

	Recurrent Anaplastic Astrocytoma and LGG						
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status		
Bota	Sherin Mathew	UCI 16-56: Phase II, Single Arm Study Of NOVOTTF-200A In Bevacizumab- Naive Subjects With Recurrent WHO Grade III Malignant Astrocytoma	TTF device	Recurrent AA, no prior treatment with anti-angiogenic agents, presence of 1p19q LOH is exclusionary, chemotherapy within 4 weeks of day 1	Open to Accrual		
	Newly Diagnosed Anaplastic Glioma/Low grade Glioma						
Kong	Ma Jucil Nacisvalencia	N0577: Phase III Intergroup Study of Radiotherapy with Concomitant and Adjuvant Temozolomide versus Radiotherapy with Adjuvant PCV Chemotherapy in Patients with 1p/19q Co-deleted Anaplastic Glioma or Low Grade Glioma	1p/19q codeleted oligodendroglioma patients	1p/19q Co-deletion and IDH Mutation Newly diagnosed and ≤ 3 months from surgical diagnosis Histological evidence of WHO grade III anaplastic glioma or WHO grade II low grade glioma (mixed glioma are eligible) with locally diagnosed combined 1p/19q loss and the presence of an either IDH1 or IDH2	Open to Accrual		



	Newly Diagnosed Glioblastoma					
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status	
Bota	Daniel Na	UCI 19-99: A Randomized, Double-Blind, Placebo-Controlled Phase 3 Study of Enzastaurin Added to Temozolomide During and Following Radiation Therapy in Newly Diagnosed Glioblastoma Patients Who Possess the Novel Genomic Biomarker DGM1	Inhibitor of protein kinase C beta (PKC-β)	Newly diagnosed, IDH mutant excluded Biopsy only excluded Randomization within 5 weeks of resection	Enrollment Temporarily Suspended	
Kong	Daniel Na	UCI 20-65: EF-32: Randomized, Open-Label Study of Tumor Treating Fields (Optune®, 200kHz) Concomitant with Radiation Therapy and Temozolomide for the Treatment of Newly Diagnosed Glioblastoma	TTF device	Newly diagnosed GBM No infratentorial or leptomeningial disease No active implanted medical devices, bullet fragment, skull defects	Open to Accrual	
Kong	Manisha Dandekar	NRG BN011 A Phase III Trial of Lomustine-Temozolomide Combination Therapy Versus Standard Temozolomide in Patients with Methylated MGMT Promoter Glioblastoma	Alkylating agent prodrug, Alkylating Nitrosourea	Newly diagnosed GBM/Gliosarcoma Availability of tissue for central MGMT confirmation No definitive evidence of metastatic disease outside the brain	Open to Accrual	
Kong	Ma Jucil	UCI 22-83 A Phase III Study for the Treatment of Newly Diagnosed H3 K27M- Mutant Diffuse Glioma	DRD2 receptor antagonist	Newly diagnosed H3 K27M-mutant diffuse glioma, Completed standard frontline radiotherapy, Exclusion: Primary spinal tumor, DIPG, Leptomeningeal disease, WBRT, proton therapy	PRMC Approved	
		Recurrent	t Glioblastoma			
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status	
Bota	Daniel Na	UCI 21-18: A Multicenter, OpenLabel Study with a Randomized Control Arm of the Efficacy, Safety, and Pharmacokinetics of Intravenously Infused Berubicin in Adult Patients with Recurrent Glioblastoma Multiforme (WHO Grade IV) After Failure of Standard First Line Therapy	Anthracycline- crosses blood brain barrier	1st recurrence only; Prior bevacizumab is exclusionary; tumor location supratentorial	Open to Accrual	
Bota	Daniel Na	UCI 22-58: A Three-part, Phase I/II Dose-Escalation Study to Define the Safety, Tolerability, and Optimal Dose of Candidate GBM Vaccine VBI-1901 with Subsequent Extension of Optimal Dose in Recurrent GBM subjects	Enveloped virus-like particle (eVLP) vaccine formulated with either granulocyte- macrophage colony- stimulating factor (GM- CSF)	Part C: 1st recurrence only; Prior bevacizumab is exclusionary; tumor location supratentorial	Suspended (pending FDA approval to ship IP to site, SIV completed)	



	Newly Diagnosed Meningioma						
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status		
Kong	Daniel Na	NRG BN003: Phase III Trial of Observation versus Irradiation for a Gross Totally Resected Grade II Meningioma	Radiation Therapy	Newly diagnosed unifocal intracranial meningioma Gross totally resected Central Pathology Review for confirmation of histology	Open to Accrual		
	Recurrent Meningioma						
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status		
Bota	Daniel Na	A071401: Phase II Trial of SMO/AKT/NF2 Inhibitors in Progressive Meningiomas with SMO/ AKT/ NF2 Mutations	AKT1,2,3 inhibitor; CDK pathway inhibitor	Central pathology review for AKT1/PIK3CA/PTEN/NF2/CDK4/CDK6/CDKN2A/CCND1/CCN D2/CCND3/CCNE1 mutation Progressive or residual disease in Meningioma Measurable disease per RANO criteria	Open to Accrual (AKT, PIK3CA, PTEN arm only)		
	Craniopharyngiomas						
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status		
Choi	Daniel Na	Alliance A071601: Phase II Trial of BRAF/MEK Inhibitors in Papillary Craniopharyngiomas	BRAF/MEK inhibitors	Central pathology review with positive BRAF V600E mutation by IHC Measurable disease No prior treatment with BRAF or MEK inhibitors	only Arm B (recurrent disease) open to accrual		
	CNS Metastases						
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status		
Choi	Ma Jucil Nacisvalencia	Alliance A071701: Genetic Testing in Guiding Treatment for Patients with Brain Metastases	Targeted therapy; CDK, PI3K and NTRK/ROS1 inhibitors	Tissue available for biomarker testing- Participants must have histologically confirmed metastatic disease to the brain from any solid tumor (new or progressive) Tumor must have one of the following mutations: NTRK/ROS1/CDK/P13K pathway alterations	Open to Accrual		



	ND and Recurrent/Refractory therapy for Primary CNS Lymphoma					
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status	
Bota	Daniel Na	UCI 21-77: An Open-Label Phase II Study to Investigate the Efficacy, Safety, and Pharmacokinectics of Tirabrutinib in Patients with Primary Central Nervous System Lymphoma (PCNSL)	Bruton's Tyrosine Kinase Inhibitor	Part A: R/R PCNSL with atleast 1 prior HD-MTX therapy; No intraocular PCNSL without brain lesion, No systemic lymphoma, No non-B-cell PCNSL Part B: Newly diagnosed PCNSL	Open to accrual	



	Rare Cancers and Basket Trials					
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status	
Bota	Daniel Na	UCI 20-152: Ph II Immune Checkpoint Inhibitor Nivolumab in Patients with Recurrent Select Rare CNS Cancers	Immunotherapy	Recurrent Rare CNS disease: Ependymoma, Medulloblastoma, Parenchymal Pineal Region Tumors (Pineoblastoma, Pineocytoma, Pineal Tumor of Intermediate Differentiation, Papillary Tumor of the Pineal Region), Choroid Plexus Tumors (Carcinoma, Papilloma, Atypical Papilloma), Histone Mutated Gliomas, Gliomatosis Cerebri, ATRT, Malignant/Atypical Meningioma, Gliosarcoma or Primary CNS Sarcoma, Pleomorphic Xanthoastrocytoma (PXA) and Anaplastic Pleomorphic Xanthoastrocytoma (APXA), and tumors formerly known as Primitive Neuro Ectodermal Tumors (Embryonal Tumor with Multilayered Rosettes, Medulloepithelioma, CNS Neuroblastoma, CNS Ganglioneuroblastoma, CNS Embryonal Tumor NOS)	Open to Accrual	



	Supportive Care/Diagnostic/Correlative					
PI	CRC	Protocol #/Title	Mechanism	Primary In/Ex Criteria	Status	
Chang	Mazaya Soundara	UCI 18-73: Deep Learning Convolutional Neural Networks Reliably Monitor and Accurately Identifies Predictors of Response to Novo-TTF	Imaging trial	Newly diagnosed GBM Undergoing Optune TTF Age >21; KPS ≥70	Open to Accrual	
Bota	Daniel Na	UCI 18-83: Pilot Study of Mirtazapine for the Dual Treatment of Depression and Temozolomide-Induced Nausea and Vomiting (CINV) in Newly-Diagnosed High-Grade Glioma Patients on Temozolomide Therapy	Antidepressant	Histologically confirmed diagnosis of glioma -No prior treatment with temozolomide TMZ -Patient will receive temozolomide TMZ therapy as part of their standard treatment.	Open to Accrual	
	Others					