Highlight from ASCO 2018: Omacetaxine Mepesuccinate after HMA Failure in High-risk MDS

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Hello, I am Guillermo Garcia-Manero. I am a Professor of Medicine in the Department of Leukemia at MD Anderson Cancer Center, where I also serve as the Chief of the Section of Myelodysplastic Syndromes. I am going to briefly discuss with you a presentation by Dr. Sanchez Petitto at the ASCO 2018 meeting here in Chicago. The presentation is going to be about the use of omacetaxine for patients with myelodysplastic syndrome, particularly what we call HMA failure. As the audience probably knows, omacetaxine is an agent that has clinical activity in chronic myelogenous leukemia and indeed it has some indications in CML. We have been exploring the activity of omacetaxine in both acute myelogenous leukemia and in MDS. Data from Chinese investigators have indicated that potentially this compound or similar compounds of this class with low-dose cytarabine will have significant activity in AML. With that, we designed a small pilot clinical trial of omacetaxine for patients with MDS in this context of HMA failure. It is a study basically to guide us in terms of the toxicity and activity of this compound. We used an attenuated schedule of this drug: basically three days, injectable subcutaneous twice a day. The data that we are going to be presenting at ASCO this year is quite interesting and perhaps a little bit unexpected. We are seeing an excellent toxicity profile, but we are excited to see responses and, most importantly, duration of responses that are quite superior to what you would expect in these very poor-risk patients with myelodysplastic syndrome that have failed a hypomethylating agent. Some of these data were already presented by Dr. Short and Dr. Jabbour at the ASH meeting last year. I think this data is of enough interest to potentially move into a larger phase 2 trial.

Thank you very much.

Reference

[https://meetinglibrary.asco.org/record/162484/abstract](https://meetinglibrary.asco.org/record/162484/abstract)