

SOUTHAMPTON LYMPHOMA GROUP TRIALS PORTFOLIO (July 2026)

Study Title	Treatment	Phase	Key inclusion criteria	Key exclusion criteria
DLBCL First line				
Soundtrack-E (CAN1848) On hold	IV AZD0486 (CD19xCD3 bispecific TCE) +RCHOP in previously untreated LBCL	Phase I-II	-IPI2-5 -EF≥ 50%	-Burkitt, Richter, Primary effusion LBCL, CNS Lymphoma -Leukemic presentation -Prior anthracycline use ≥ 150 mg/m ²
DLBCL Relapsed/Refractory				
PORTAL (CAN1816)	Single Arm Pola-Glofib 2 cohorts, as bridging to CAR T or for patients failing to achieve CMR at day 28 post CAR-T	Phase II	≥18 years DLBCL, HGBCL with myc, bcl2 and/or bcl6, HGBCL NOS, PMBCL, Transformed FL -Part 1 -R/R eligible for CAR T and need bridging. ECOG 0/1 -Part 2 Failed to achieve CMR D score 1-3, ECOG 0-2	≥G2 peripheral neuropathy CNS Lymphoma Active AI or Immunodeficiency Concomitant severe neuro disorder Prior solid organ transplant Prior allo SCT Auto SCT within 100 days Known or suspected HLH (prior Pola is not an exclusion)
ATHENA-1 (CAN1607)	REGN5837 + Odronextamab in aggressive B-Cell NHLs	Phase I	≥18 years -CD20+ aggressive B-NHL - progression after at least 2 lines of systemic therapy containing an anti-CD20 antibody and an alkylating agent -Patients who have received CAR-T therapy are eligible	-Prior allogeneic stem cell transplantation or solid organ transplantation -Prior treatment with anti-CD20 x anti-CD3 bispecific antibody, such as odronextamab

DTP3 (CAN1700)	Dose escalation and dose expansion DTP3 administered as a one-hour infusion three times per week	Phase I/II	>16 years -Not currently a candidate for stem cell transplant or CAR T-cell therapy	-Stem cell or CAR T-cell within 12 weeks of consent, or other IMP within 28 days. -Prior non-experimental therapy or radiotherapy within 28 days.
Primary CNS Lymphoma				
FL First line				
Soundtrack-E (CAN1848) On hold	IV AZD0486 (CD19xCD3 bispecific TCE) +RCHOP Previously untreated FL3B	Phase I,II	Untreated FL3B	-Leukaemic presentation
FL Relapsed/Refractory				
ATHENA-1 (CAN1607)	REGN5837 + Odronextamab in aggressive B-Cell NHLs	Phase I	≥18 years -CD20+ aggressive B-NHL, FL G3b - progression after at least 2 lines of systemic therapy containing an anti-CD20 antibody and an alkylating agent -Patients who have received CAR-T therapy are eligible	-Prior allogeneic stem cell transplantation or solid organ transplantation -Prior treatment with anti-CD20 x anti-CD3 bispecific antibody, such as odronextamab
REFRACT (CAN1762)	Randomised - Round1 ICT vs Epcoritamab+Lenalidomide (1:1) - Round 2,3 – to be determined (1:4)	Phase II	≥18 years - ECOG≤2 - histologically confirmed R/R CD20+ - at least 1 prior line - PET avid disease - adequate organ function (ANC,Plt,ALT,BR,CrCl,clotting)	- high grade transformation incl:G3b - prior allo or solid organ transplant - prior Len within 12 months - CAR T within 100 days - auto, allo, maintenance therapy planned within 24 weeks - immunochemotherapy with platinum-based regimen planned - current or prior CNS lymphoma
Mantle Cell Lymphoma First line				
ZEBRA (CAN 1798)	Randomised Zanubrutinib+Rituximab fixed duration	Phase II	≥18 years	-any prior treatment for MCL including RT -CNS involvement

	• Observation		-Pathologically confirmed MCL with t(11;14) and/or overexpress cyclin D1,D2 or D3 -Stage II-IV by CT or by WCC/BM infiltration - Indolent MCL ○ Observation without treatment for minimum 6 months ○ Leukaemic non-nodal variant ○ Low tumour volume (LN ≤ 3cm, Ki67 ≤ 30% and classical morphology – non-blastoid/pleomorphic	-no progression requiring treatment since diagnosis -moderate or strong CYP3A inducer - vitamin K antagonist - active or history of bleeding or history of spontaneous bleeding requiring blood transfusion or other medical intervention - history of stroke or ICH within 6 months
Mantle Cell Lymphoma Relapsed/Refractory				
Marginal Zone Lymphoma First Line				
Other B-NHL				
DTP3 (CAN1700)	Dose escalation and dose expansion DTP3 administered as a one-hour infusion three times per week	Phase I/II	>16 years -Not currently a candidate for stem cell transplant or CAR T-cell therapy	-Stem cell or CAR T-cell within 12 weeks of consent, or other IMP within 28 days. -Prior non-experimental therapy or radiotherapy within 28 days.
Soundtrack-E (CAN1848) On hold	IV AZD0486 (D19xCD3 bispecific TCE) +RCHOP		-R/R B NHL post 1st line -presence of CD19 expression in previous CD19-directed therapy	-Current diagnosis of ○ BCL unclassifiable, features bet DLBCL and classical HL (mediastinal grey-zone L) ○ Burkitt Lymphoma ○ Richter's transformation ○ Primary effusion DLBCL ○ P or S CNS L -Leukaemic presentation
Hodgkin Lymphoma FL				

RATiFY (CAN1835)	Non-randomised Initial x 3 tislelizumab > iPET+ceCT > Group D-E (advanced stage only at UHS) GpA – RT+ x 2 years of Tislelizumab GpB to E – tislelizumab+AVD (2-6 cycles)+/-RT	Phase II	≥60 years -ECOG 0-2 -EF≥50% -CrCL≥30ml/min	-NLPHL -History of AI within 2 years -Solid organ transplant -≥G2 peripheral neuropathy -presented with symptomatic compression of vital structures -Immunosuppressive therapy within 2 months -treated haematological malignancy -solid organ malignancy in last 3 yrs
RADAR (CAN1666)	Randomised PET response adapted design Untreated Stage IA/IIA HL - ABVD+/-ISRT - A2VD+/-ISRT	Phase III	16-69 years Stage IA/IIA with no mediastinal bulk	- Previous treatment for HL apart from short courses of oral steroid -infradiaphragmatic disease -NLPHL -other active cancer with exceptions -grade ≥1 sensory or motor peripheral neuropathy from any cause
Hodgkin Lymphoma Relapsed/Refractory				
PTCL				
CCS1477-02 (CAN1483) <i>Pending</i>	Non-randomised Monotherapy CCS1477 bromodomain inhibitor 2L+	Phase I/IIa	- ≥18 years - ECOG 0-1 - adequate haem function	- strong CYP3A4 inducers within 4 weeks - strong CYP3A4 inhibitors within 2 weeks - inhibitors of P-gp - unresolved toxicity >G1 - repeatable prolonged QTcF >480
CTCL				
BI-1808 (CAN1605)	TNFR2 mAb monotherapy and in combination with pembrolizumab (currently in phase 1)	Phase I/IIa	-Any histologically confirmed advanced malignancy -Has received SOC or ineligible for SOC	-Active CNS metastases -Systemic treatment within 4 weeks of first dose

				-Radiotherapy within 2 weeks of first dose of BI-1808.
CLL				
BGB-16673-302 (CAN1871)	Randomised BGB16673 vs ICT Previously exposed to BTKi and BCL2i	Phase III	≥ 18 years - ECOG 0-2 - prior both BTKi and BCL2i treated - SLL ≥ 1 LN > 1.5 cm in LDi and measurable in 2 diameters - adequate organ functions	- prolymphocytic leukaemia - Richter's transformation - prior auto or CAR_T in 3 months - stroke or ICH in 6 months - clinically significant CVS disease - warfarin or VKA - strong CYP3A interactions