UCI 趙 Chao Family Comprehensive Cancer Center



Neuro-Oncology Disease-Oriented Team

Clinical Research Treatment Trial Flowchart

Open to Accrual Low Accruing Pending Activation/Suspended

New Studies in Pipeline

New Studies in Pipeline	PI	Latest Status
UCI 24-39 (IIT): Phase IB, Open-Label Trial of Dual Cytotoxic and Immune-stimulatory Gene Therapy in Combination with G-CSF for the Treatment of Resectable, Recurrent Glioblastoma (GBM)	Dr. Bota	DOT approved 3/1/24 PRMC approved 8/1/24 IRB approved 5/8/26 Pending clarification of IP shipping status, SIV, and funding to proceed
ETCTN 10713: A Phase I Trial of 225Ac-anti-CD33 and PD1-inhibitor in Recurrent Glioblastoma	Dr. Lomax	DOT approved 1/3/25 Study opened in Mar2026 (not at our site), but delayed for another 6 months from consortium
UCI 25-151: (IIT) A Phase II Study of Elderly and Frail Patients with Newly Diagnosed or Recurrent Malignant Glioma Treated with Cesium-131 GammaTile® (ENDURANCE Trial)	Dr. Yuen	DOT approved on 10/3/25 PRMC approved 2/3/26 IRB approved 7/10/26
UCI 25-93: A Prospective, Single-Arm Study of a Modified Lumbar Puncture (LP) Procedure that Reduces Post-Lumbar Puncture Headaches (PLPH) in Adult Neuro-Oncology Patients	Dr. Kong	DOT approved on 2/6/26, Manisha reached out to sponsor to add UCI as a site before submitting to IRB

Glioblastoma – Newly Diagnosed

Open to Accrual | Low Accruing | Pending Activation/Suspended

UCI 26-34*: Silevertinib (EGFR Inhibitor) + Temozolomide

Phase II, part 2 only- investigational treatment given during adjuvant treatment not concomitant treatment

Randomized open label; unmethylated GBM Harboring EGFRvIII mutation; 1:1 randomized Arm A: Silveretinib+TMZ Arm B TMZ monotherapy

PI: Dr. Bota

NRG-CC017: Temporally-modulated Pulsed Radiation Therapy (TMPRT) vs. Standard RT + Temozolomide**

Phase III, randomized (1:1); Newly diagnosed Unmethylated MGMT only; English and French patients only

Arm1: RT + concomitant and adjuvant TMZ
Arm2: Temporally Modulated Pulse RT + concomitant and adjuvant TMZ

PI: Dr. Kong
0/6

UCI 25-151: Cesium-131 GammaTile®

ENDURANCE Trial, Ph 2: GammaTile: Elderly and Frail Patients with ND GBM/rGBM or recurrent glioma

Arm A: Newly diagnosed;
Arm B: Recurrent Elderly or Frail Glioblastoma;
Arm C: Newly Diagnosed Frail (non-GBM) Malignant Glioma;
Arm D: Recurrent Frail (non-GBM) Malignant Glioma;

PI: Dr. Yuen; Co-I: Dr. Hsu

DOT approved 10/3/25, PRMC approved 2/3/26, IRB approved 7/10/26

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** Consent and Tx in Irvine

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2nd line

ETCTN 10505: Selinexor+TMZ vs Placebo+TMZ (SIV on 10/16/26)**

Phase II, blinded, 1:1 randomized study; 1st recurrence only, MGMT promoter methylated, biopsy or surgery required to confirm PD

PI: Dr. Chow
Coord: TBN
0/5

UCI 24-39: Dual Cytotoxic and Immune-stimulatory Gene Therapy + G-CSF**

Phase 1B

Open label: require surgical resection; IDH WT; multifocal disease not allowed; 1st recurrence only.

Mechanism: Dual Gene Therapy/immunotherapy

PI: Dr. Bota
Initial IRB approval, pending activation. Gene therapy in Irvine only.

A072201: Anti-Lag-3 and Anti-PD-1 Blockade vs. SOC**

(SUSPENDED for data analysis and modification)

Phase II, randomized study, 1st recurrence
Arm 1: Relatlimab + Nivo; Arm 2: CCNU

PI: Dr. Choi
Coord: Katia Talamantez
1/5

UCI 25-151: Cesium-131 GammaTile®

ENDURANCE Trial, Ph 2: GammaTile: Elderly and Frail Patients with ND GBM/rGBM or recurrent glioma

Arm A: Newly diagnosed;
Arm B: Recurrent Elderly or Frail Glioblastoma; 2nd and 2+ lines of tx
Arm C: Newly Diagnosed Frail (non-GBM) Malignant Glioma;
Arm D: Recurrent Frail (non-GBM) Malignant Glioma;

PI: Dr. Yuen; Co-I: Dr. Hsu

DOT approved 10/3/25, PRMC approved 2/3/26, IRB approved 7/10/26

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2+ lines

UCI 23-67: Obrixtamig (BI 764532)
(SUSPENDED; new amd pending)

Open label monotherapy (Obrixtamig (BI 764532))

PI: Dr. Bota
Coord: Katia Talamantez
2/5

ETCTN 10713: 225Ac-anti-CD33 and PD1-inhibitor
Activation timeline- July-August 2026

Immunotherapy; Phase 1; Must be surgical candidates; ECOG0-2, 1st or 2nd relapse; measurable disease required; last RT ≥182 days; ≤2mg dexa within 2 weeks of start

PI: Dr. Lomax

ETCTN 10699: Triapine + RT**
(no slots as of 8/5/26)

Phase 1 open label combining Triapine and RT
Ribonucleotide reductase regulatory subunit 2 (RRM2) inhibitor; candidates for re-irradiation; GBM and variants IDH WT grade 2-4, Astrocytoma IDH mut grade 2-4, Diffuse midline glioma including pediatric-type H3K G34 or E3 K27

PI: Dr. Lomax
Coord: Sabrina Beltran
2/5

UCI 25-151: Cesium-131 GammaTile®
ENDURANCE Trial, Ph 2: GammaTile: Elderly and Frail Patients with ND GBM/rGBM or recurrent glioma

Arm A: Newly diagnosed;
Arm B: Recurrent Elderly or Frail Glioblastoma; 2nd and 2+ lines of tx
Arm C: Newly Diagnosed Frail (non-GBM) Malignant Glioma;
Arm D: Recurrent Frail (non-GBM) Malignant Glioma;

PI: Dr. Yuen; Co-I: Dr. Hsu

DOT approved 10/3/25, PRMC approved 2/3/26, IRB approved 7/10/26

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Newly Diagnosed

A072301: RT + Temozolomide followed by Vorasidenib (IDH Inhibitor) vs Placebo**

Phase III randomized (1:1), double blinded trial for Astrocytoma Grade 3

Arm1: TMZ+Placebo (control); Arm2: TMZ+Vorasidenib (INV)

PI: Dr. Kong

Coord: Manisha Dandekar

1/6

Recurrent

UCI 25-151: Cesium-131 GammaTile®

ENDURANCE Trial, Ph 2: GammaTile: Elderly and Frail Patients with ND GBM/rGBM or recurrent glioma

Arm A: Newly diagnosed;
Arm B: Recurrent Elderly or Frail Glioblastoma;
Arm C: Newly Diagnosed Frail (non-GBM) Malignant Glioma;
Arm D: Recurrent Frail (non-GBM) Malignant Glioma;

PI: Dr. Yuen; Co-I: Dr. Hsu

DOT approved 10/3/25, PRMC approved 2/3/26, IRB approved 7/10/26

UCI 25-69: Olutasidenib

Phase 1, IDH inhibitor, DDI sub-study for cycle 1; patients will then get IP (Olutasidenib) via compassionate use after DDI substudy completion
IDH1m+ malignancies (e.g. AML, gastrointestinal [GI] cancers, glioma)

PI: Dr. Yuen

Coord: Katia Talamantez

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Recurrent

ETCTN 10699: Triapine + RT**
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Phase 1 open label combining Triapine and RT
Ribonucleotide reductase regulatory subunit 2 (RRM2) inhibitor; candidates for re-irradiation; GBM and variants IDH WT grade 2-4, Astrocytoma IDH mut grade 2-4, Diffuse midline glioma including pediatric-type H3K G34 or E3 K27

PI: Dr. Lomax
Coord: Sabrina Beltran
2/5

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Meningioma

Recurrent

A071401: SMO/AKT/NF2/CDK Inhibitors**
Only AKT1/PIK3CA/PTEN (Capivasertib and NF2/CDKN2A/CDK4/CDK6/CCND1, CCND2, CCND3/ CCNE1 (Abemaciclib) arm open

Mechanism: Capivasertib-AKT inhibitor; Abemaciclib- selective inhibitor of CDK4 and CDK6 enzymes

PI: Dr. Bota
Coord: Katia Talamantez
6/8

RTOG 3523: [177Lu] lu-dotatate
(Opened 5/19/26, SUSPENDED for amd)

Phase II; randomized, open label study of [^{177}Lu]Lu-DOTATATE; progressive intracranial grade 1-3 meningioma

Randomization (2:1): Arm A (IP) and Arm B SOC therapy

Measurable disease per RANO meningioma criteria; central confirmation of PD required; [68Ga]Ga-DOTATATE uptake on PET-CT required; option to cross over to IP arm; **Excln:** radiation associated meningioma; clinical dx or molecular dx of NF2-related schwannomatosis; prior SSTR2-targetted therapy.

Mechanism: Somatostatin receptor type 2 (SSTR2)

PI: Dr. Bota
Coord: Sabrina Beltran

0/3

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Primary CNS Lymphoma

Recurrent/Refractive

UCI 25-143: Tirabrutinib vs Rituximab + Temozolomide
(Opened 06/18/26)

Open label, 2:1 randomized Tirabrutinib (480 mg) daily : R-TMZ combination

Inclusion: R/R B-Cell PCNSL with at least 1 prior HD-MTX based Tx, bidimensional measurable disease

Exclusion: Prior BTK inhibitor tx, Intraocular PCNSL w/o brain lesions, systemic lymphoma, refractory to TMZ w/wo rituximab containing regimen (ex mth-tmz-ritux)

PI: Dr. Bota
Coord: Raufu Onayemi
0/5

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UCI 24-197*: TNG456 +/- Abemaciclib
(Slot reservation required)

Phase I/II; MTAP-loss; GBM patients in dose expansion cohort only

TNG456 monotherapy and TNG456+abemecicli arms

Requires Patients to have MTAP Mutation

Patients with GBM must have had 1st or 2nd recurrence per RANO 2.0

PI: Dr. Park (Lung)

Main CRC: Cassie Smith
Neuro CRC: Katia Talamantez

Accrual: 1/5

UCI 25-16*: ODM-212
(Slot reservation required)
Currently enrolling Part 2 only

Part 2: Any solid tumor type harboring a Hippo pathway alteration including GBM

A fresh or recent (taken up to 1 year ago), representative tumor tissue sample (from primary tumor or from metastasis) must be available. Tissue must be a core needle biopsy, excisional or incisional biopsy. Biopsies of bone lesions that do not have a soft tissue component or decalcified bone tumor samples are also not acceptable. Exemptions possible by the sponsor's decision

PI: Dr. Dayyani (GI/HP/Panc)

Main CRC: Peter Yang
Neuro CRC: Sabrina Beltran

Accrual 14/20

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Non- Treatment Studies

UCI 25-93: Lumbar Puncture

Prospective, Single arm study of modified LP

PI: Dr. Kong
DOT approved 2/6/26

UCI 25-197: Surveillance
Pilot study

Surveillance approach to local therapy in patients with Brain mets undergoing CNS-penetrating systemic therapy

PI: Dr. Simon
CRC: Katia Talamantez
1/10

UCI 24-05: Riluzole PO vs. Placebo PO**
Perceived worsening of *cognitive function*

Cohort B (prior cranial radiation) excludes high-grade glioma

PI: Dr. Chan (Clinical Pharmacy)

Primary CRC: Madeleine Phan
Neuro CRC: Sabrina Beltran
34/59

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