

Backgrounder “Clear Your View” Campaign

New awareness campaign focuses on need for complete biomarker testing before starting first-line treatment for advanced non-small cell lung cancer (NSCLC) patients

Current rates of testing fail to meet standard-of-care medical guidelines, causing many patients to receive inappropriate therapy¹⁻⁴

Adoption of personalized medicine (treatment based on an individual's cancer genetic data) lags significantly behind recommended medical guidelines.¹⁻⁴ Why?

- Some physicians report they lack the knowledge and skills needed to routinely do complete genotyping testing of all the biomarkers in their practice
- Medical guidelines evolve and new therapies gain approval, making it challenging to keep track of the latest recommendations
- Waiting for complete genotyping results can seem too long
- Patients are eager to start treatment, especially when their condition is extremely serious
- Not all insurers cover complete biomarker testing yet

One example: Advanced non-small cell lung cancer (NSCLC). More than 80% of patients do not receive complete guideline-recommended biomarker testing, putting them at risk for inappropriate treatment. *It is estimated that only 18% of advanced NSCLC patients receive complete guideline-recommended biomarker testing.*¹

Physicians are in the driver's seat helping their patients decide on the best treatment

- In many cases, physicians are rushing to recommend immunotherapy options
- However, immunotherapy isn't right for every newly diagnosed patient, and after starting a patient on immunotherapy there's no second chance for the right first-line therapy
- Some patients with certain mutations can do worse with immunotherapy than targeted therapy. For example, patients with *EGFR*, *ALK*, or *BRAF* alterations have a lower overall response rate to immunotherapy than they do to targeted therapy⁵⁻¹¹
- Alternatively, many other patients may not receive targeted FDA-approved therapies appropriately because they don't first receive complete biomarker testing. For these patients, targeted therapies often have higher overall response rates compared to chemotherapy or immunotherapy¹²⁻¹⁸

Only one chance: There may be only one opportunity for the right first-line treatment decision. Only one in two patients make it to second-line therapy.¹⁹

The right immunotherapy or targeted therapy **matched to the patient's genomic profile** can significantly extend median overall survival rate compared to chemotherapy alone.¹²⁻¹⁶

For journalists and media reporters: For more information about this initiative, contact:
media@clearyourview.org

“Clear Your View” campaign compels oncologists to “Test for 10”

Testing for all 10 guideline-recommended biomarkers is the only way to help ensure the right treatment right from the start for patients with advanced NSCLC. Now, an awareness campaign – “Clear Your View” – offers oncologists a new roadmap for biomarker testing:

STOP	For every advanced NSCLC patient, order all 10 biomarkers.
WAIT	Get complete results to determine the most effective therapy.
TREAT	Choose the therapy with confidence.

Unbranded awareness campaign drives home that the right testing drives the right treatment



The key image of the campaign

An oncologist behind the wheel with a severely cracked windshield and with an impaired view that could lead to an accident.

The key message to oncologists

For your patients newly diagnosed with advanced non-small cell lung cancer, do not proceed without a clear view ahead.

The calls to action

1. Test completely for all 10 guideline-recommended biomarkers for every newly diagnosed advanced NSCLC patient.
2. Visit ClearYourView.org for additional information.

The campaign's main communication channels

- Website (www.clearyourview.org) and social media, with patient stories and more
- Online advertising and emails

The timeframe

The “Clear Your View” campaign runs throughout 2020.

Campaign video



The campaign is endorsed by



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