defining criteria
PI: Christopher Strouse

[NCT: 03937635](#)

NEWLY DIAGNOSED

S2209
Phase 3 evaluation
comparing up front 3 drug
regimens with single or
double agent maintenance

No prior treatment for MM

Myeloma Frailty Score=
frail or intermediate risk
regardless of age

PI: Hira Shaikh

[NCT05561387](#)