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Emerging Clinical Evidence for B7-H3–Directed ADCs in ES-SCLC From ESMO 2025

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Dr. Byers:
This is CE on ReachMD, and I'm Dr. Lauren Byers.

Dr. Paz-Ares:
And I am Luis Paz-Ares.

Dr. Byers:
We'rerecording this shortly after ESMO 2025. Luis, can you review the latest clinical data that were presented on B7-H3-directed ADCs in extensive-stage small cell lung cancer?

Dr. Paz-Ares:
Oneof the more relevant data were related to the study on I-DXd at12 mg/kg every 3 weeks.This Ideate-Lung01 study had been previously presented and 137 had been included with an overall response rate of about 48%.Importantly, duration of response was 5.3 months and median PFS 4.9 months.

At the ESMO, they presented a sub-analysis of the intracranial activity. And importantly, I have to say that response rate wasvery similaramong the 65 patients with brain metastases as compared to those 72 without brain metastases, 46% as compared to 50%. When you were looking at the—specifically the systemic response rate and intracranial was similar, 46%.

Another relevant issue was that among patients with target lesions in the brain, response rate wasquite relevant, 65%. Andmaybe thelast data thatI'dlike to tell you was the site of progression.The site of progression was very clear,and among those patients without brain metastasis, was only 12% comparing to those patients with brain metastasis at baseline where progression in the brain was detected in 35%, so 3 times as high.

The last point, important, wasregardingsafety.There was no difference between those patients having or not brain metastasis in terms of safety.

Finally, the only other dataI'dlike to remark here was some data on a new ADC directed to B7-H3.The name of the compound is 7MW3711. In small cell lung cancer, they were recorded 5 responses among 10 patients treated.

Dr. Byers:
Now, Luis, I thinkit'sso important seeing this data from the intracranial activity when we know that for a very longtime patients often have been excluded if they had brain metastases. And so to have this data and having it really look quite striking in terms of activity and the benefit for these patients is really important to have this and to see this encouraging result from the trial.

Dr. Paz-Ares:
This disease is having a particular propensity to develop brain metastasis upon progression and having drugs with activity in the CNS is particularly relevant. This is a source of morbidity for patients. So I think this is very relevant.

Dr. Byers:
Yeah, I agree. I think this really starts to address what's been an unmet need for a very long time.

And so, well, thank you, Luis, for that update from ESMO.I think it's very encouraging results, and especially the activity intracranially is really important data and really is a step forward for these patients.

Dr. Paz-Ares:
Of course. Thank you very much, Lauren.

Dr. Byers:
Well, this has been a great micro-discussion. Our time is up, thanks for listening.

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