

**END OF STUDY SUMMARY**

<b>SPONSOR:</b>	Merck Sharp & Dohme Corp., a subsidiary of Merck & Co., Inc.	
<b>COMPOUND NAME:</b>	MK-0457	
<b>INDICATION:</b>	Chronic myelogenous leukemia (CML) or Philadelphia chromosome-positive acute lymphoblastic leukemia (Ph+ ALL) for which therapy with dasatinib is indicated.	
<b>PROTOCOL TITLE:</b>	A Phase I Dose Escalation of MK-0457 in Combination With Dasatinib in Patients With Refractory Chronic Myelogenous Leukemia and Philadelphia Chromosome-Positive Acute Lymphoblastic Leukemia	
<b>TRIAL IDENTIFIERS:</b>	Protocol Number:	009
	Clinical Phase:	1
	EudraCT Number:	2007-003674-26
<b>ETHICS:</b>	This trial was conducted in conformance with applicable country or local requirements regarding ethical committee review, informed consent, and other statutes or regulations regarding the protection of the rights and welfare of human subjects participating in biomedical research.	
<b>DESIGN:</b>	<p>A multi-center, open-label, non-randomized dose escalation study in subjects with refractory Chronic Myelogenous Leukemia (CML) or Ph+ ALL who have been prescribed dasatinib. Subjects were to be treated with 2 schedules of MK-0457 in combination with dasatinib: a 5-day continuous intravenous infusion of MK-0457 every 28 days (Schedule A) and a 6-hour intravenous infusion of MK-0457 every 14 days (Schedule B). Subjects in both schedules would receive oral dasatinib (70 mg twice daily for Ph+ ALL and CML with Accelerated or Blastic Phase subjects, and 100mg daily for CP-CML patients). Subjects were to be assigned to a schedule based on hematologic response to dasatinib monotherapy after 3 months of therapy. Subjects who had not achieved a major hematologic response to dasatinib were to be assigned to Schedule A of MK-0457. Subjects who had achieved a major hematologic response to dasatinib were to be assigned to Schedule B of MK-0457. Dose escalation was to proceed in 3 patient cohorts.</p>	

Objectives	<p>Primary:</p> <ol style="list-style-type: none"> <li>To determine dose-limiting toxicities (DLT), the maximum tolerated dose (MTD), and the recommended Phase II dose (RP2D) of MK-0457 administered in combination with dasatinib in patients with treatment-refractory CML or Ph+ ALL.</li> <li>To determine pharmacokinetics of MK-0457 given in combination with dasatinib.</li> </ol> <p>Secondary:</p> <ol style="list-style-type: none"> <li>To evaluate the efficacy of MK-0457 in combination with dasatinib as measured by the induction or durability of hematologic response, cytogenetic response, or molecular response.</li> </ol> <p>Exploratory:</p> <ol style="list-style-type: none"> <li>To assess the pharmacodynamics (inhibition of Aurora kinases and BCR-ABL) of MK-0457 in combination with dasatinib in patients with treatment-refractory CML or Ph+ALL.</li> </ol>
Hypotheses	<p>Primary:</p> <ol style="list-style-type: none"> <li>Administration of MK-0457 in combination with dasatinib will be sufficiently safe and tolerated to permit further study in CML and Ph+ ALL.</li> <li>Administration of dasatinib with MK-0457 will not significantly alter the pharmacokinetics of MK-0457.</li> </ol> <p>Secondary:</p> <ol style="list-style-type: none"> <li>MK-0457 administered in combination with dasatinib will either induce response in patients not responding to dasatinib after 3 months of dasatinib monotherapy, or will prolong the duration of response in patients responding to dasatinib after 3 months of dasatinib monotherapy.</li> </ol>

<b>RESULTS AND ANALYSIS:</b>	
<b>Analysis description</b>	<b>Key Efficacy Analyses</b>
	No results available – no analyses performed.
<b>Analysis description</b>	<b>Safety Analysis</b>
	No results available – no analyses performed.
<b>CONCLUSIONS:</b>	Three subjects were enrolled before the study was cancelled due to administrative reasons. Last subject last visit was 23-Nov-2007. Minimal data was collected and no analyses were performed.