

# A Study Evaluating Atezolizumab, With or Without Bevacizumab, in Participants With Unresectable Hepatocellular Carcinoma and Child-Pugh B7 and B8 Cirrhosis

**Status:** RECRUITING

## Eligibility Criteria

**Age:** 18 years and over

This study is NOT accepting healthy

**Healthy Volunteers:** volunteers

General

### Inclusion Criteria:

\* Locally advanced or metastatic and/or unresectable HCC with diagnosis confirmed by histology/cytology or clinically by American Association for the Study of Liver Diseases (AASLD) criteria in cirrhotic participants \* Disease that is not amenable to curative surgical and/or locoregional therapies \* No prior systemic treatment (including systemic investigational agents) for locally advanced or metastatic and/or unresectable HCC \* Measurable disease (at least one untreated target lesion) according to RECIST v1.1 \* ECOG Performance Status of 0-2 within 7 days prior to initiation of study treatment \* Child-Pugh B7 or B8 cirrhosis at screening and within 7 days prior to study treatment \* Adequate hematologic and end-organ function \* Life expectancy of at least 12 weeks \* Female participants of childbearing potential must be willing to avoid pregnancy and egg donation \* Absolute neutrophil count  $\geq 1.0 \times 10^9/L$  ( $\geq 1000/\mu L$ ) without granulocyte colony-stimulating factor support \* Platelet count  $\geq 50 \times 10^9/L$  (50,000/ $\mu L$ ) without transfusion \* Hemoglobin  $\geq 80$  g/L (8 g/dL) AST and ALT  $\leq 5 \times$  upper limit of normal (ULN) \* Serum bilirubin  $\leq 3 \times$  ULN \* Creatinine clearance  $\geq 50$  mL/min (calculated using the Cockcroft-Gault formula) \* Serum albumin  $\geq 20$  g/L (2.0 g/dL) without transfusion in the prior 3 months \* INR  $\leq 2.3$  General

### Exclusion Criteria:

\* Pregnancy or breastfeeding \* Prior treatment with CD137 agonists or immune checkpoint blockade therapies \* Treatment with investigational therapy within 28 days prior to initiation of study treatment \* Treatment with locoregional therapy to liver within 28 days prior to initiation of study treatment, or non-recovery from side effects of any such procedure \* Treatment with systemic immunostimulatory agents \* Treatment with systemic immunosuppressive medication \* Treatment with a live, attenuated vaccine within 4 weeks prior to initiation of study treatment \* Inadequately controlled hypertension \* Active or history of autoimmune disease or immune deficiency \* History of idiopathic pulmonary fibrosis, organizing pneumonia, drug-induced pneumonitis, or idiopathic pneumonitis, or evidence of active pneumonitis on screening chest computed tomography (CT) scan \* Participants who have a known concurrent malignancy that is progressing or requires active treatment, who have not completely recovered from treatment, or who have a significant malignancy history that, in the opinion of the investigator, should preclude participation. \* Participants on preventative hormonal therapies (i.e., tamoxifen and other hormonal inhibitors) are not excluded. \* Known fibrolamellar HCC, sarcomatoid HCC, other rare HCC variant, or mixed cholangiocarcinoma and HCC \* Symptomatic, untreated, or actively progressing central nervous system (CNS) metastases \* Prior allogeneic stem cell or solid organ transplantation \* Actively listed for liver transplantation \* Co-infection with hepatitis B virus (HBV) and hepatitis C virus (HCV) \* Untreated or incompletely treated esophageal and/or gastric varices with bleeding or that are at high risk for bleeding \* A prior bleeding event due to esophageal and/or gastric varices within 6 months prior to initiation of study treatment \* Grade  $\geq 3$  hemorrhage or bleeding event within 6 months prior to initiation of study treatment \* Hepatic encephalopathy is allowed if no active symptoms or stable within 3 months of study treatment \* History, planned, or recommended placement of transjugular intrahepatic portosystemic shunt (TIPS) is excluded from Cohort A only. TIPS is acceptable in Cohort B. \* Diagnostic Paracentesis is allowed. Therapeutic Paracentesis within 3 months is an exclusion criteria \* Participants with ascites controlled on diuretics are allowed. \* History of spontaneous bacterial peritonitis within last 12 months

## Conditions & Interventions

### Interventions:

DRUG: Atezolizumab, DRUG: Bevacizumab

### Conditions:

Hepatocellular Carcinoma

### Keywords:

Cirrhosis, liver cancer, liver tumor, Child-Pugh B, hepatocellular carcinoma, atezolizumab, bevacizumab, Immune Checkpoint Inhibitor, Digestive System Neoplasms, Kirros, ML44719, liver disease, Genentech, Immunotherapy, CPB, CPB 7, CPB 8, Tecentriq, Avastin, HCC, Cirrhotic Liver, Fatty Liver

## More Information

**Contact(s):** Reference Study ID Number: ML44719 <https://forpatients.roche.com/> - [global-roche-genentech-trials@gene.com](mailto:global-roche-genentech-trials@gene.com)

**Principal Investigator:**

**Phase:** PHASE2

**IRB**

**Number:**

**System ID:** NCT06096779

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