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Preliminary Safety, Pharmacokinetic, and Clinical Activity Results With FHD-286, a BRG1/BRM Inhibitor, Plus Decitabine in a Phase 1 Study in Patients With Relapsed or Refractory Myeloid Malignancies

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Introduction

- FHD-286 is a potent dual inhibitor of SMARCA2 and SMARCA4 (BRG1 and BRM), key dependencies in myeloid malignancies.
- FHD-286 induced myeloid differentiation and antileukemic activity as monotherapy in pts with R/R AML or MDS.[1]
- Nonclinical studies suggesting enhanced antitumor activity in combination with DAC supported evaluating FHD-286+DAC.
- Study FHD-286-C-002 (NCT04891757) is a multicenter, open-label, Phase 1 dose escalation trial of FHD-286+DAC in pts with R/R myeloid malignancies.
- All pts signed informed consent; study has concluded.

Study Design

Group B1: *Not* receiving triazole classified as a strong CYP3A inhibitor at baseline

Continuous Dosing: 2.5 mg QD → 5 mg QD → 7.5 mg QD
Interval Dosing: 7.5/5 mg QD → 7.5/10 mg QD

Group B2: Receiving triazole classified as a strong CYP3A inhibitor at baseline

Continuous Dosing: 1.5 mg QD → 2.5 mg QD
Interval Dosing: 1.5/2.5 mg QD

All patients also received DAC 20 mg/m^2 on Days 1-5 of each 28-day cycle. An independent committee monitored safety data.
Interval dosing: First dose given for first 2 weeks of each cycle; second dose given for second 2 weeks of each cycle.

Endpoints: Safety, tolerability, DLTs, PK, PD, preliminary clinical activity

Key Eligibility Criteria: R/R AML, R/R MDS, or R/R CMML; ≤4 prior lines of systemic therapy; appropriate candidate for treatment with DAC

Dose Assignment: Separate groups based on whether pts were taking (Group B2) or not taking (Group B1) a triazole antifungal classified as a strong CYP3A inhibitor at baseline

Results

Baseline Demographics and Disease Characteristics

- Demographics and disease characteristics were similar in Groups B1 and B2.

Patient Disposition

- Most common reason for study discontinuation was death (34 [72%] pts).
- In Group B1, duration of exposure to FHD-286 was longer at lower dose levels.

Safety

- FHD-286 was better tolerated among pts in Group B1 than B2, with fewer treatment discontinuations, fewer DLTs, and higher doses tested.
- The highest dose cleared was 7.5 mg QD in B1, and 1.5 mg QD in B2.
- The number of pts with investigator-reported DS was similar in Groups B1 (4 pts) and B2 (5 pts) and DS was Grade 3 in 4 of these 9 pts. DS was managed with standard supportive measures.

Plasma Pharmacokinetics

- FHD-286 exposure increased with increasing dose.
- FHD-286 is estimated to have a long half-life (> 24 h).
- Accumulation was observed at all doses.
- Among pts treated at 2.5 mg QD, FHD-286 exposure at steady state was ~3-fold higher in Group B2 than B1.

Clinical Activity

- ORR: 13% (6/47)
  - CRp: 4% (2/47; AML; Group B1)
  - MLFS: 6% (3/47; AML; 1 in Group B1, 2 in Group B2)
  - PR: 2% (1/47; MDS; Group B1)
- Median DoR: 1.99 mos (95% CI 1.28, NE)
- Median EFS: 1.68 mos (95% CI 1.12, 1.94)
- Median OS: 3.68 mos (95% CI 1.94, 5.49)

Pharmacodynamics

- In keeping with the differentiation mechanism of FHD-286, dose-dependent increases in CD11b and decreases in CD34 were observed in bone marrow blasts by flow cytometry.

Baseline Demographics and Disease Characteristics

FHD-286 Group and Dose Level (mg QD, in combination with DAC 20 mg/m^2 QD Days 1-5)

Parameter		Group B1 2.5 (N=7)	B1 5 (N=6)	B1 7.5 (N=6)	B1 7.5/5 (N=3)	B1 7.5/10 (N=6)	B1 Total (N=28)	Group B2 1.5 (N=4)	B2 1.5/2.5 (N=4)	B2 2.5 (N=11)	B2 Total (N=19)	B1+B2 Overall (N=47)
Age (years), median (min, max)		78 (27, 84)	52 (23, 77)	69 (32, 80)	56 (30, 70)	69 (66, 74)	67 (23, 84)	41 (19, 71)	64 (41, 81)	67 (35, 81)	65 (19, 81)	66 (19, 84)
Sex, n (%)	Male	3 (50)	3 (50)	4 (67)	1 (33)	4 (67)	15 (54)	2 (50)	2 (50)	5 (46)	9 (47)	24 (51)
	Female	4 (57)	3 (50)	2 (33)	2 (67)	2 (33)	13 (46)	2 (50)	2 (50)	6 (55)	10 (53)	23 (49)
ECOG PS, n (%)	0 or 1	5 (71)	4 (67)	4 (67)	2 (67)	5 (83)	20 (71)	3 (75)	4 (100)	6 (55)	13 (68)	33 (70)
	2	2 (29)	2 (33)	2 (33)	1 (33)	1 (17)	8 (29)	1 (25)	0	5 (46)	6 (32)	14 (30)
Diagnosis, n (%)	AML	6 (86)	6 (100)	4 (67)	3 (100)	5 (83)	24 (86)	4 (100)	4 (100)	10 (91)	18 (95)	42 (89)
	MDS	1 (14)	0	1 (17)	0	1 (17)	3 (11)	0	0	1 (9)	1 (5)	4 (9)
	CMML	0	0	1 (17)	0	0	1 (4)	0	0	0	0	1 (2)
Cytogenetic risk, n (%)	Favorable	0	1 (17)	0	1 (33)	0	2 (7)	0	0	0	0	2 (4)
	Intermediate	0	0	2 (33)	1 (33)	0	3 (11)	0	0	4 (36)	4 (21)	7 (15)
	Adverse	5 (71)	4 (67)	4 (67)	0	5 (83)	18 (64)	4 (100)	3 (75)	7 (64)	14 (74)	32 (68)
	Missing	2 (29)	1 (17)	0	1 (33)	1 (17)	5 (18)	0	1 (25)	0	1 (5)	6 (13)
Mutational status[a], n (%)	*TP53* mutation	4 (57)	1 (17)	2 (33)	1 (33)	2 (33)	10 (36)	1 (25)	2 (50)	2 (18)	5 (26)	15 (32)
	Inv(3)/*MECOM* rearrangement	1 (14)	0	1 (17)	0	3 (50)	5 (18)	1 (25)	1 (25)	2 (18)	4 (21)	9 (19)
	KMT2A rearrangement	1 (14)	0	1 (17)	0	0	2 (7)	0	0	2 (18)	2 (11)	4 (9)
	NPM1 mutation	0	1 (17)	0	0	0	1 (4)	0	1 (25)	0	1 (5)	2 (4)
	FLT3 mutation	0	0	0	0	0	0	1 (25)	0	0	1 (5)	1 (2)
Number of prior lines of systemic anticancer therapy, median (min, max)		2 (1, 5)	4 (1, 4)	2 (1, 5)	4 (3, 7)	2 (1, 4)	3 (1, 7)	5 (3, 6)	2 (1, 6)	3 (1, 9)	3 (1, 9)	3 (1, 9)
Prior therapy, n (%)	Any	7 (100)	6 (100)	6 (100)	3 (100)	6 (100)	28 (100)	4 (100)	4 (100)	11 (100)	19 (100)	47 (100)
	HMA(s)	7 (100)	6 (100)	6 (100)	3 (100)	5 (83)	27 (96)	4 (100)	4 (100)	10 (91)	18 (95)	45 (96)
	Venetoclax	7 (100)	6 (100)	5 (83)	3 (100)	6 (100)	27 (96)	4 (100)	4 (100)	10 (91)	18 (95)	45 (96)
	Cytarabine-based	3 (43)	5 (83)	4 (67)	2 (67)	4 (67)	18 (64)	4 (100)	2 (50)	8 (73)	14 (74)	32 (68)
	HSCT	2 (29)	3 (50)	1 (17)	3 (100)	0	9 (32)	1 (25)	0	3 (27)	4 (21)	13 (28)
	Menin inhibitor	0	0	1 (17)	1 (33)	0	2 (7)	0	0	0	0	2 (4)

[a]*KMT2A* rearrangement: t(9;11), *KMT2A*, and/or *MLL* abnormalities. *TP53* mutation: *TP53* mutation and/or del(17p).

Patient Disposition and Duration of Treatment

FHD-286 Group and Dose Level (mg QD, in combination with DAC 20 mg/m^2 QD Days 1-5)

Parameter	Group B1 2.5 (N=7)	B1 5 (N=6)	B1 7.5 (N=6)	B1 7.5/5 (N=3)	B1 7.5/10 (N=6)	B1 Total (N=28)	Group B2 1.5 (N=4)	B2 1.5/2.5 (N=4)	B2 2.5 (N=11)	B2 Total (N=19)	B1+B2 Overall (N=47)
Duration of exposure (days), median (min, max)											
FHD-286	70 (21, 161)	54 (18, 150)	31 (16, 170)	41 (1, 77)	18 (10, 98)	38 (1, 170)	35 (26, 153)	29 (25, 37)	26 (11, 56)	28 (11, 153)	30 (1, 170)
DAC	61 (5, 146)	31 (5, 39)	5 (5, 67)	33 (1, 68)	5 (5, 89)	30 (1, 146)	19 (5, 130)	5 (5, 38)	5 (5, 34)	5 (5, 130)	5 (1, 146)
Discontinued treatment (reason), n (%)	**7 (100)**	**6 (100)**	**6 (100)**	**3 (100)**	**6 (100)**	**28 (100)**	**4 (100)**	**4 (100)**	**11 (100)**	**19 (100)**	**47 (100)**
AE	1 (14)	0	2 (33)	2 (67)	3 (50)	8 (29)	2 (50)	2 (50)	5 (46)	9 (47)	17 (36)
PD/TF	1 (14)	2 (33)	3 (50)	0	0	6 (21)	1 (25)	0	2 (18)	3 (16)	9 (19)
Withdrawal of consent	3 (43)	2 (33)	1 (17)	0	1 (17)	7 (25)	0	0	1 (9)	1 (5)	8 (17)
PI decision	1 (14)	0	0	0	2 (33)	3 (11)	1 (25)	2 (50)	2 (18)	5 (26)	8 (17)
Clinical suspicion of PD	1 (14)	1 (17)	0	0	0	2 (7)	0	0	1 (9)	1 (5.3)	3 (6)
Patient decision	0	1 (17)	0	1 (33)	0	2 (7)	0	0	0	0	2 (4)

Summary of TEAEs; TEAEs With Frequency >30%

FHD-286 Group and Dose Level (mg QD, in combination with DAC 20 mg/m^2 QD Days 1-5)

Parameter, n (%)	Group B1 2.5 (N=7)	B1 5 (N=6)	B1 7.5 (N=6)	B1 7.5/5 (N=3)	B1 7.5/10 (N=6)	B1 Total (N=28)	Group B2 1.5 (N=4)	B2 1.5/2.5 (N=4)	B2 2.5 (N=11)	B2 Total (N=19)	B1+B2 Overall (N=47)
Any TEAE	**7 (100)**	**6 (100)**	**6 (100)**	**3 (100)**	**6 (100)**	**28 (100)**	**4 (100)**	**4 (100)**	**11 (100)**	**19 (100)**	**47 (100)**
Hypokalemia	2 (29)	4 (67)	3 (50)	2 (67)	3 (50)	14 (50)	3 (75)	2 (50)	6 (55)	11 (58)	25 (53)
Fatigue	6 (86)	3 (50)	2 (33)	0	1 (17)	12 (43)	2 (50)	2 (50)	5 (46)	9 (47)	21 (45)
Decr WBC count	3 (43)	4 (67)	3 (50)	1 (33)	3 (50)	14 (50)	2 (50)	1 (25)	3 (27)	6 (32)	20 (43)
Dyspnea	3 (43)	1 (17)	4 (67)	0	3 (50)	11 (39)	3 (75)	2 (50)	4 (36)	9 (47)	20 (43)
Nausea/vomiting	5 (71)	3 (50)	3 (50)	1 (33)	2 (33)	14 (50)	1 (25)	2 (50)	3 (27)	6 (32)	20 (43)
Cough	2 (29)	0	3 (50)	2 (67)	3 (50)	10 (36)	3 (75)	1 (25)	4 (36)	8 (42)	18 (38)
Decr neutrophil count	4 (57)	3 (50)	3 (50)	1 (33)	3 (50)	14 (50)	1 (25)	1 (25)	1 (9)	3 (16)	17 (36)
Diarrhea	1 (14)	2 (33)	3 (50)	0	4 (67)	10 (36)	4 (100)	1 (25)	2 (18)	7 (37)	17 (36)
Incr blood glucose	2 (29)	1 (17)	4 (67)	0	3 (50)	10 (36)	1 (25)	3 (75)	3 (27)	7 (37)	17 (36)
Febrile neutropenia	2 (29)	2 (33)	2 (33)	2 (67)	2 (33)	10 (36)	2 (50)	3 (75)	1 (9)	6 (32)	16 (34)
Incr blood bilirubin	2 (29)	1 (17)	3 (50)	1 (33)	3 (50)	10 (36)	0	2 (50)	4 (36)	6 (32)	16 (34)
Pneumonia	3 (43)	2 (33)	4 (67)	1 (33)	1 (17)	11 (39)	1 (25)	0	4 (36)	5 (26)	16 (34)
Stomatitis	1 (14)	2 (33)	4 (67)	1 (33)	0	8 (29)	0	2 (50)	6 (55)	8 (42)	16 (34)
Anemia	5 (71)	2 (33)	2 (33)	1 (33)	2 (33)	12 (43)	0	0	3 (27)	3 (16)	15 (32)
Any treatment-related TEAE	**6 (86)**	**3 (50)**	**5 (83)**	**1 (33)**	**3 (50)**	**18 (64)**	**2 (50)**	**3 (75)**	**8 (73)**	**13 (68)**	**31 (66)**
Any SAE	**7 (100)**	**5 (83)**	**6 (100)**	**3 (100)**	**6 (100)**	**27 (96)**	**4 (100)**	**4 (100)**	**10 (91)**	**18 (95)**	**45 (96)**
Any treatment-related SAE	**3 (43)**	**2 (33)**	**4 (67)**	**0**	**2 (33)**	**11 (39)**	**2 (50)**	**3 (75)**	**5 (46)**	**10 (53)**	**21 (45)**
Any TEAE leading to FHD-286 reduction	**0**	**1 (17)**	**0**	**0**	**1 (17)**	**2 (7)**	**0**	**0**	**0**	**0**	**2 (4)**
Any TEAE leading to FHD-286 interruption	**7 (100)**	**5 (83)**	**6 (100)**	**2 (67)**	**3 (50)**	**23 (82)**	**0**	**3 (75)**	**6 (55)**	**9 (47)**	**32 (68)**
Any TEAE leading to FHD-286 discontinuation	**1 (14)**	**0**	**2 (33)**	**2 (67)**	**4 (67)**	**9 (32)**	**2 (50)**	**2 (50)**	**3 (27)**	**7 (37)**	**16 (34)**
Any AESI (DS)	**1 (14)**	**0**	**1 (17)**	**0**	**2 (33)**	**4 (14)**	**2 (50)**	**1 (25)**	**2 (18)**	**5 (26)**	**9 (19)**

Summary of Grade ≥3 TEAEs Occurring in ≥10% of Pts; DLTs; 30- & 60-Day Mortality

FHD-286 Group and Dose Level (mg QD, in combination with DAC 20 mg/m^2 QD Days 1-5)

Parameter, n (%)	Group B1 2.5 (N=7)	B1 5 (N=6)	B1 7.5 (N=6)	B1 7.5/5 (N=3)	B1 7.5/10 (N=6)	B1 Total (N=28)	Group B2 1.5 (N=4)	B2 1.5/2.5 (N=4)	B2 2.5 (N=11)	B2 Total (N=19)	B1+B2 Overall (N=47)
Any Grade ≥ 3 TEAE	**7 (100)**	**6 (100)**	**6 (100)**	**3 (100)**	**6 (100)**	**28 (100)**	**4 (100)**	**4 (100)**	**11 (100)**	**19 (100)**	**47 (100)**
Decr WBC count	3 (43)	4 (67)	3 (50)	1 (33)	3 (50)	14 (50)	2 (50)	1 (25)	3 (27)	6 (32)	20 (43)
Decr neutrophil count	4 (57)	3 (50)	3 (50)	1 (33)	3 (50)	14 (50)	1 (25)	1 (25)	1 (9)	3 (16)	17 (36)
Febrile neutropenia	2 (29)	2 (33)	2 (33)	2 (67)	2 (33)	10 (36)	2 (50)	3 (75)	1 (9)	6 (32)	16 (34)
Anemia	5 (71)	2 (33)	2 (33)	1 (33)	2 (33)	12 (43)	0	0	3 (27)	3 (16)	15 (32)
Decr PLT count	5 (71)	3 (50)	1 (17)	0	3 (50)	12 (43)	0	0	2 (18)	2 (11)	14 (30)
Pneumonia	3 (43)	1 (17)	2 (33)	1 (33)	1 (17)	8 (29)	0	0	4 (36)	4 (21)	12 (26)
Hypokalemia	0	2 (33)	2 (33)	1 (33)	1 (17)	6 (21)	3 (75)	1 (25)	1 (9)	5 (26)	11 (23)
Acute kidney injury	4 (14)	1 (17)	2 (33)	0	0	4 (14)	1 (25)	2 (50)	2 (18)	5 (26)	9 (19)
Hypoxia	0	0	2 (33)	1 (33)	0	3 (11)	0	2 (50)	3 (27)	5 (26)	8 (17)
Incr blood bilirubin	1 (14)	0	1 (17)	0	1 (17)	3 (11)	0	2 (50)	3 (27)	5 (26)	8 (17)
Sepsis	1 (14)	0	3 (50)	1 (33)	1 (17)	6 (21)	0	1 (25)	1 (9)	2 (11)	8 (17)
Hypotension	2 (29)	0	2 (33)	0	0	4 (14)	0	1 (25)	2 (18)	3 (16)	7 (15)
Incr AST and/or ALT	0	1 (17)	0	1 (33)	1 (17)	3 (11)	1 (25)	0	3 (27)	4 (21)	7 (15)
Incr blood glucose	1 (14)	1 (17)	1 (17)	0	1 (17)	4 (14)	0	1 (25)	2 (18)	3 (16)	7 (15)
Rash	0	1 (17)	2 (33)	0	1 (17)	4 (14)	0	0	2 (18)	2 (11)	6 (13)
Stomatitis	0	2 (33)	1 (17)	1 (33)	0	4 (14)	0	0	1 (9)	1 (5)	5 (11)
Any FHD-286-Related Grade ≥ 3 TEAE	**4 (57)**	**3 (50)**	**5 (83)**	**1 (33)**	**3 (50)**	**16 (57)**	**0**	**2 (50)**	**5 (46)**	**7 (37)**	**23 (49)**
Any DLT	**0**	**0**	**0**	**0**	**1 (17)**	**1 (4)**	**0**	**1 (25)**	**2 (18)**	**3 (16)**	**4 (9)**
Incr blood and/or conjugated bilirubin	0	0	0	0	1 (17)	1 (4)	0	0	1 (9)	1 (5)	2 (4)
Conduction disorder	0	0	0	0	0	0	0	1 (25)	0	1 (5)	1 (2)
Hyperglycemia	0	0	0	0	0	0	0	0	1 (9)	1 (5)	1 (2)
Incr AST and ALT	0	0	0	0	1 (17)	1 (4)	0	0	0	0	1 (2)
Number of pts who died	**4 (57)**	**5 (83)**	**4 (67)**	**2 (67)**	**4 (67)**	**19 (68)**	**4 (100)**	**2 (50)**	**10 (91)**	**16 (84)**	**35 (75)**
Within 30 days of first dose	-	-	1 (17)	1 (33)	2 (33)	4 (14)	2 (50)	-	2 (18)	4 (21)	8 (17)
Within 60 days of first dose	-	-	3 (50)	1 (33)	4 (67)	8 (29)	3 (75)	1 (25)	4 (36)	8 (42)	16 (34)

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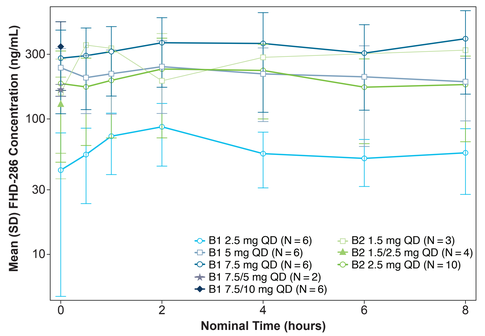
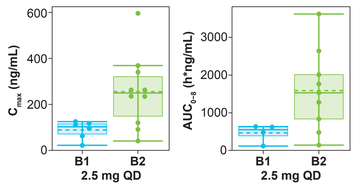
C1D15 Plasma PK

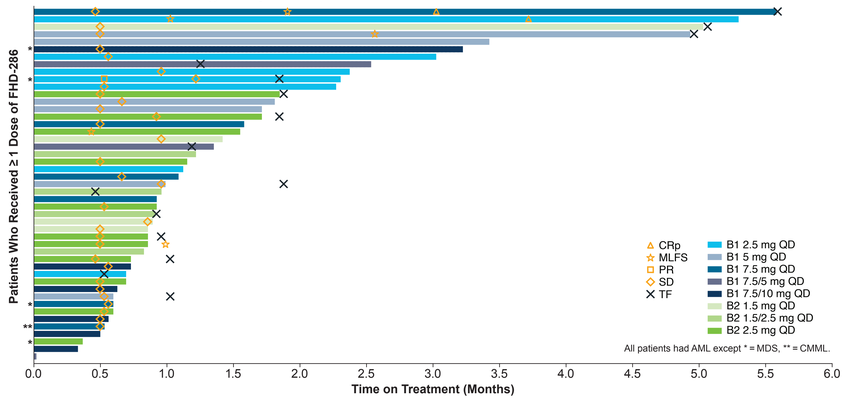




Group	FHD-286 Dose (mg QD)	C_{max} (ng/mL)	AUC_{0-8} (h*ng/mL)
B1	2.5 (N=6)	77 (74)	389 (94)[a]
	5 (N=4)	222 (61)	1490 (65)
	7.5 (N=5)	358 (73)	2170 (107)
B2	1.5 (N=1[b])	358	2520
	2.5 (N=10)	205 (91)	1160 (128)[c]

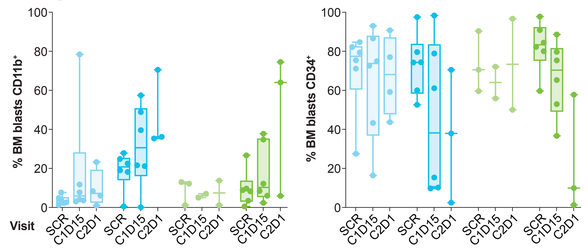
Note: C_{max} and AUC_{0-8} presented as geometric mean (geometric % coefficient of variation).
[a]N=4. [b]Individual values presented. [c]N=9.

Swimlane Plot Showing Responses to Treatment



All patients had AML except * = MDS, ** = CMML.

Change in Expression of CD11b and CD34 in Bone Marrow Blasts



Note:
B1 2.5 or 5 mg: n = 4 at 2.5 mg QD; n = 2 at 5 mg QD
B1 7.5 mg: n = 3 at 7.5 mg QD; n = 2 at 7.5/10 mg QD
B2 1.5 mg: n = 1 at 1.5 mg QD; n = 2 at 1.5/2.5 mg QD
B2 2.5 mg: n = 6 at 2.5 mg QD

C2D1 includes samples marked as "unscheduled" or "EOT" if they were collected at Day 29 ± 4 days. Only pts with matched SCR and on-treatment samples were included. Pts with SCR BM blasts > 50% CD11b$^+$ (n = 1) or < 10% CD34$^+$ (n = 1) were removed.

Abbreviations: AE, adverse event; AESI, adverse event of special interest; ALT, alanine aminotransferase; AML, acute myeloid leukemia; AST, aspartate aminotransferase; AUC_{0-8}, area under the concentration-time curve from 0-8 hours; BM, bone marrow; C_{max}, maximum concentration; CI, confidence interval; CMML, chronic myelomonocytic leukemia; CRp, complete remission with incomplete platelet recovery; C_xD_y, Cycle x Day y; CYP, cytochrome P450; DAC, decitabine; decr, decreased; DLT, dose-limiting toxicity; DoR, duration of response; DS, differentiation syndrome; ECOG PS, Eastern Cooperative Oncology Group performance status; EFS, event-free survival; EOT, end of treatment; HMA, hypomethylating agent; HSCT, hematopoietic stem cell transplant; incr, increased; max, maximum; MDS, myelodysplastic syndrome; MedDRA PT, Medical Dictionary for Regulatory Activities Preferred Term; min, minimum; MLFS, morphologic leukemia-free state; MTD, maximum tolerated dose; NE, not evaluable; ORR, objective response rate; OS, overall survival; PD, pharmacodynamic(s); PI, principal investigator; PK, pharmacokinetic(s); PLT, platelet; PR, partial remission; pt, patient; QD, once daily; R/R, relapsed and/or refractory; SAE, serious TEAE; SCR, screening; SD, stable disease *or* standard deviation; TEAE, treatment-emergent adverse event; TF, treatment failure; WBC, white blood cell.

Notes: Decr neutrophil count includes MedDRA PTs Neutropenia and Neutrophil count decr. Decr plt count includes MedDRA PTs Thrombocytopenia and Platelet count decr. Decr WBC count includes MedDRA PTs Leukopenia and WBC count decr. Incr blood bilirubin includes MedDRA PTs Blood bilirubin incr and Hyperbilirubinaemia. Incr blood glucose includes MedDRA PTs Hyperglycaemia and Blood glucose incr. Nausea/vomiting includes MedDRA PTs Nausea, Vomiting, and Retching. Rash includes MedDRA PTs Acute febrile neutrophilic dermatosis, Drug eruption, Skin erosion, Skin exfoliation, Exfoliative rash, Rash macular, Dermatitis allergic, Dermatitis bullous, Rash erythematous, Rash generalized, Urticaria, Rash maculo-papular, Rash, Rash papular, Rash pruritic, Rash pustular, Rash vesicular, and Butterfly rash.

Reference: 1) DiNardo et al. DOI: 10.1158/1078-0432.CCR-24-3790.

CONCLUSIONS

- In this dose escalation study of FHD-286+DAC in R/R myeloid malignancies, the MTDs were 7.5 mg QD in Group B1 and 1.5 mg QD in Group B2. The overall incidence of investigator-reported DS was 19%. The combination was clinically active in pts with R/R myeloid malignancies:
  - ORR: 13% (2 CRp, 3 MLFS, 1 PR)
  - Median EFS: 1.68 mos (95% CI 1.12, 1.94)
  - Median OS: 3.68 mos (95% CI 1.94, 5.49)
- FHD-286+DAC was better tolerated among pts not receiving strong CYP3A inhibitors, which increase FHD-286 exposure.