

Main Inclusion Criteria

Patients with histologically proven, unresectable locally advanced or metastatic cancers for whom no approved therapy with demonstrated clinical benefit is available or patients who are intolerant or have declined standard therapy as listed below:

- **Endometrial** adenocarcinoma that has progressed during or following at least 1 and up to 5 prior therapeutic regimens.
- **Cervical** carcinoma that has progressed during or following at least 1 and up to 5 prior therapeutic regimens.
- **Soft tissue sarcoma** that has progressed during or following at least 1 and up to 5 prior therapeutic regimens and with the following histology: undifferentiated pleomorphic sarcoma, including malignant fibrous histiocytoma, dedifferentiated or poorly differentiated liposarcoma, synovial sarcoma, or rhabdomyosarcoma.
- **for all Cohorts**
 - Maintenance therapy following first-line therapy will not be considered a separate regimen of therapy.
 - Prior neoadjuvant Cx for operable disease, adjuvant Cx for completely resected disease or definitive chemoradiation given for locally advanced disease will not be considered a separate regimen of therapy.
- ECOG: 0 or 1.
- Measurable disease as per RECIST 1.1 criteria
- must have archival, paraffin embedded tumor specimen (no new biopsy permitted)

Main Exclusion Criteria

- Symptomatic CNS metastases. Patients with history of prior CNS metastasis must have been treated, must be asymptomatic, and must not have a current treatment or progress
- Previous treatment with an immune checkpoint inhibitors
- History of known or suspected autoimmune disease
- Treatment with any systemic anti-neoplastic therapy, or investigational therapy within the 4 weeks prior to the initiation of study drug administration. Treatment with radiation therapy within 2 weeks prior to the initiation of study drug administration.

Out-patient Therapy: PD-1 Antibody from MacroGenics

Intravenous infusion over approx. 60 min, every 2 weeks, dosis 3mg/kg

Visits schedule: out-patient visits

Cycle 1: d1, d8, d15,

Cycle 2-n: d1,d15

Stagings

CT Chest-Abdomen-Pelvis: at screening, every 2 cycles (8 weeks +/-3 d) for 6 cycles then every 12 weeks. Evaluation: Recist version 1.1. and irRC

Contact: Sebastian.ochsenreither@charite.de,
Veronique.thierry@charite-research.org,

t: 030 450 513 502

t: 030 450 539 263