CGFL CENTRE GEORGES FRANÇOIS LECLERC Ensemble, dépassons le cancer	**CRITERES DE SELECTION ETUDE AcSe Nivolumab**	Identité patient (coller étiquette patient)
Version 1.0 du 10/03/2015	Investigateur : Pr Ghiringhelli	Arc : Céline L 3784

VALIDATION DES CRITERES DE SELECTION

Critères d'inclusion

1. Patient information sheet and written informed consent form signed.	☐ oui ☐ non
2. Histologically confirmed diagnosis of a pathology corresponding to one of the following selected cancer types: a. Non-clear cell renal-cell carcinomas (RCC): papillary renal cell carcinoma (pRCC,type I, type II and non-classified pRCC), chromophobe RCC (ChRCC), renal medullary carcinoma (RMC), collecting duct/Bellini duct carcinoma (CDC), microphthalmia-associated transcription (MiT) family translocation renal cell carcinoma (tRCC), renal cell carcinoma with a prominent sarcomatoid component (sarcRCC). b. Rare head and neck cancers: Malignant Salivary gland primary tumours (major salivary gland or accessory salivary gland). Malignant sino-nasal primary tumours. Except melanoma or sarcomas. c. Rare skin cancers: adnexal carcinomas, basal cell carcinoma resistant to vismodegib. d. Non-colorectal cancers with microsatellite instability (MSI) or mismatch repair (MMR) deficient high grade glioma as determined locally by immunohistochemistry or polymerase chain-reaction. e. Squamous cell carcinoma of penis. f. Any non MSI-high cancer with POLE exonucleasic domain mutation (somatic or germline) in hotspots (codons 286, 411, 424 and 459) or somatic variants with high probability of pathogenesis according to in silico assessment by the INCa ad hoc biology group	☐ oui ☐ non
3. Metastatic disease or unresectable locally advanced malignancy that is resistant or refractory to standard therapy or for which standard therapy does not exist or is not considered appropriate by the Investigator	☐ oui ☐ non
4. Aged ≥ 18 years old.	☐ oui ☐ non
5. Measurable disease according to RECIST v1.1 guidelines for solid tumours	☐ oui ☐ non

6. Able to provide a formalin-fixed, and paraffin-embedded biopsy sample of a metastatic site or primitive tumour tissue. Note: Patients for whom suitable archived biopsy material is not available must be willing to undergo a biopsy of a tumour lesion prior to study entry, unless this is medically contraindicated (e.g. site inaccessible or patient safety concerns).	
7. Patients must have a mandatory treatment-free interval of at least 21 days following previous systemic anti-cancer treatments.	☐ oui ☐ non
8. Patients who have received previous systemic anticancer treatment and/or radiotherapy should have recovered from any treatment related toxicity, to a level of ≤ grade 1 (according toNational Cancer Institute [NCI] common terminology criteria for adverse events, version 4 (CTCAE v4)) with the exception of Grade 2 alopecia.	☐ oui ☐ non
9. Adequate hematologic function (absolute neutrophil count ≥ 1.0 x109/L, platelets ≥ 100 x109/L, haemoglobin ≥ 9 g/L) measured within 14 days of treatment initiation.	☐ oui ☐ non
10. Adequate renal function (creatinine clearance ≥ 50 mL/min using the MDRD or CKI EPI measured within 14 days of treatment initiation.	☐ oui ☐ non
11. Adequate hepatic function (serum bilirubin ≤ 1.5 xULN unless due to Gilbert's syndrome; aspartate aminotransferase [ASAT] and alanine aminotransferase [ALAT] ≤ 3 xULN) measured within 14 days of treatment initiation. For patients with documented liver metastasis, ASAT/ALAT ≤ 5x ULN is acceptable.	☐ oui ☐ non
12. Strictly normal blood levels of calcium and magnesium, measured within 14 days of treatment initiation.	☐ oui ☐ non
13. Eastern Cooperative Oncology Group Performance Status of ≤ 1.	☐ oui ☐ non
14. Estimated life expectancy ≥ 90 days	☐ oui ☐ non
15. Patients who are sexually active must agree to use a medically accepted method of contraception (e.g. implants, injectables, combined oral contraceptives, some intrauterine devices or vasectomized partner, for participating women; condoms for participating men) or practice complete abstinence, beginning 14 days before the first administration of IP, while on treatment and for at least 5 months after the last administration of IP for female patients, and 7months after the last administration of IP for male patients.	☐ oui ☐ non
16. Women of childbearing potential must have a negative urine or serum pregnancy test within 72 hours prior to the first administration of IP. If urine test results are positive or cannot be confirmed as negative, a serum pregnancy test will be required.	☐ oui ☐ non
17. Women who are breastfeeding should discontinue nursing prior to the first administration of IP and for at least 90 days after the last administration of IP	☐ oui ☐ non
18. Patients must be affiliated to a Social Security System or equivalent.	☐ oui ☐ non

CGFL CENTRE GEORGES FRANÇOIS LECLERC Ensemble, dépassons le cancer	**CRITERES DE SELECTION** **Etude AcSé Nivolumab**	Identité patient (coller étiquette patient)
Version 1.0 du 10/03/2015	Investigateur : Pr Ghiringhelli	Arc : Céline L 3784

Critères de non inclusion

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1. Prior treatment with an anti-PD1 or anti-PD-L1 antibody	☐ oui ☐ non
2. Eligible, and willing, to participate in a clinical trial of an alternative anticancer therapy targeting their disease, which is open to accrual in France.	☐ oui ☐ non
3. Concurrent steroid medication at a dose greater than prednisone 10 mg/day or equivalent. For patients with MMR-deficient high-grade gliomas, concurrent steroid medication at a dose greater than prednisone 20mg/day or equivalent.	☐ oui ☐ non
4. Has active autoimmune disease that has required systemic treatment in the past 2 years (i.e. with use of disease modifying agents, corticosteroids or immunosuppressive drugs). Replacement therapy (eg., thyroxine, insulin, or physiologic corticosteroid replacement therapy for adrenal or pituitary insufficiency, etc.) is not considered a form of systemic treatment.	☐ oui ☐ non
5. History of (non-infectious) pneumonitis that required steroids, or current pneumonitis.	☐ oui ☐ non
6. History of severe hypersensitivity reaction to any monoclonal antibody therapy	☐ oui ☐ non
7. Radiotherapy (except for brain and extremities) within 21 days prior to the first administration of IP.	☐ oui ☐ non
8. Treatment with other investigational drugs or participation in another clinical trial within 21days prior to the first administration of IP or concomitantly with the trial.	☐ oui ☐ non
9. Has known symptomatic central nervous system (CNS) metastases except for patients with MMR-deficient high-grade gliomas. Patients with previously treated brain metastases may participate provided they are stable (without evidence of progression by imaging for at least four weeks prior to the first dose of trial treatment and any neurologic symptoms have returned to baseline), have no evidence of new or enlarging brain metastases, and are not using steroids for at least 7 days prior to trial treatment.	☐ oui ☐ non
10. Has known carcinomatous meningitis or a history of leptomeningeal disease.	☐ oui ☐ non
11. Serum creatinine > 1.5 xULN or glomerular filtration rate < 50 ml/min.	☐ oui ☐ non
12. Other malignancies within the past 5 years other than basal cell skin cancer or carcinoma in situ of the cervix.	☐ oui ☐ non
13. Active serious infections in particular if requiring systemic antibiotic or antimicrobial therapy.	☐ oui ☐ non

14. Active acute viral hepatitis and/or human immunodeficiency virus infection (HIV 1/2 antibodies) or a known history of active *Tuberculosis bacillus.* Patients with cured A, B or C virus hepatitis infection are eligible if they meet all the eligibility criteria, in particular the liver function criterion. Patients with chronic B or C virus hepatitis are eligible if they meet all the eligibility criteria and have a Child-Pugh score of A or B7 (i.e score ≤7 points).	☐ oui ☐ non
15. Live vaccine received within 30 days of planned start of study treatment. Note: Seasonal influenza vaccines for injection are generally inactivated vaccines and are allowed; however intranasal influenza vaccines (e.g. Flu-Mist®) are live attenuated vaccines,and are not allowed.	☐ oui ☐ non
16. Active alcohol or drug abuse.	☐ oui ☐ non
17.Psychological, familial, sociological or geographical factors potentially hampering compliance with the study protocol and follow-up schedule.	☐ oui ☐ non
18.Any condition which in the Investigator's opinion makes it undesirable for the subject to participate in the trial or which would jeopardize compliance with the protocol.	☐ oui ☐ non

Date : _____

Signature de l'investigateur : _____