Efficacy and safety of lifileucel, a one-time autologous tumor-infiltrating lymphocyte (TIL) cell therapy in patients with advanced melanoma after progression on immune checkpoint inhibitors and targeted therapies: Pooled analysis of consecutive cohorts of the C-144-01 study

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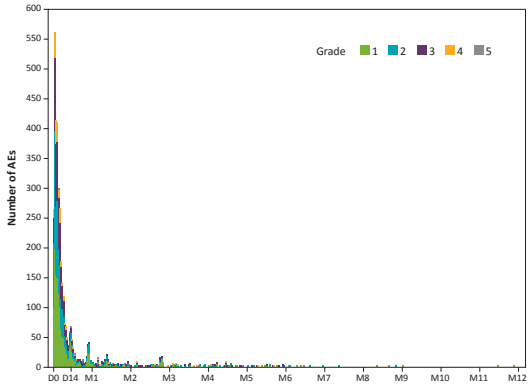
Lifileucel Regimen

The lifileucel regimen—lymphodepleting chemotherapy with cyclophosphamide and fludarabine, lifileucel infusion, and a short course of high-dose IL-2—was **well-tolerated** and the **time-limited AE profile** was consistent with those of chemotherapy and IL-2

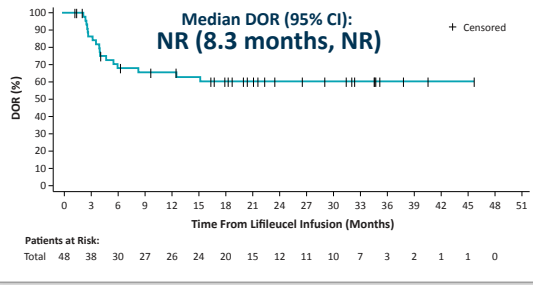
Majority of Adverse Events Were Grade 1-2, Expected, Time-Limited, and Managed With Available Supportive Care



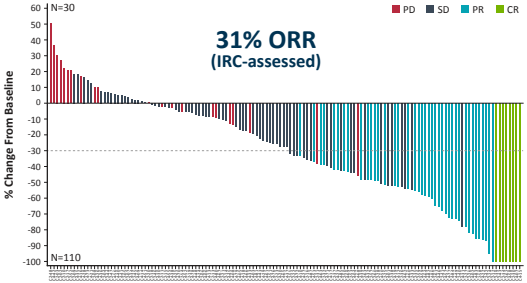
LIFILEUCEL: AN INVESTIGATIONAL TIL CELL THERAPY

- Manufactured using TIL recovered from a patient's tumor using a 22-day centralized manufacturing process
- One-time treatment with lifileucel resulted in a 31% ORR (IRC-assessed) and median DOR not reached
- The safety profile was expected, manageable, and time-limited

Responses Were Durable



Majority of Patients Experienced Tumor Reduction



Investigational lifileucel TIL cell therapy is an important potential treatment option for patients whose disease has progressed on/after ICI and appropriate targeted therapy

AE, adverse event; CR, complete response; DOR, duration of response; ICI, immune checkpoint inhibitors; IL-2, interleukin-2; IRC, independent review committee; NMA-LD, nonmyeloablative lymphodepletion; ORR, objective response rate; OS, overall survival; PD, progressive disease; PR, partial response; SD, stable disease; SOD, sum of diameters.