

Adult soft tissue sarcoma: Updates from 2024-2025

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Disclosures
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Overview

Perioperative

- Undifferentiated Pleomorphic Sarcoma
- Myxoid Liposarcoma

Unresectable

- Leiomyosarcoma
- Dedifferentiated Liposarcoma

Later line of therapy

- Synovial Sarcoma

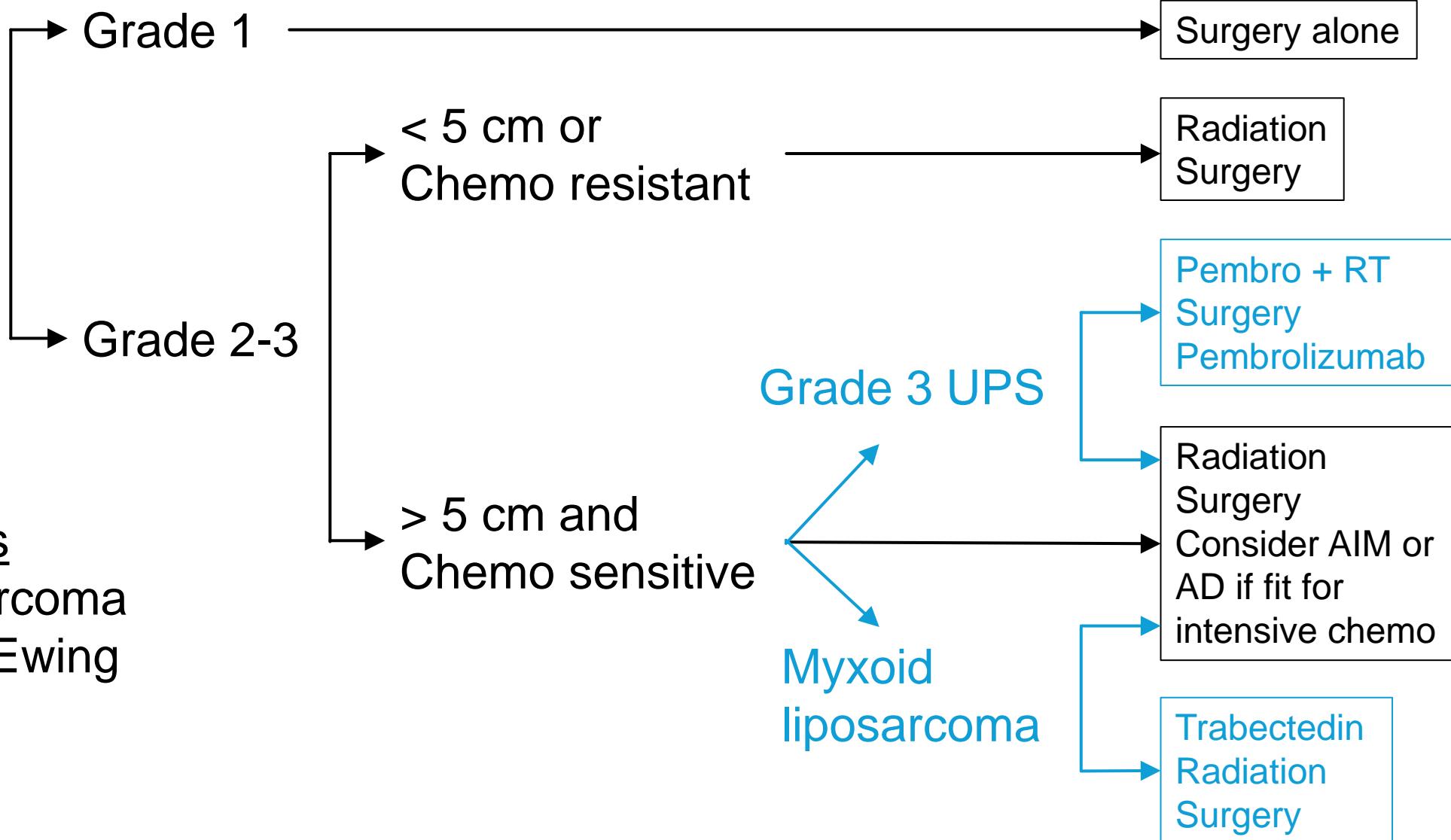
Resectable extremity soft tissue sarcoma: Early 2024 vs 2025

Staging
imaging

Resectable

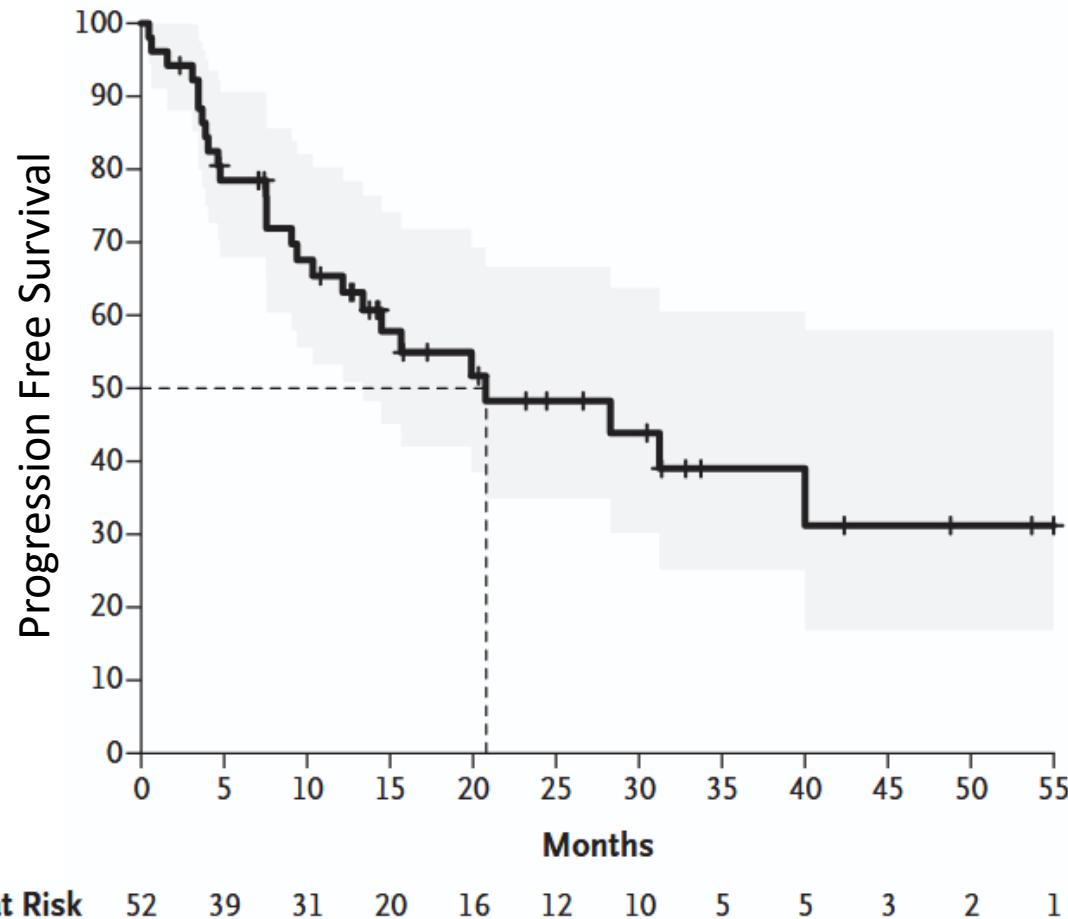
Key exceptions

Rhabdomyosarcoma
Extraosseous Ewing



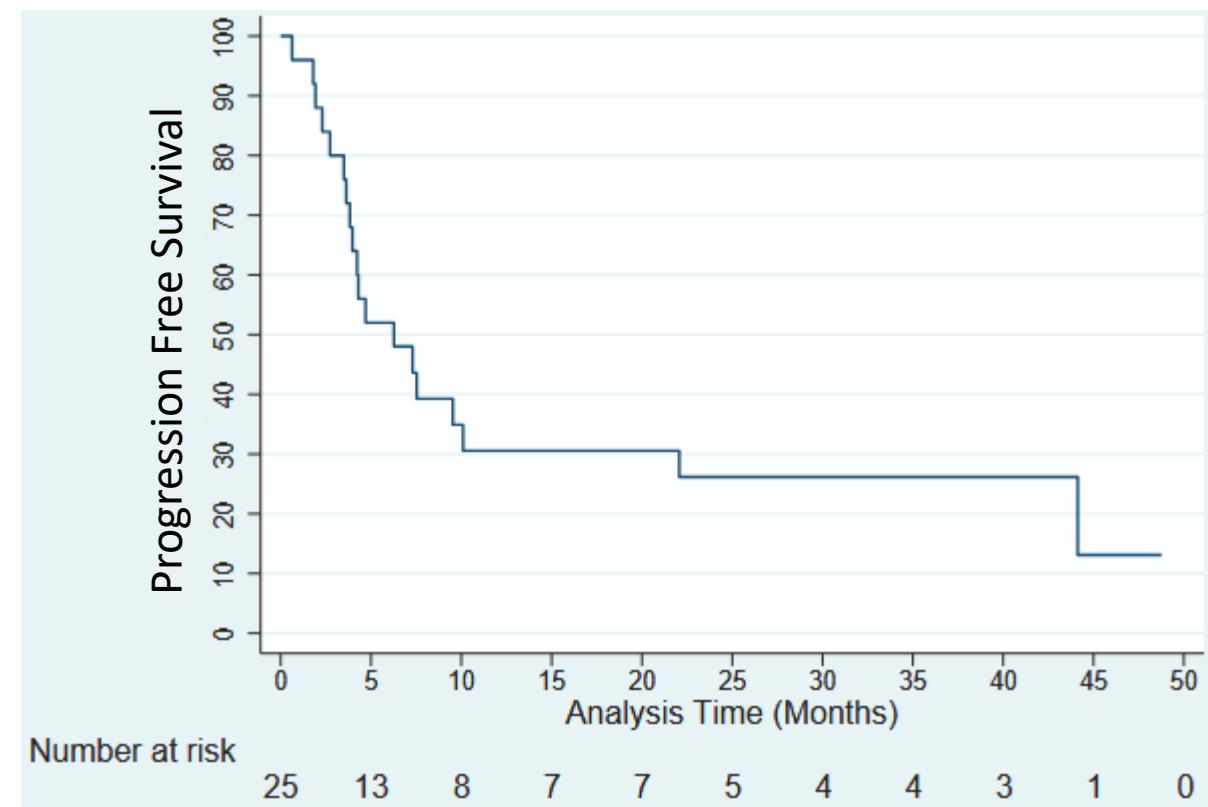
Checkpoint inhibitors in sarcoma subtypes

Alveolar soft part sarcoma – Atezolizumab



N Engl J Med 2023;389:911-21.

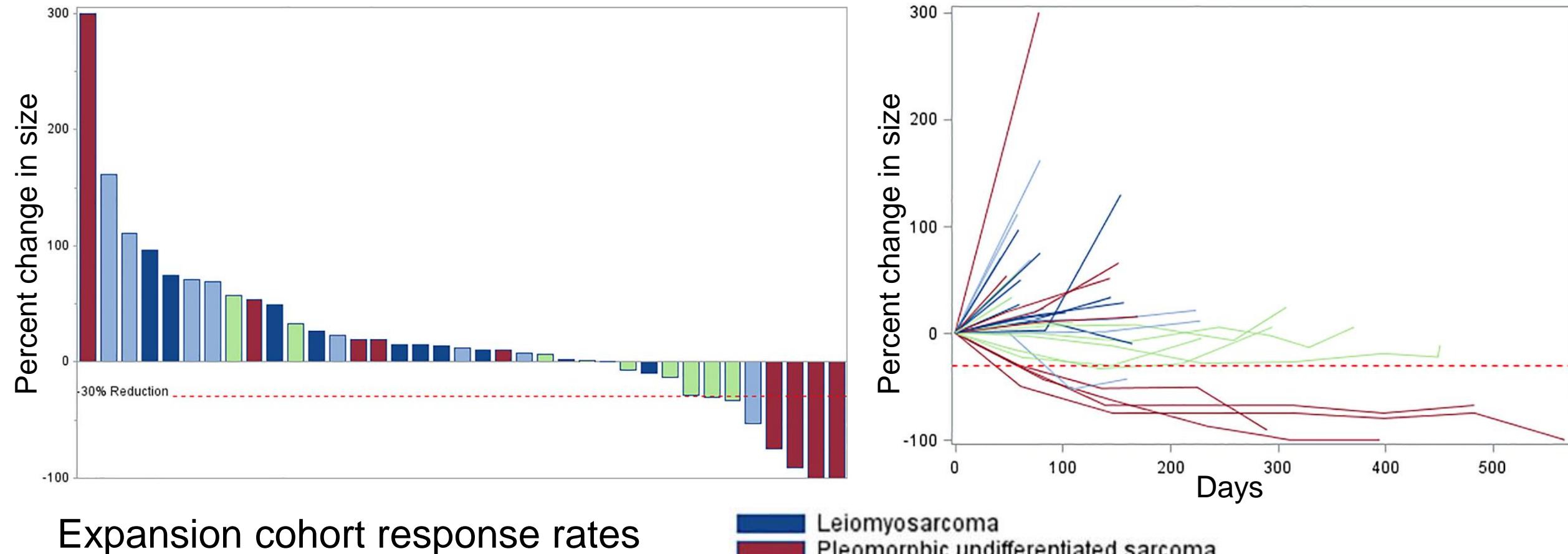
Angiosarcoma – Various CPIs, mostly pembro



Cancer 2022;128:3383-3391.

Checkpoint inhibitors in sarcoma subtypes

SARC 028 trial – Pembrolizumab



Expansion cohort response rates
UPS: 23% (9/40)
ddLPS: 10% (4/40)

Safety and efficacy of pembrolizumab, radiation therapy, and surgery versus radiation therapy and surgery for stage III soft tissue sarcoma of the extremity (SU2C-SARC032): an open-label, randomised clinical trial

Resectable extremity UPS or dedifferentiated / pleomorphic LPS, >5 cm, grade 2-3

Control

Radiation (50 Gy in 25 fractions)

Resection

Experimental

Pembrolizumab (200 mg q3 weeks) ×3 doses

Radiation starting within 2 weeks of first dose

Resection

Pembrolizumab to complete 14 doses (~1 year total)

Eligible histologies

Dedifferentiated / pleomorphic liposarcoma

or

Undifferentiated Pleomorphic Sarcoma

Includes: Myxofibrosarcoma

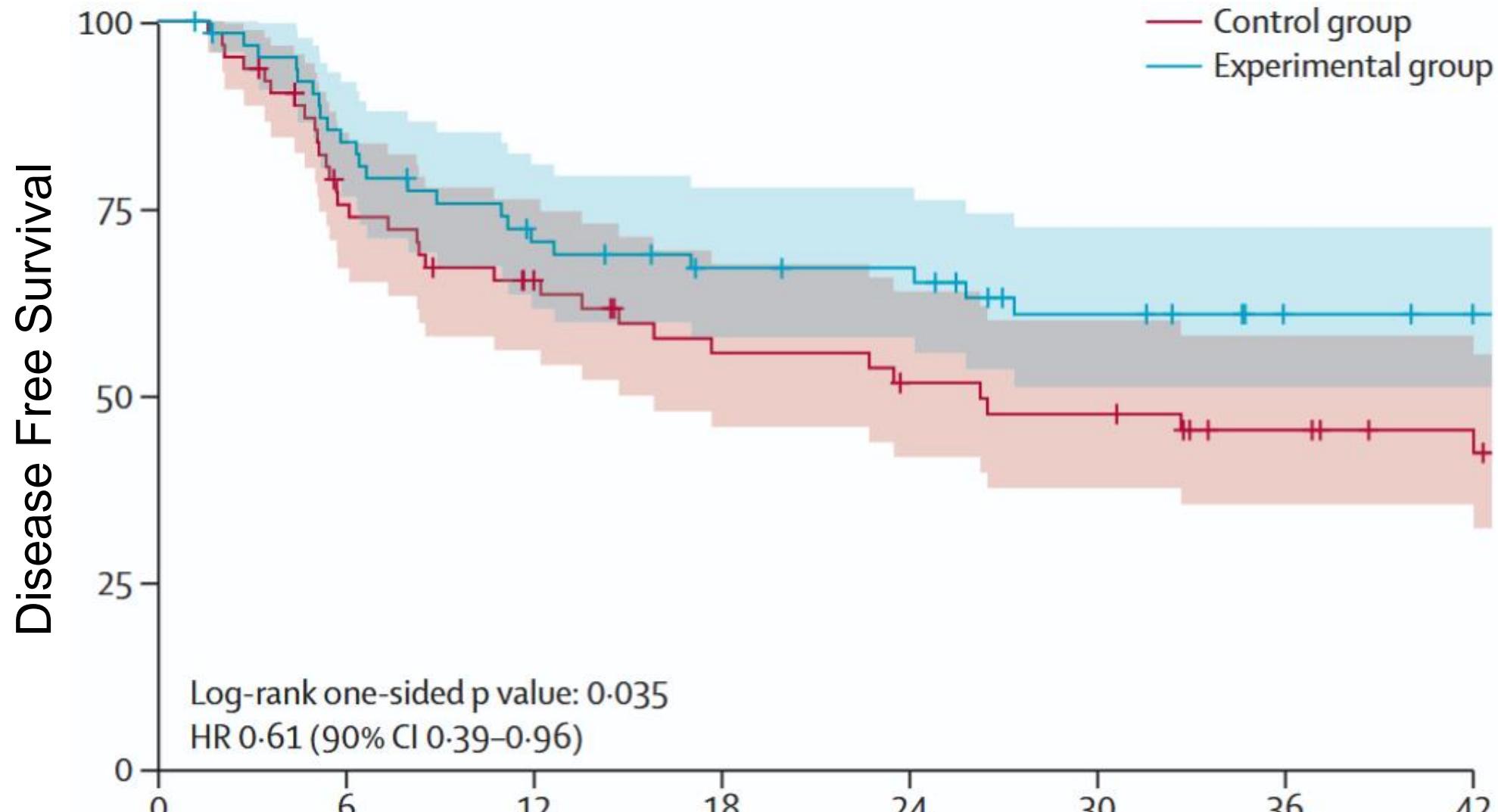
Unclassified spindle cell sarcoma

Pleomorphic spindle cell sarcoma

Various others

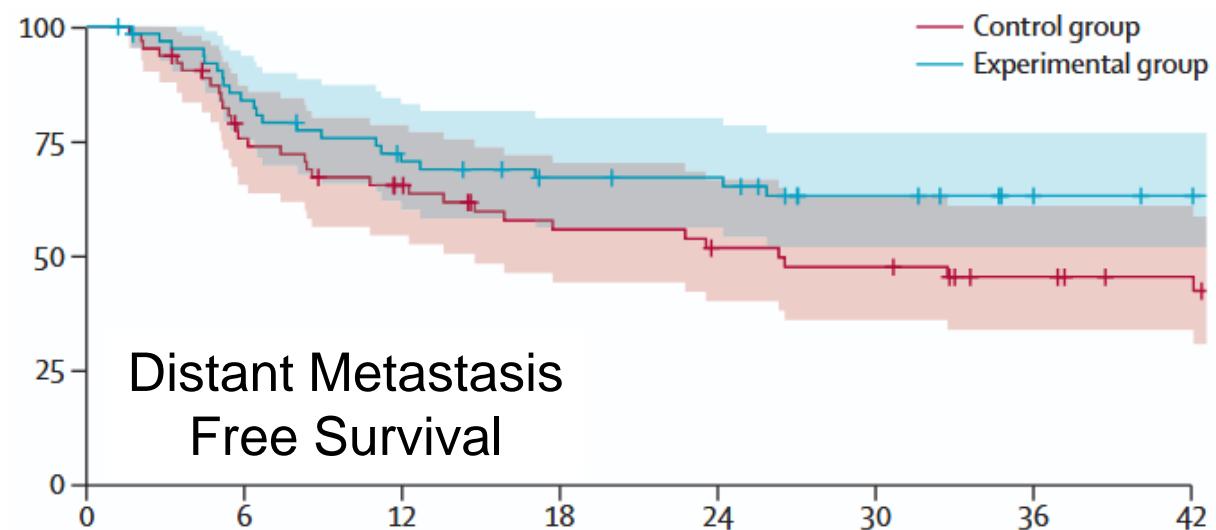
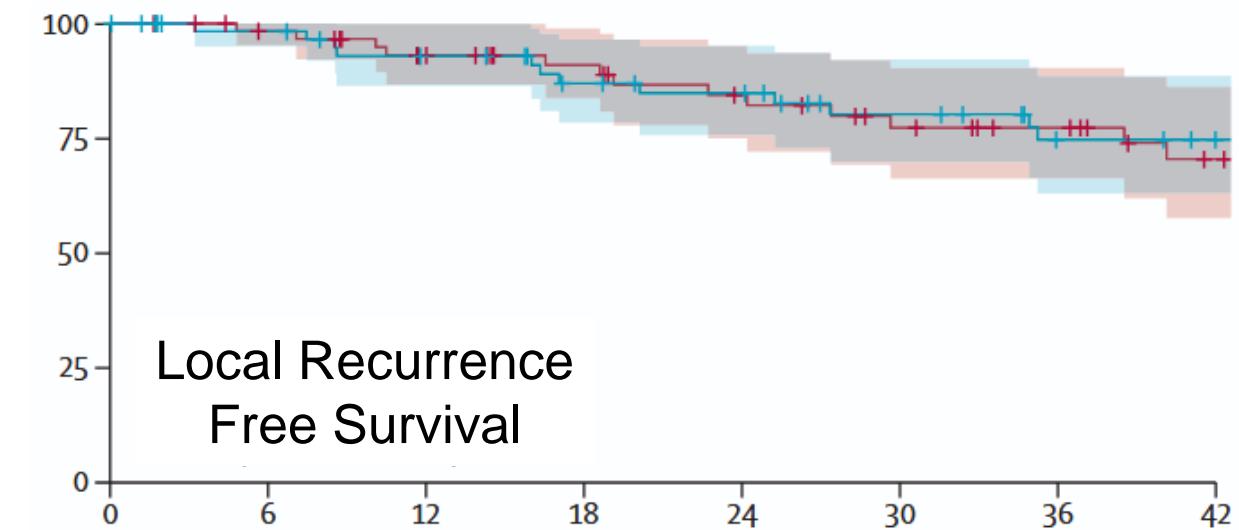
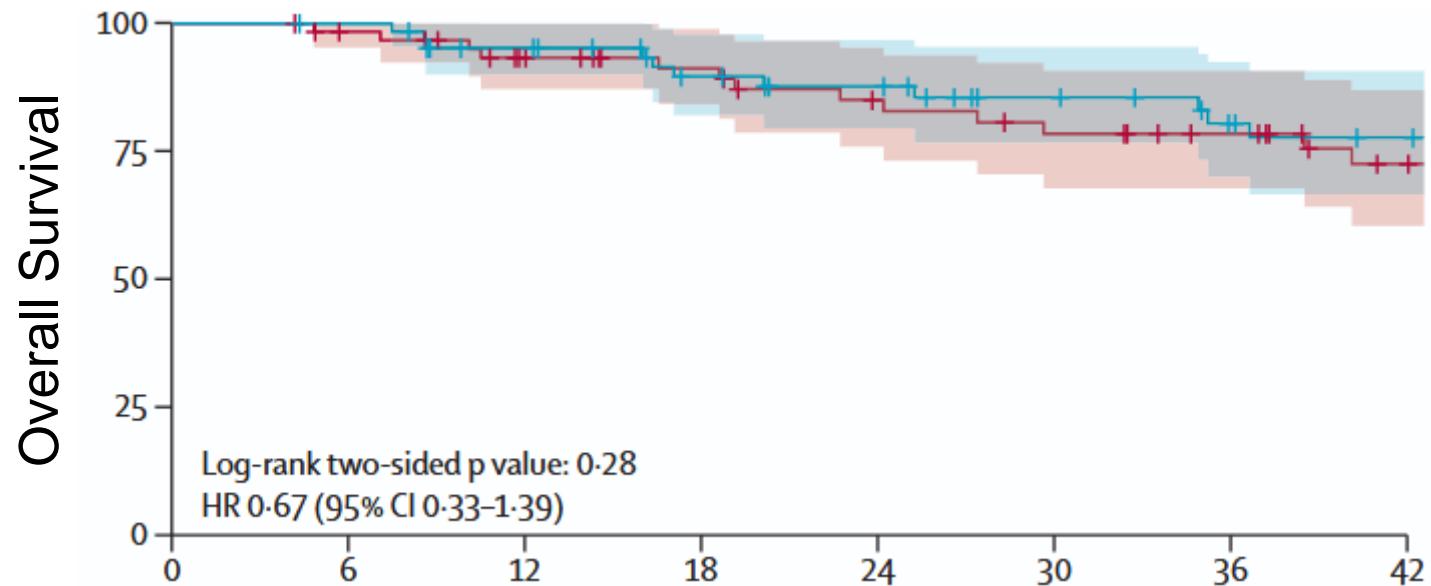
Actual enrollment

	Control group (n=63)	Experimental group (n=64)
Sarcoma histologic subtype at initial diagnosis		
Dedifferentiated liposarcoma	4 (6%)	4 (6%)
Pleomorphic liposarcoma	5 (8%)	0
Myxofibrosarcoma	6 (10%)	7 (11%)
Undifferentiated pleomorphic sarcoma	48 (76%)	53 (83%)

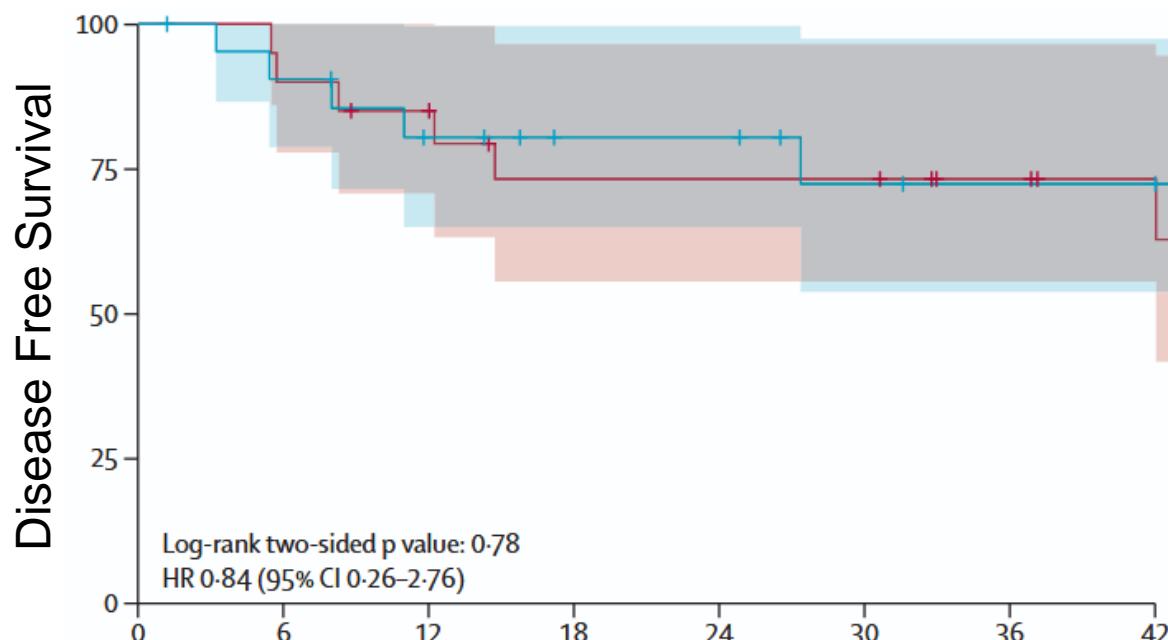


Number at risk

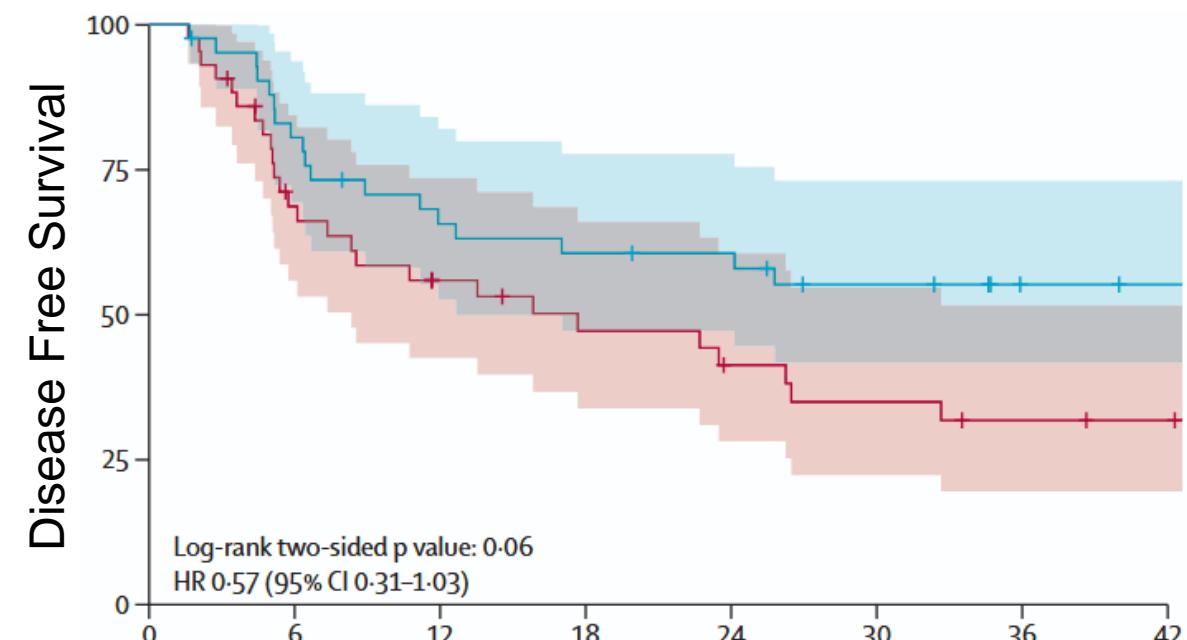
Control group	63	45	35	28	25	23	18	15
Experimental group	64	52	41	36	35	28	23	21



Grade 2



Grade 3



	RT + Resection	With Pembro
Any Grade 3/4	21/67 (31%)	39/70 (56%)

	Control group (n=67)				Experimental group (n=70)			
	Grades 1 and 2	Grade 3	Grade 4	Overall	Grades 1 and 2	Grade 3	Grade 4	Overall
Dermatitis radiation	26 (39%)	..	..	26 (39%)	34 (49%)	1 (1%)	..	35 (50%)
Fatigue	18 (27%)	..	..	18 (27%)	38 (54%)	1 (1%)	..	39 (56%)
Pain	13 (19%)	..	..	13 (19%)	13 (19%)	3 (4%)	..	16 (23%)
Nausea	6 (9%)	..	..	6 (9%)	19 (27%)	3 (4%)	..	22 (31%)
Pain in extremity	10 (15%)	..	..	10 (15%)	13 (19%)	2 (3%)	..	15 (21%)
Anaemia	4 (6%)	2 (3%)	..	6 (9%)	11 (16%)	7 (10%)	..	18 (26%)
Anorexia	7 (10%)	..	..	7 (10%)	13 (19%)	..	..	13 (19%)
Diarrhoea	..	1 (1%)	..	1 (1%)	17 (24%)	2 (3%)	..	19 (27%)
Edema limbs	8 (12%)	..	..	8 (12%)	10 (14%)	2 (3%)	..	12 (17%)
Wound infection	1 (1%)	6 (9%)	..	7 (10%)	6 (9%)	7 (10%)	..	13 (19%)
Constipation	4 (6%)	..	..	4 (6%)	15 (21%)	..	..	15 (21%)
Cough	2 (3%)	..	..	2 (3%)	15 (21%)	..	..	15 (21%)
Pruritus	2 (3%)	..	..	2 (3%)	14 (20%)	..	..	14 (20%)
Hypertension	3 (4%)	2 (3%)	1 (1%)	6 (9%)	3 (4%)	6 (9%)	..	9 (13%)
Hypothyroidism	..	..	..	..	14 (20%)	1 (1%)	..	15 (21%)
Rash maculo-papular	..	..	..	..	15 (21%)	..	..	15 (21%)

Takeaways

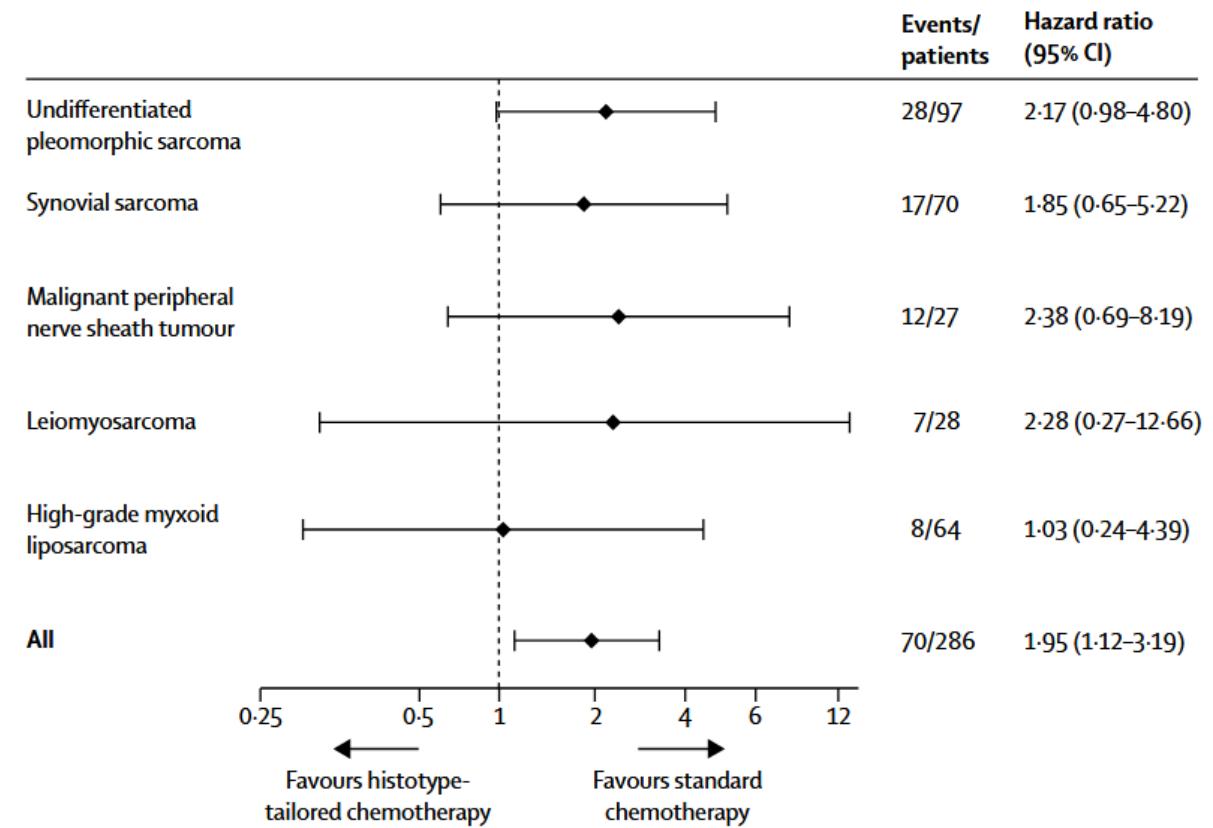
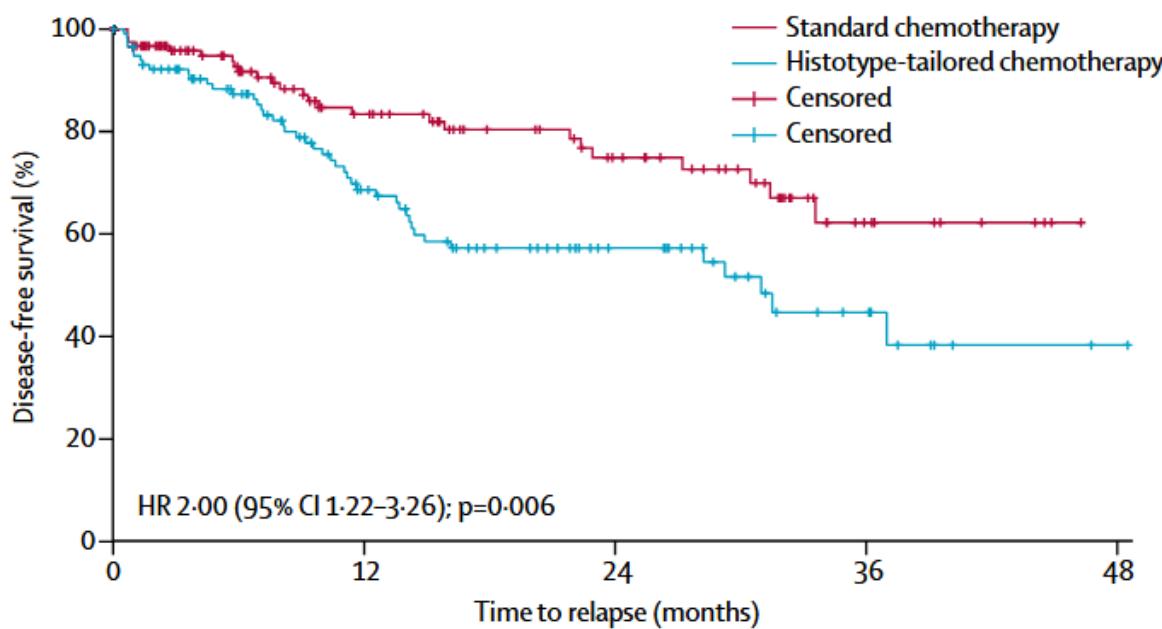
Pembrolizumab with neoadjuvant radiation is an option for grade 3 extremity Undifferentiated Pleomorphic Sarcoma (and similar entities including myxofibrosarcoma) based on Disease Free Survival

Might not be applicable to grade 2, or liposarcoma

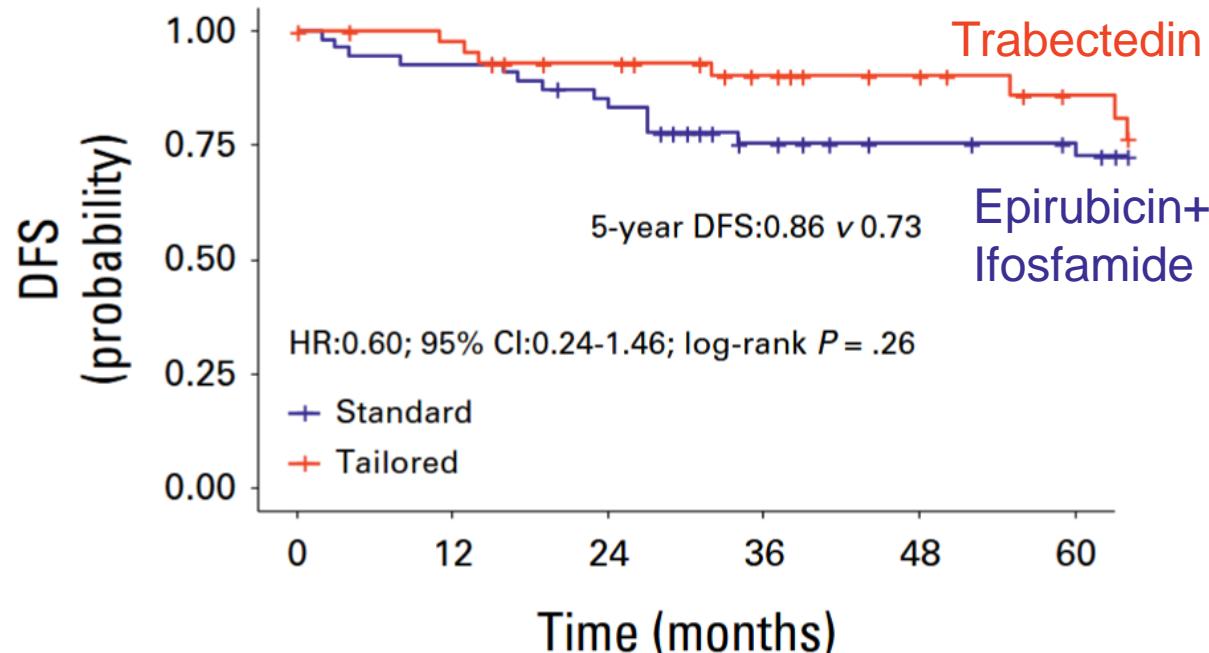
AIM is also still an option for patients <65-70 years if fit

Histotype tailored neoadjuvant therapy

Standard:	Epirubicin + Ifosfamide
UPS:	Gemcitabine + Docetaxel
Synovial sarcoma:	Ifosfamide continuous infusion
MPNST:	Ifosfamide + Etoposide
Leiomyosarcoma:	Gemcitabine + Dacarbazine
Myxoid liposarcoma:	Trabectedin

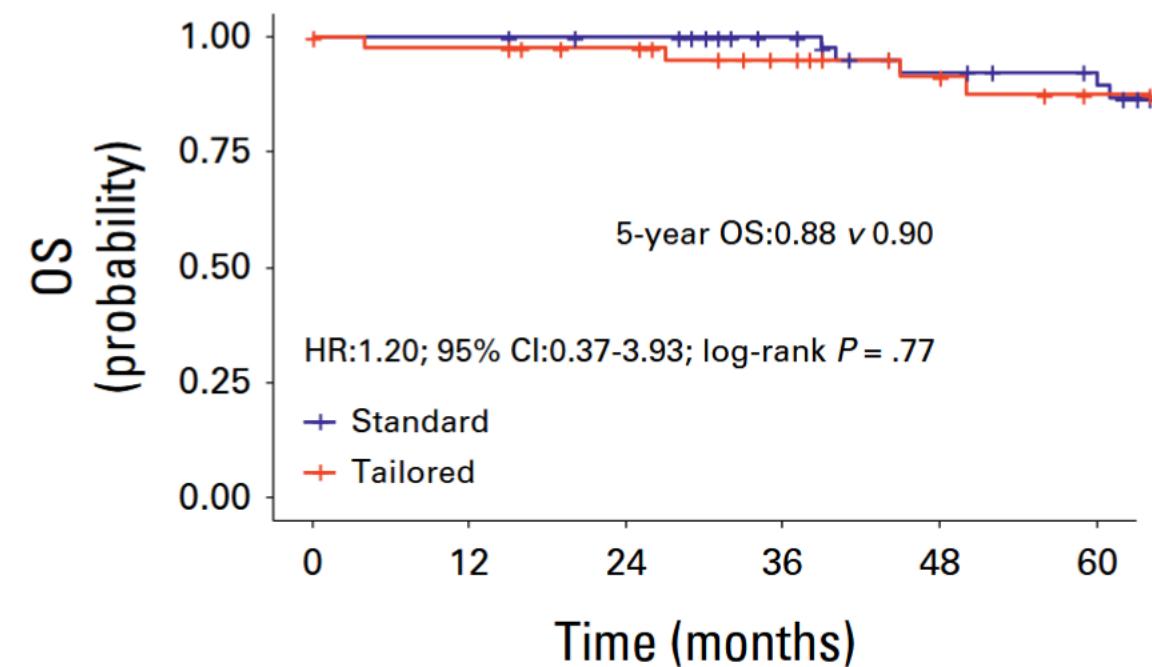


Myxoid Liposarcoma expansion cohort



No. at risk:

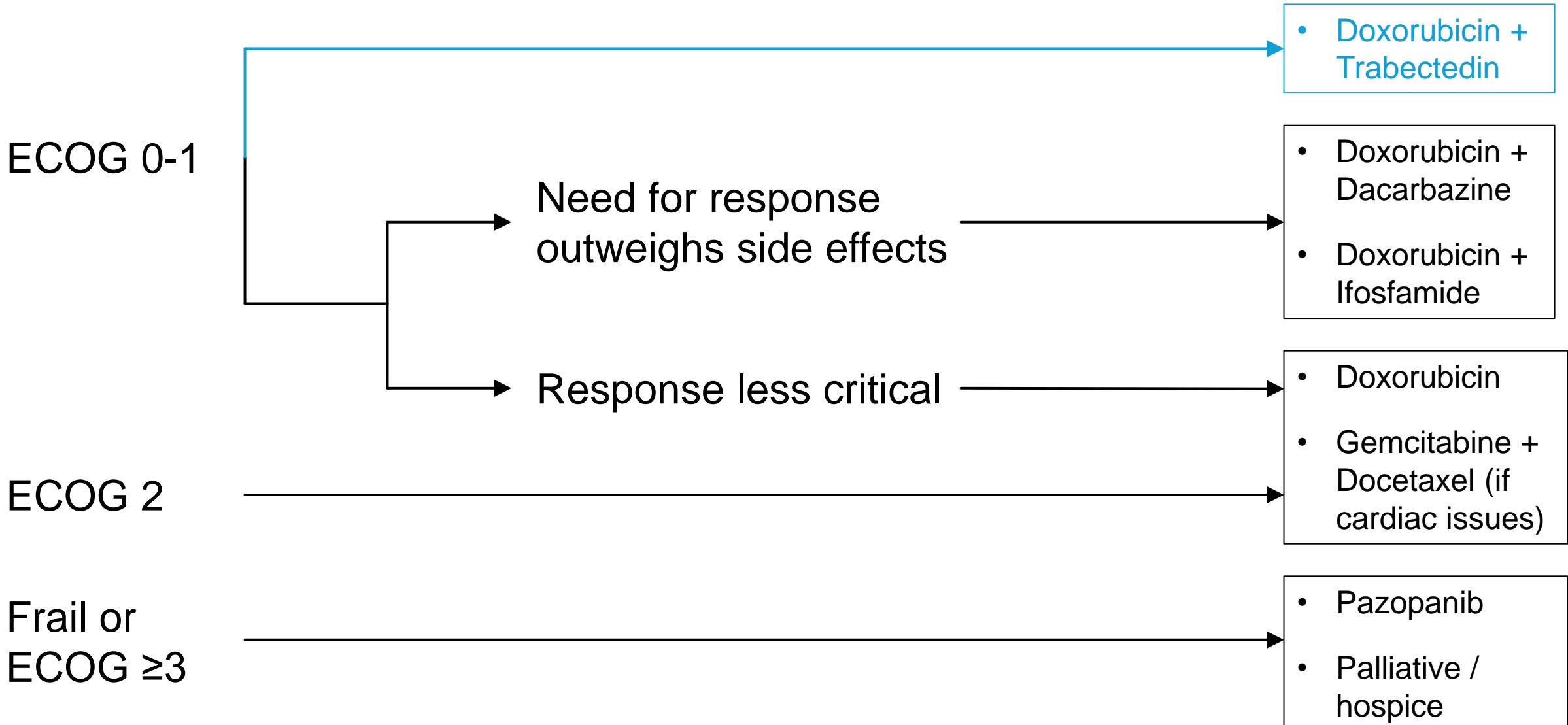
Standard	56	52	45	32	28	26
Tailored	45	42	37	30	23	18



No. at risk:

Standard	56	56	53	44	35	32
Tailored	45	43	40	33	25	20

Unresectable leiomyosarcoma: Early 2024 vs 2025



Doxorubicin-Trabectedin with Trabectedin Maintenance in Leiomyosarcoma

P. Pautier, A. Italiano, S. Piperno-Neumann, C. Chevreau, N. Penel, N. Firmin, P. Boudou-Rouquette, F. Bertucci, V. Lebrun-Ly, I. Ray-Coquard, E. Kalbacher, E. Bompas, O. Collard, N. Isambert, C. Guillemet, M. Rios, A. Le Cesne, C. Balleyguier, B. Archambaud, and F. Duffaud, for the French Sarcoma Group*

First line unresectable / metastatic leiomyosarcoma

6 cycles Doxorubicin (60 mg/m^2)
 Trabectedin (1.1 mg/m^2)

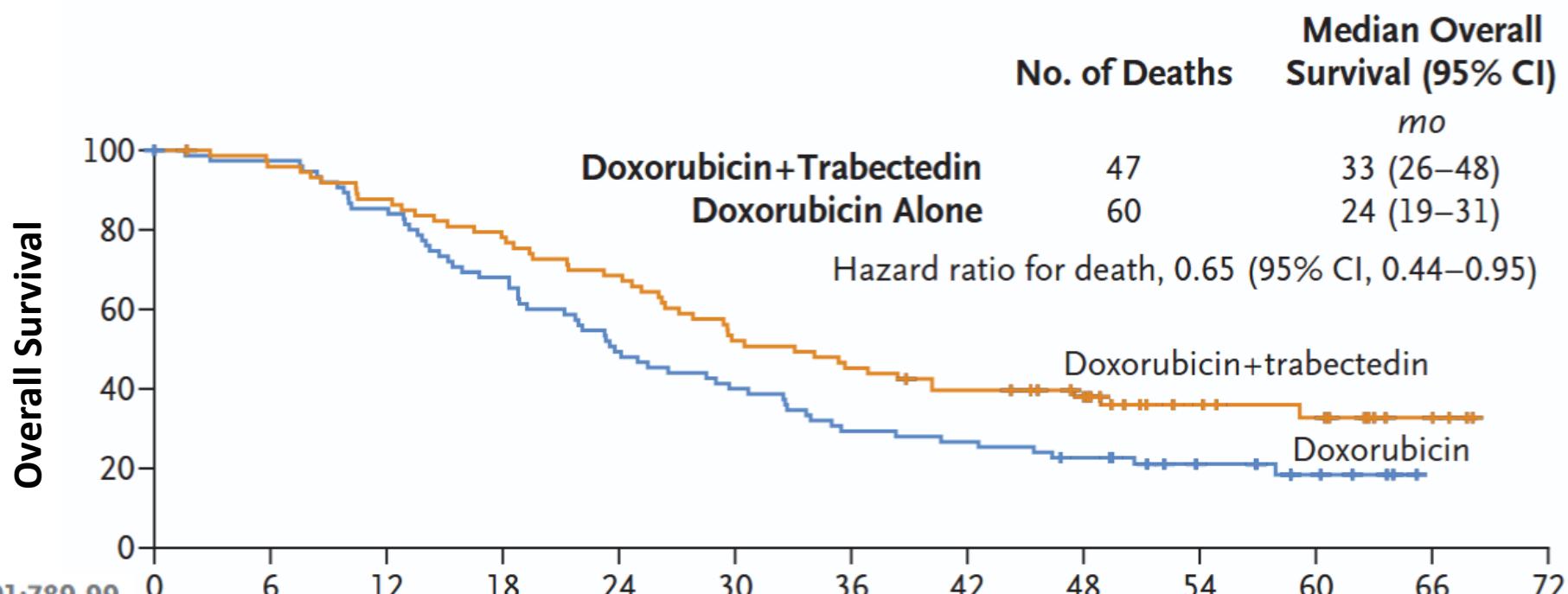
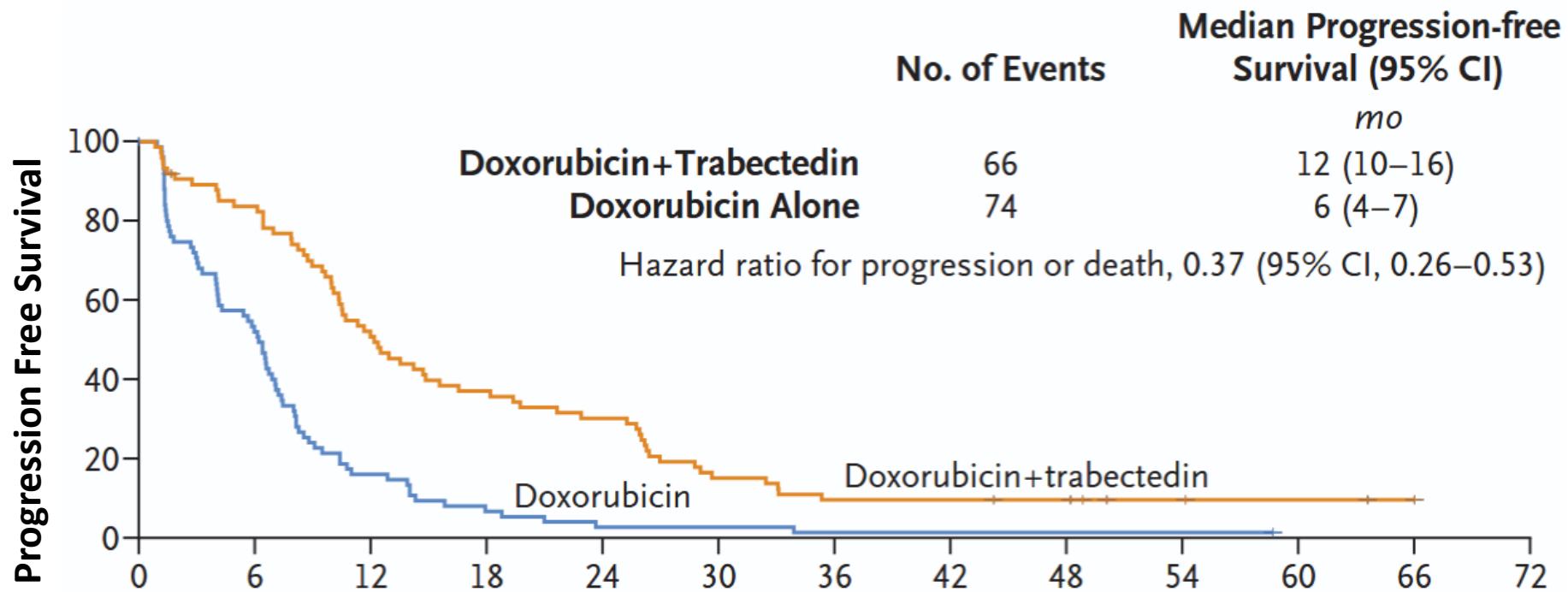
Then Trabectedin (1.1 mg/m^2)

versus

6 cycles Doxorubicin (75 mg/m^2)

Table 1. Characteristics of the Patients.*

Characteristic	Doxorubicin Alone (N=76)	Doxorubicin + Trabectedin (N=74)
Median age (range) — yr	64 (53–69)	59 (52–68)
Female sex — no. (%)	59 (78)	53 (72)
ECOG performance-status score — no./total no. (%)†		
0	45/74 (61)	47/70 (67)
1	29/74 (39)	23/70 (33)
Disease grade — no./total no. (%)‡		
1	8/42 (19)	11/41 (27)
2	16/42 (38)	11/41 (27)
3	10/42 (24)	12/41 (29)
Missing data	8/42 (19)	7/41 (17)
Site of primary tumor — no. (%)		
Uterus	34 (45)	33 (45)
Soft tissue	42 (55)	41 (55)

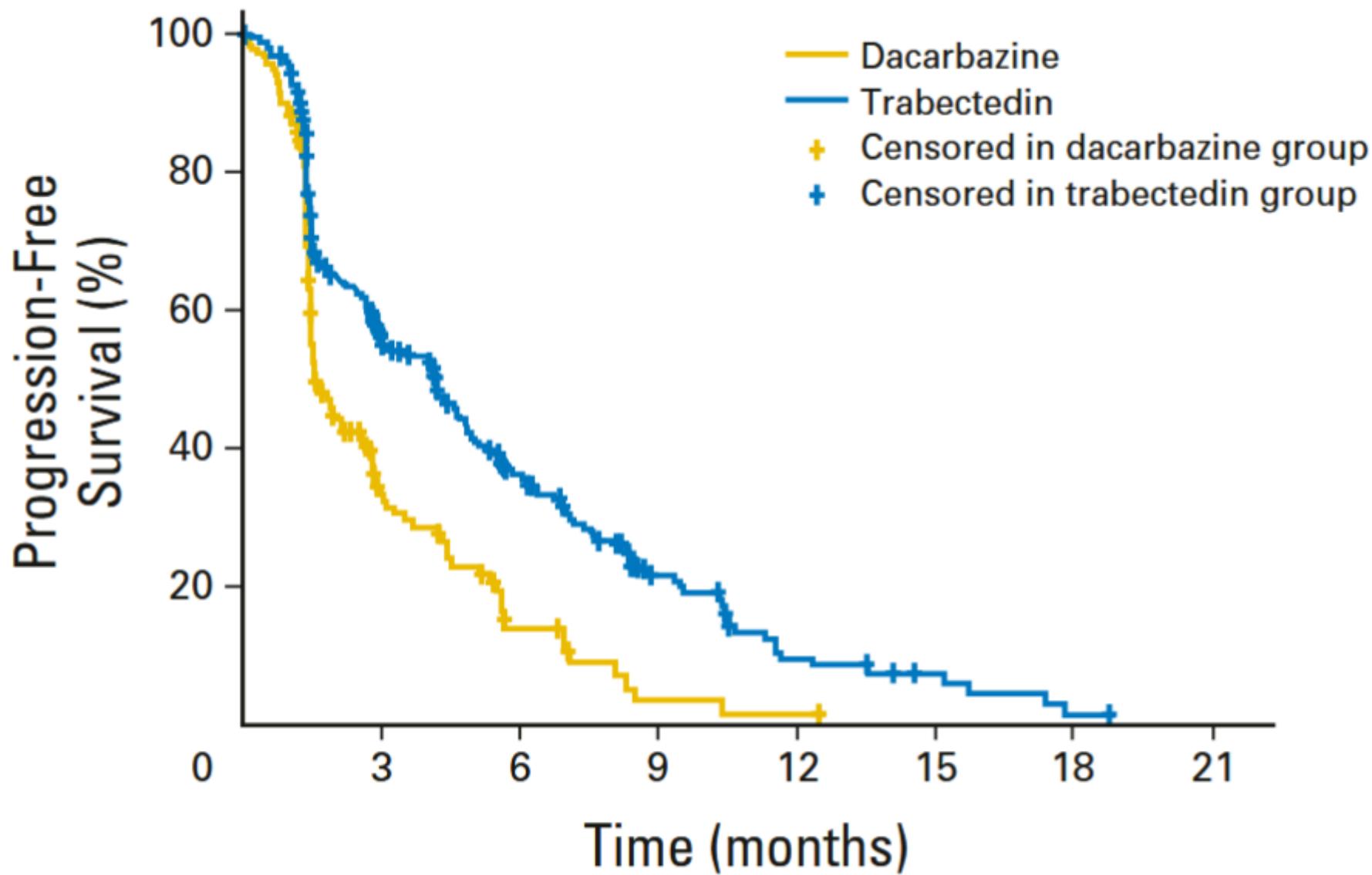


LMS-04 trial

	Doxorubicin	Doxorubicin + Trabectedin
CR	0	3/74 (4%)
CR+PR	10/76 (13%)	27/74 (36%)
Uterine	5/34 (15%)	12/33 (36%)
Non-uterine	5/42 (12%)	15/41 (37%)

EORTC retrospective data - First line leiomyosarcoma

	Doxorubicin	Doxorubicin + Ifosfamide	Doxorubicin + Dacarbazine
CR+PR	26%	20%	31%



	Doxorubicin alone group (n=75)				Doxorubicin and trabectedin group (n=74)			
	Grade 1-2*	Grade 3	Grade 4	Grade 5	Grade 1-2*	Grade 3	Grade 4	Grade 5
Anaemia	55 (73%)	0	4 (5%)	0	51 (69%)	20 (27%)	3 (4%)	0
Febrile neutropenia	3 (4%)	4 (5%)	3 (4%)	0	5 (7%)	7 (9%)	14 (19%)	0
Leukopenia	24 (32%)	2 (3%)	1 (1%)	0	10 (14%)	24 (32%)	32 (43%)	0
Lymphopenia	0	1 (1%)	0	0		4 (5%)	0	0
Neutropenia	20 (27%)	7 (9%)	3 (4%)	0	5 (7%)	14 (19%)	45 (61%)	0
Thrombocytopenia	6 (8%)	0	0	0	24 (32%)	17 (23%)	18 (24%)	0
Cardiac failure	0	1 (1%)	1 (1%)	1 (1%)	0	1 (1%)	0	0
Dyspnoea	9 (12%)	1 (1%)	0	0	10 (14%)	1 (1%)	0	0
Constipation	17 (23%)	1 (1%)	0	0	28 (38%)	1 (1%)	0	0
Diarrhoea	10 (13%)	1 (1%)	0	0	26 (35%)	2 (3%)	0	0
Dysgeusia	10 (13%)	0	0	0	10 (14%)	0	0	0
Enteritis	0	0	0	0	0	1 (1%)	0	0
Faecaloma	0	0	0	0	0	0	1 (1%)	0
Intestinal obstruction	0	1 (1%)	0	0	0	1 (1%)	0	0
Nausea	46 (61%)	1 (1%)	0	0	59 (80%)	5 (7%)	0	0
Vomiting	10 (13%)	0	0	0	59 (80%)	4 (5%)	0	0

Takeaways

Doxorubicin + trabectedin now the preferred approach for fit unresectable leiomyosarcoma patients

Applicable to uterine and extrauterine

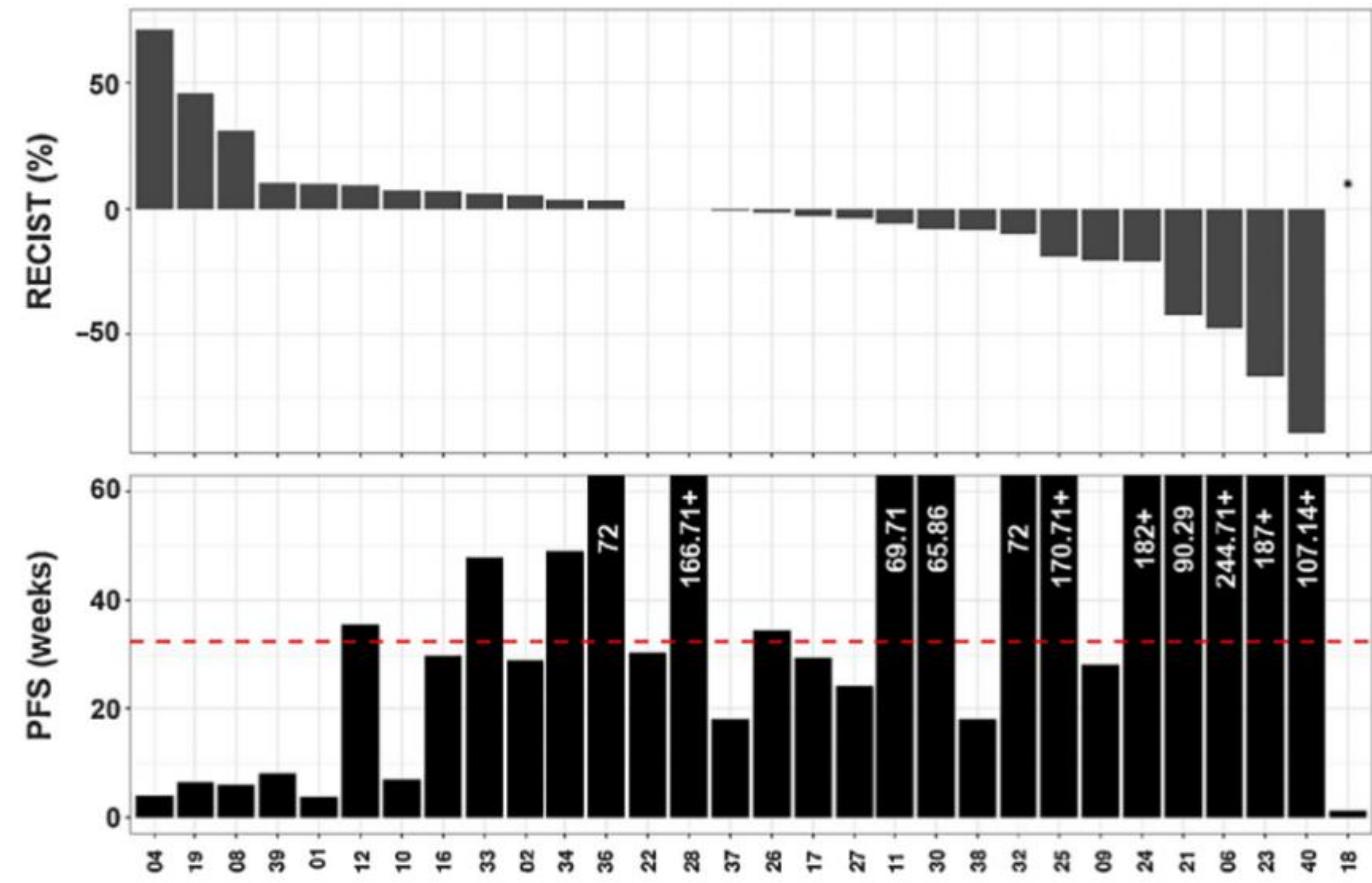
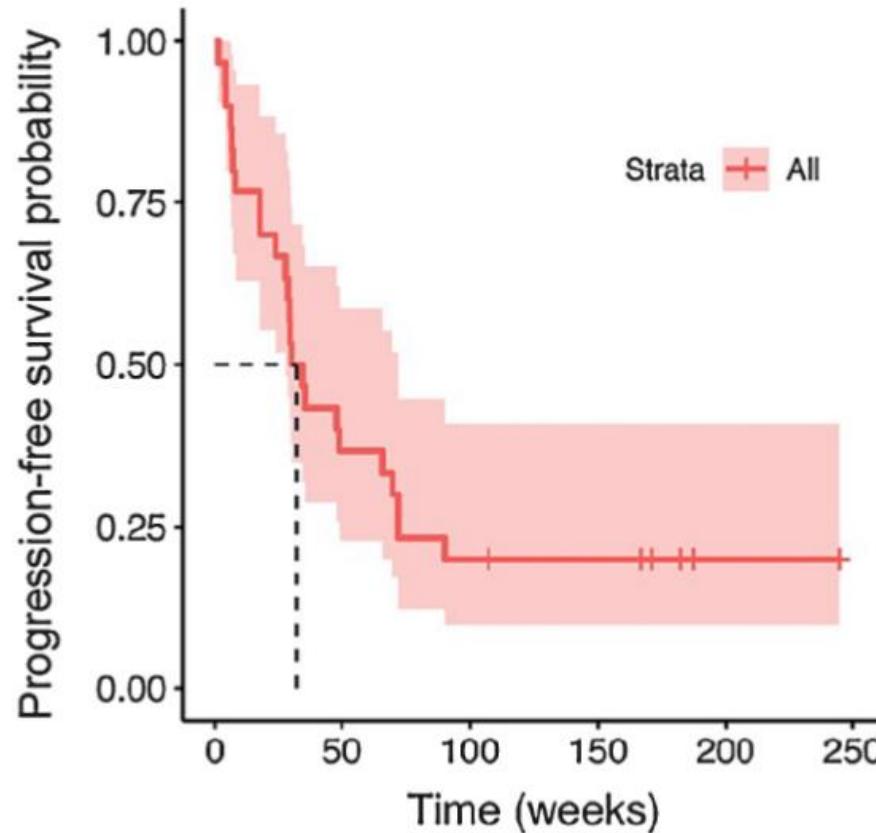
No data on neoadjuvant / adjuvant at this point

Unresectable dedifferentiated liposarcoma

Strongly associated with amplification of CDK4 and MDM2

Abemaciclib: mPFS 33 weeks, 15/30 patients after first line

Doxorubicin: mPFS 31 weeks, all first line in Brightline-1 trial (CTOS 2024)



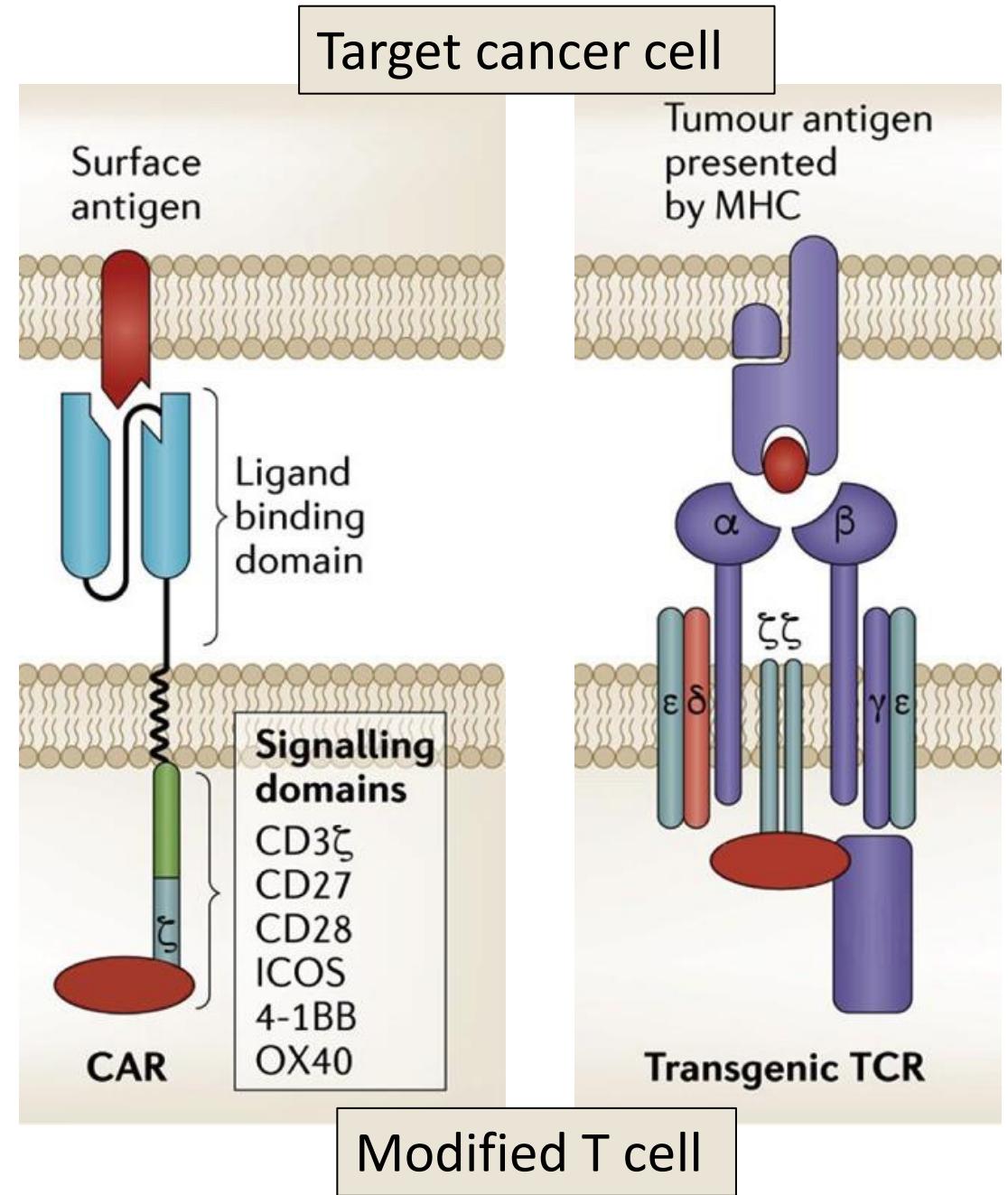
Synovial sarcoma

Afami-cel (afamitresgene autoleucel)

TCR-T cell targeting MAGE-A4

Must have MAGE-A4 expression (on tissue) and compatible HLA type

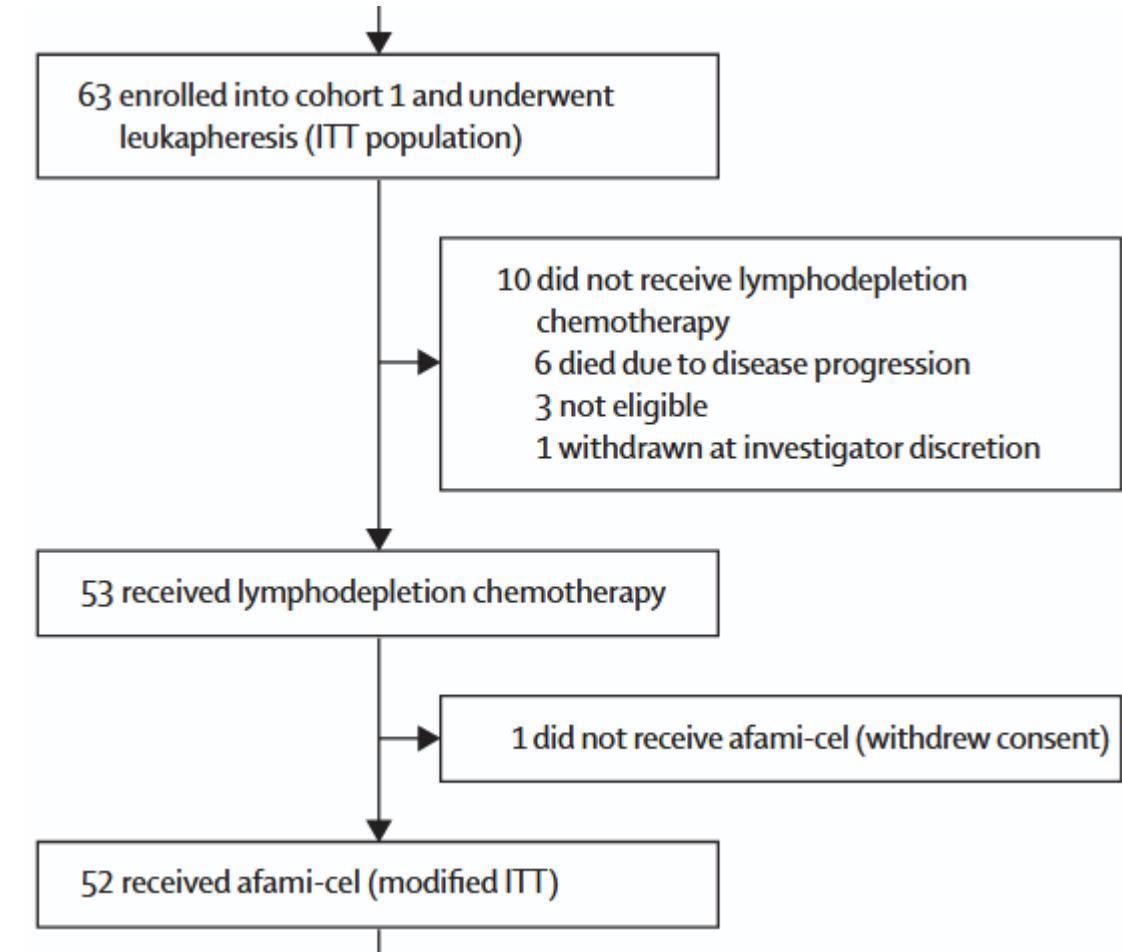
Testing available through
<https://www.tecelra-hcp.com>

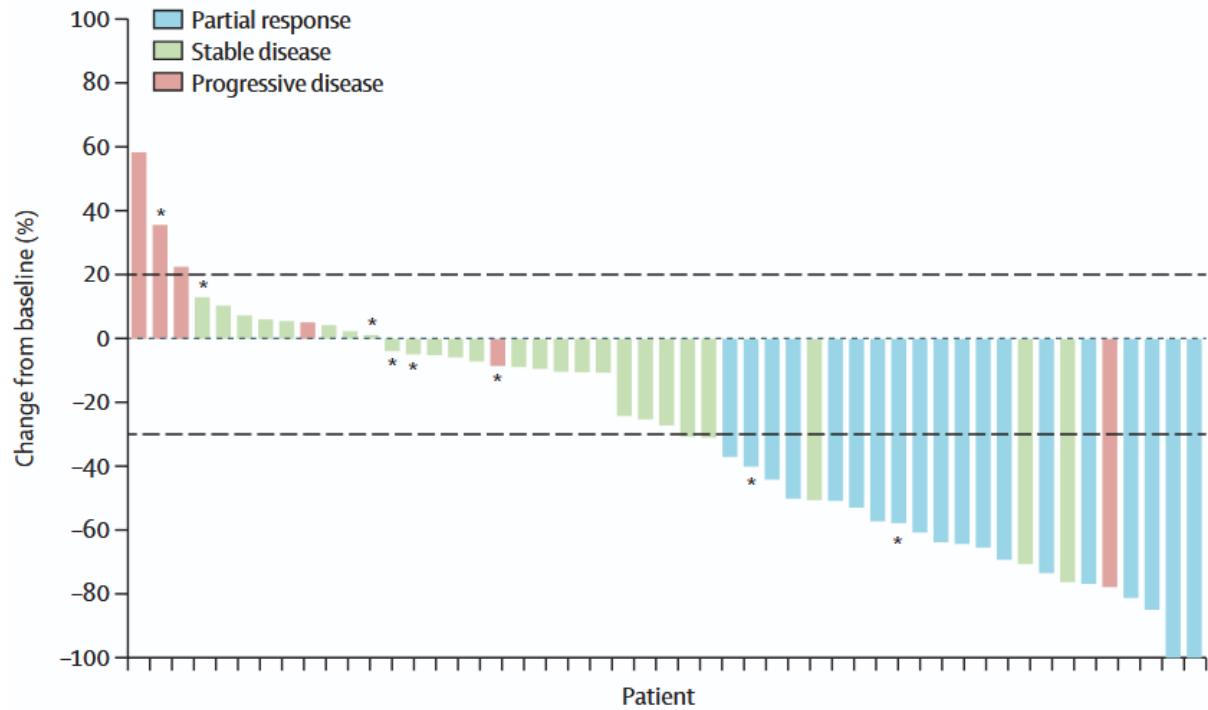


Afamitresgene autoleucel for advanced synovial sarcoma and myxoid round cell liposarcoma (SPEARHEAD-1): an international, open-label, phase 2 trial

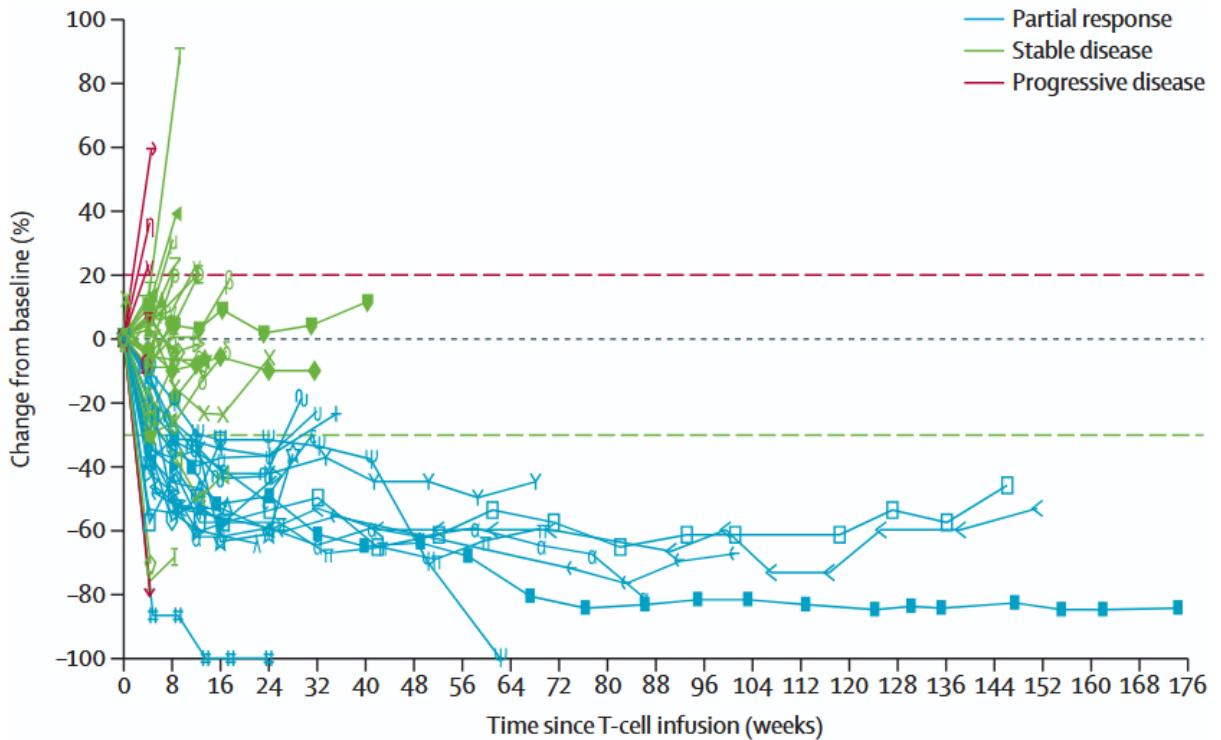
Synovial sarcoma or myxoid liposarcoma
After doxorubicin and/or ifosfamide
MAGE-A4 positive and compatible MHC
(28% of screened patients)

Leukapheresis
± Bridging therapy (~7 weeks)
Flu-Cy conditioning and T cell infusion
No IL-2 or other cytokines

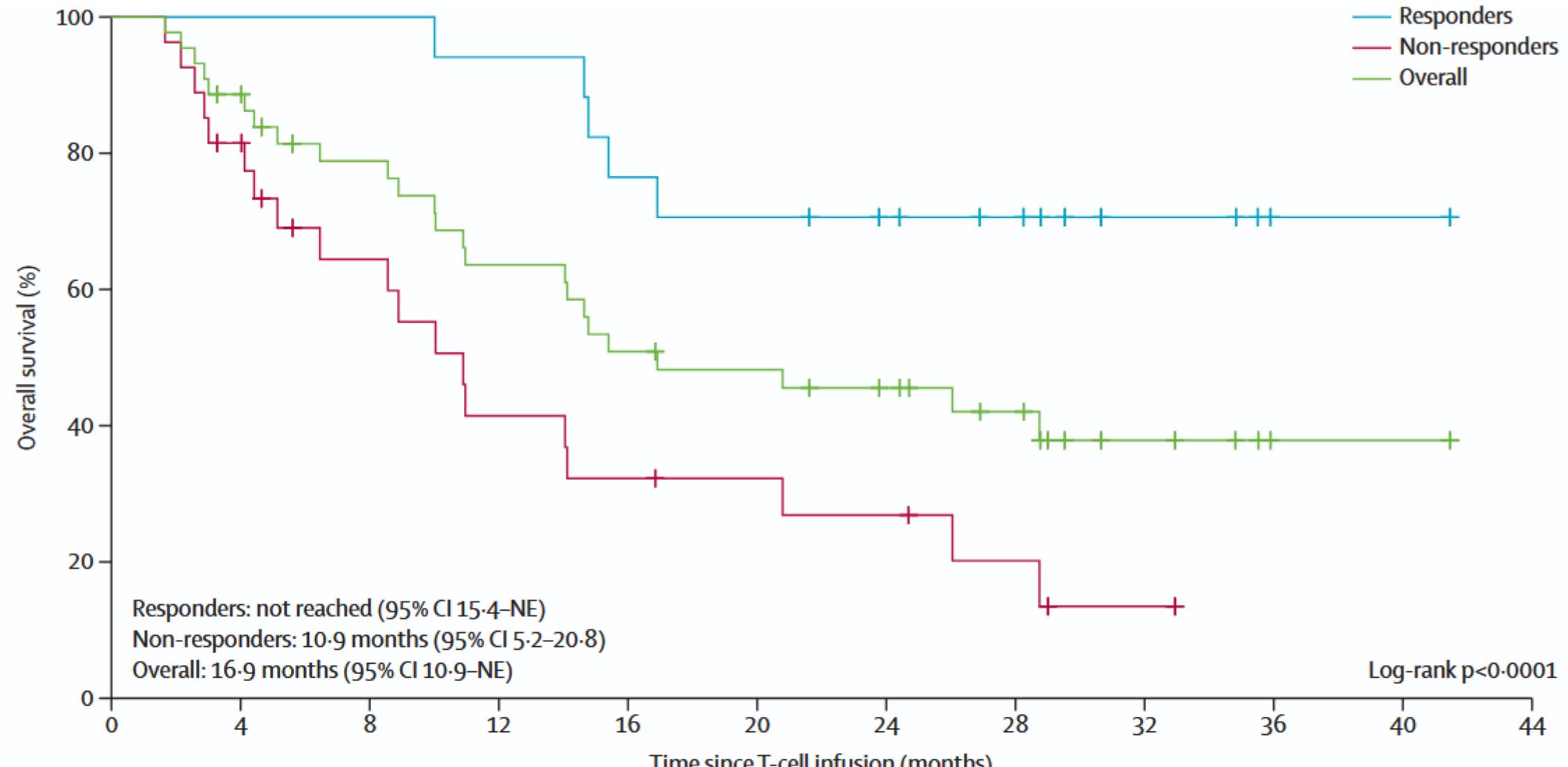




Asterisks – myxoid liposarcoma
39% ORR in synovial sarcoma



	Overall response rate (%)	n	(95% CI)
Bridging therapy			
Yes	25% (7-52)	4/16	
No	46% (28-66)	13/28	
Baseline sum of longest diameters of target lesions, mm			
≥100	24% (8-47)	5/21	
<100	55% (32-76)	12/22	
Sex			
Male	27% (11-50)	6/22	
Female	50% (28-72)	11/22	
Overall	39% (24-55)	17/44	



Number at risk (number censored)		Time since T-cell infusion (months)											
Responders	17 (0)	17 (0)	17 (0)	16 (0)	13 (0)	12 (0)	10 (2)	8 (4)	4 (8)	1 (11)	1 (11)	0 (12)	
Non-responders	27 (0)	21 (1)	14 (4)	9 (4)	7 (4)	6 (5)	5 (5)	3 (6)	1 (7)	0 (8)	..	..
Overall	44 (0)	38 (1)	31 (4)	25 (4)	20 (4)	18 (5)	15 (7)	11 (10)	5 (15)	1 (19)	1 (19)	0 (20)	

CRS: low grade was common, grade 3 in 1 patient

ICANS: grade 1 in 1 patient, resolved in 1 day

Cytopenias >1 month: 11% neutropenia

9% anemia

5% thrombocytopenia

Daily (likely inpatient) monitoring for 1 week, then closely for 1 month

	Grade 1–2	Grade 3	Grade 4	Overall
Cytokine release syndrome	36 (69%)	1 (2%)	0	37 (71%)
Decreased white blood cell count or leukopenia	1 (2%)	8 (15%)	5 (10%)	14 (27%)
Pyrexia	10 (19%)	1 (2%)	1 (2%)	12 (23%)
Decreased neutrophil count or neutropenia	1 (2%)	5 (10%)	6 (12%)	12 (23%)
Decreased lymphocyte count or lymphopenia	0	3 (6%)	6 (12%)	9 (17%)
Nausea	6 (12%)	0	0	6 (12%)
Fatigue	6 (12%)	0	0	6 (12%)
Decreased platelet count or thrombocytopenia	3 (6%)	1 (2%)	2 (4%)	6 (12%)
Weight loss	2 (4%)	1 (2%)	0	3 (6%)
Febrile neutropenia	1 (2%)	2 (4%)	0	3 (6%)

Takeaways

Afami-cel is an option in HLA compatible and MAGE-A4 expressing synovial sarcoma with possibility of durable benefit from a single treatment

Modest CRS and ICANS compared to CAR-T

Long lead time for testing, referral, leukapheresis, and administration

Summary

Perioperative

- Undifferentiated Pleomorphic Sarcoma / Myxofibrosarcoma – Pembro
- Myxoid Liposarcoma – Trabectedin

Unresectable

- Leiomyosarcoma – Doxorubicin + Trabectedin
- Dedifferentiated Liposarcoma – Abemaciclib

Later line of therapy

- Synovial Sarcoma – Afami cel