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All regular abstracts embargoed until: May 22, 2025, at 5:00 PM EDT  
LBA5507 embargoed until: June 2, 2025, at 8:00 AM EDT



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## **RWJBarnabas Health and Rutgers Cancer Institute to Present Practice-Changing Research at 2025 ASCO Annual Meeting**

*Expert-led studies will highlight advances across multiple cancer types and examine real-world insights shaping the future of personalized oncology care*

**New Brunswick, N.J., May 22, 2025** – Clinicians and scientists from RWJBarnabas Health and Rutgers Cancer Institute will share new findings and lead discussions at the 2025 American Society of Clinical Oncology (ASCO) Annual Meeting, showcasing advances from their cutting-edge cancer research program. The meeting will be held in Chicago (and online) from May 30-June 3. Through 45 accepted abstracts and presentations, the institutions will highlight innovative oncology research across a range of tumor types and specialties, including two oral sessions featuring a multisite randomized trial focused on psychosocial support for young adults with cancer, and new findings from a study evaluating pathologic complete response in HER2-positive breast cancer using clinicopathologic variables and the HER2DX pCR score.

“As New Jersey’s only National Cancer Institute-designated Comprehensive Cancer Center, Rutgers Cancer Institute and RWJBarnabas Health are advancing cancer care through the work of our world-class team of researchers and clinicians, whose groundbreaking studies and collaborative innovation continue to shape the future of oncology,” said [Steven K. Libutti, MD, FACS](#), William N. Hait Director, Rutgers Cancer Institute and Senior Vice President, Oncology Services, RWJBarnabas Health. “Our presence at the 2025 ASCO Annual Meeting underscores our unwavering commitment to confronting cancer on every front, from prevention and early detection to the development of novel therapies that improve outcomes for patients. With the recent opening of the [Jack & Sheryl Morris Cancer Center](#), New Jersey’s first freestanding cancer hospital, we’re excited to mark a new chapter in our mission to transform cancer care and research, expanding our ability to deliver cutting-edge treatments and patient-centric care throughout the region and beyond.”

The research accepted for presentation at ASCO includes four oral sessions, in addition to numerous poster sessions and publication-only abstracts, all highlighting data across a range of cancers, including breast, colorectal and gastrointestinal.

Highlights of the accepted abstracts include the following:

- Results from a multisite randomized trial of Bright IDEAS-Young Adults, a problem-solving skills training intervention, showed statistically and clinically significant improvements in depression, anxiety, and health-related quality of life compared to enhanced usual care among young adults newly diagnosed with cancer. Improvements were attributed to increased problem-solving ability, particularly in reducing the tendency to view problems as significant threats and doubt one's ability to successfully solve problems.
- A national analysis, which found that living in a food desert, clinical trial desert, or area with high transportation vulnerability was independently associated with significantly lower odds of breast cancer clinical trial participation. Patients living in both a food and clinical trial desert had a 27% decreased likelihood of enrollment, highlighting the compounded impact of geographic and socioeconomic barriers such as neighborhood transportation barriers, clinical trial deserts, and food deserts.
- Secondary results from the EA1181/CompassHER2 pCR trial, which showed that neoadjuvant THP led to pathologic complete response (pCR) in 64% of HER2+/ER- and 32% of HER2+/ER+ breast cancers. The HER2DX pCR score significantly predicted pCR regardless of ER status, and lower ER expression and higher grade were associated with higher pCR rates.
- A single center study evaluated whether requiring tumor biopsies (Bx) in phase I cancer trials affects patient enrollment and participation. Of the 146 patients enrolled across 25 trials, 42.4% underwent at least one study-specific biopsy, most commonly of the liver and lung. Patients who had a biopsy experienced a statistically significant delay—median of 6 days—in initiating treatment and had a shorter average duration on study. Findings suggest that further review is needed to understand factors contributing to shorter study duration among patients who underwent trial-related biopsies.
- A review of 283 patients with metastatic colorectal cancer (mCRC) enrolled in phase I trials across two institutions found an overall survival of 8.6 months and a clinical benefit rate of 38.1%, comparable to standard third-line therapies. No significant differences in outcomes were observed across racial or ethnic groups. Most patients had multiple sites of metastases and had received a median of three prior therapies. A non-significant trend suggested that overall survival decreased as the number of prior therapies increased.
- A large analysis of over 13,000 patients with cancer of unknown primary (CUP) found that 29% had potentially targetable genetic alterations identified through liquid biopsy. Common mutations included TP53, KRAS, PIK3CA and EGFR. This study is the first to show that liquid biopsy can identify targetable mutations in nearly 30% of CUP patients at a scale

comparable to tissue testing. While these findings support its use, further trials are needed to confirm the effectiveness of matched therapies.

The full list of presentations at the 2025 ASCO Annual Meeting follows:

<b>Oral Abstract Session</b>			
<b>Abstract No.</b>	<b>Title</b>	<b>Presentation Date/Time</b>	<b>Location</b>
Abstract <a href="#">12005</a>	Results of a multisite randomized trial of Bright IDEAS-Young Adults: Efficacy of problem-solving skills training on distress and health-related quality of life.	Sunday, June 1, 2025, 9:45 a.m. CDT	S100bc
Abstract <a href="#">LBA5507</a>	ROSELLA: A phase 3 study of relacorilant in combination with nab-paclitaxel versus nab-paclitaxel monotherapy in patients with platinum-resistant ovarian cancer (GOG-3073, ENGOT-ov72).	Monday, June 2, 2025, 10:00 a.m. CDT	S100a
Abstract <a href="#">501</a>	Predicting pathologic complete response (pCR) from clinicopathologic variables and HER2DX genomic test in stage II/III HER2+ breast cancer treated with taxane, trastuzumab, and pertuzumab (THP): Secondary results from the EA1181/CompassHER2 pCR trial.	Monday, June 2, 2025, 3:00 p.m. CDT	Hall B1
Abstract <a href="#">5007</a>	A multicenter, randomized, phase 2, investigator-initiated ETCTN trial of olaparib+ radium-223 vs. radium-223 in men with castration-resistant prostate cancer (CRPC) with bone metastases (BM) (COMRADE): Initial efficacy and biomarker analysis.	Tuesday, June 3, 2025, 9:45 a.m. CDT	Hall D1
<b>Poster Session</b>			
<b>Abstract No.</b>	<b>Title</b>	<b>Presentation Date/Time</b>	<b>Location</b>
Abstract <a href="#">3575</a>	Effect of race/ethnicity on clinical outcomes for metastatic colorectal cancer (mCRC) patients in phase 1 trials: A dual institution experience.	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS3633</a>	A phase II study of pembrolizumab, carboplatin, paclitaxel, and radiation for the treatment of early-stage anal cancer: Big Ten Cancer Research Consortium G122-588.	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS3643</a>	Combining low-dose regorafenib with pembrolizumab as a front-line therapy for patients with MSI-H colorectal cancer: REGPEM-CRC-01.	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">4124</a>	Molecular profile of hepatocellular carcinoma (HCC) in older (OA) versus	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A

	younger adults (YA) receiving tyrosine kinase inhibitors: Does age matter?		
Abstract <a href="#">4166</a>	The differential effect of stromal genes on gemcitabine/nab-paclitaxel (GN) and GN/cisplatin (GCN) outcomes in advanced pancreatic adenocarcinoma (aPDAC).	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">4200</a>	Circulating tumor DNA-based genomic profiling and real-world outcomes in cancer of unknown primary (CUP).	Saturday, May 31, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">10568</a>	Discrepancies between germline and somatic laboratories in the reporting of germline cancer predisposition variants.	Saturday, May 31, 2025, 1:30 p.m. CDT	Hall A
Abstract <a href="#">11038</a>	Demographic and clinical factors associated with young-onset rectal cancer: Is the Latinx population at higher risk?	Saturday, May 31, 2025, 1:30 p.m. CDT	Hall A
Abstract <a href="#">1525</a>	From food deserts to clinical trial deserts: Challenges in access to breast cancer trials.	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">5563</a>	Circulating tumor DNA (ctDNA) monitoring in participants (pts) with ovarian cancer treated with neoadjuvant pembrolizumab (pembro) + chemotherapy (chemo) ± anti-immunoglobulin-like transcript 4 (ILT4) monoclonal antibody MK-4830.	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">6538</a>	Should we treat TP53-mutated high-risk myeloid neoplasms in older patients?	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">7046</a>	Safety and efficacy of AZD0486, a CD19xCD3 T-cell engager, in relapsed or refractory diffuse large B-cell lymphoma.	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">7063</a>	Immune biomarkers as predictors of response to mosunetuzumab in previously untreated follicular (FL) and marginal zone lymphoma (MZL).	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS7083</a>	SOUNDTRACK-E: A phase 1/2, open-label, multicenter study to evaluate the safety and efficacy of AZD0486 monotherapy or combination therapy in patients with mature B-cell malignancies.	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS7085</a>	ALPHA3: A pivotal phase 2 study of first-line (1L) consolidation with cemacabtagene ansegedleucel (cema-cel) in patients (pts) with large B-cell lymphoma (LBCL) and minimal residual disease (MRD) after response to standard therapy.	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS9596</a>	A randomized phase 2 peri-operative (neoadjuvant plus adjuvant) study of	Sunday, June 1, 2025, 9:00 a.m. CDT	Hall A

	fianlimab (anti-LAG-3) plus cemiplimab (anti-PD-1) versus anti-PD-1 alone in patients with resectable stage III and IV melanoma.		
Abstract <a href="#">5067</a>	Phase 1 study of gotistobart (BNT316/ONC-392) in combination with lutetium Lu 177 vipivotide tetraxetan (Lu 177) in patients with metastatic castration-resistant prostate cancer (mCRPC).	Monday, June 2, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">524</a>	Impact of initial chemotherapy dosing on subsequent dosing patterns and treatment completion in early-stage breast cancer.	Monday, June 2, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">547</a>	Obesity, chemotherapy dosing, and toxicity: Results from the Optimal Breast Cancer Chemotherapy Dosing study.	Monday, June 2, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">TPS1133</a>	Adaptive designed eniluracil + capecitabine phase 2 trial in advanced or metastatic breast cancer patients.	Monday, June 2, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">5089</a>	Prognostic validation of six androgen production, uptake, and conversion genes (APUC-6) in the CHARTED prostate cancer trial.	Monday, June 2, 2025, 9:00 a.m. CDT	Hall A
Abstract <a href="#">2667</a>	Vedolizumab or infliximab: Treatment option in immune checkpoint inhibitor-induced colitis.	Monday, June 2, 2025, 1:30 p.m. CDT	Hall A
Abstract <a href="#">3124</a>	Clinical performance of Signatera Genome assay in a cohort of patients (pts) with solid tumors.	Monday, June 2, 2025, 1:30 p.m. CDT	Hall A
Abstract <a href="#">3154</a>	Effect of biopsy requirement on patient enrollment to phase I trials in cancer.	Monday, June 2, 2025, 1:30 p.m. CDT	Hall A
Abstract <a href="#">3087</a>	A phase 2 study of olaparib in IDH1 and IDH2 mutant advanced chondrosarcomas and other solid tumors.	Monday, June 2, 2025, 1:30 p.m. CDT	Hall A
<b>Publication Only</b>			
<b>Abstract No.</b>	<b>Presentation title</b>	<b>Presentation Date/Time</b>	<b>Location</b>
Abstract <a href="#">e13567</a>	The use of peripheral intravenous catheters (PIV) for lymphoma patients receiving anthracycline-based chemotherapy: A multicenter real-world analysis (RWA).	N/A	N/A
Abstract <a href="#">e13741</a>	Evaluating uptake of targeted agents by race/ethnicity in patients receiving first-line treatment for chronic lymphocytic leukemia (CLL).	N/A	N/A
Abstract <a href="#">e15152</a>	Safety and efficacy of eniluracil + capecitabine (6422 + Cap) in phase 1b trial.	N/A	N/A
Abstract <a href="#">e15605</a>	Actionability landscape and biomarker utility in a colorectal cancer alliance cohort: Initial results from the Know Your Biomarker program.	N/A	N/A

Abstract <a href="#">e15674</a>	Racial disparities and prognostic factors in cancer-specific survival for patients with metastatic rectal cancer.	N/A	N/A
Abstract <a href="#">e15704</a>	Risk factors and outcomes of second primary cancers in colorectal cancer patients by primary tumor site.	N/A	N/A
Abstract <a href="#">e15707</a>	Trends in second primary cancer incidence by primary colorectal cancer location.	N/A	N/A
Abstract <a href="#">e15711</a>	Evaluating the immune landscape in early onset colorectal cancer patients.	N/A	N/A
Abstract <a href="#">e16181</a>	Recurrence-free survival dynamics following adjuvant chemotherapy for resected non-colorectal cancers of the gastrointestinal tract: A systematic review of randomized controlled trials.	N/A	N/A
Abstract <a href="#">e17044</a>	Abiraterone with discontinuation of gonadotropin-releasing hormone (GnRH) analogues in patients (pts) with metastatic prostate cancer (PC): Survival results from a single-arm, phase II study.	N/A	N/A
Abstract <a href="#">e19505</a>	Bispecific antibody therapy in central nervous system (CNS) multiple myeloma (MM): Multicenter retrospective study.	N/A	N/A
Abstract <a href="#">e19537</a>	Exploring steroid prophylaxis to mitigate CRS: Enhancing access to bispecific antibodies in RRMM. shareShare	N/A	N/A
Abstract <a href="#">e20676</a>	Genetic characteristics and clinical outcomes of driver mutant oligometastatic non small cell lung cancer treated with combination definitive chemoradiotherapy and targeted systemic therapy.	N/A	N/A
Abstract <a href="#">e21510</a>	Epidemiologic factors and survival outcomes of patients with metastatic malignant melanoma.	N/A	N/A
Abstract <a href="#">e23098</a>	Time toxicity of intravesical sequential gemcitabine and docetaxel.	N/A	N/A
Abstract <a href="#">e24007</a>	Incidence and survival rates of patients with primary malignant cardiac tumors: A SEER based study.	N/A	N/A

### About Rutgers Cancer Institute

As New Jersey's only National Cancer Institute-designated Comprehensive Cancer Center, Rutgers Cancer Institute, together with RWJBarnabas Health, offers the most advanced cancer treatment options, including bone marrow transplantation, proton therapy, CAR T-cell therapy and complex surgical procedures. Along with clinical trials and novel therapeutics such as precision medicine and immunotherapy – many of which are not widely available – patients have access to these cutting-

edge therapies at Rutgers Cancer Institute in New Brunswick, Rutgers Cancer Institute at University Hospital in Newark, as well as through RWJBarnabas Health facilities.

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