PATIENT
EXAMPLE-CRC-01
REPORT DATE
17-Sep-2025

Gender: Female | Birth year: 1946 | WHO: 0

Tumor: Colorectum (cecum) carcinoma | Lesions: Lung, Peritoneal | Stage: IV

Clinical summary

Relevant systemic treatment history None

Relevant other oncological history 11/2021 Hemicolectomy right (Cecum)

Previous primary tumor Skin squamous cell carcinoma (diagnosed 6/2016, last treatment 8/2016, considered

non-active)

Relevant non-oncological history 1/2019 Cerebrovascular accident

Recent molecular results

NGS & MSI Panel (15-Jan-2023)

Tumor mutational burden TMB 8 mut/Mb

Microsatellite (in)stability Stable

Driver mutations KRAS G12D

Trial-relevant IHC results

Trial

PD-L1 Score < 50%

Standard-of-care options considered potentially eligible

Cohort

Treatment	Literature efficacy evidence		Real-world efficacy evidence		Warnings
FOLFIRI	PHASE-3-CRC				
	PFS:	10.0 months (95% CI: 10.0-12.0)	PFS:	13.3 months, IQR: 12.6	
	OS:	25.0 months (95% CI: 25.0-30.0)	OS:	22.2 months, IQR: 24.8	
Trials in Other that ar	e oper	and potentially eligible (0)			

International trials that are open and potentially eligible (1 cohort from 1 trial)

Molecular

Trial	Cohort	Molecular	Sites	
KRAS-G12D-TRIAL	KRAS G12D	KRAS G12D	NL: Utrecht, Germany: Stuttgart	

Sites

Warnings

International trials are matched solely on molecular event and tumor type (clinical data excluded).

PATIENT EXAMPLE-CRC-01

REPORT DATE 17-Sep-2025

Molecular Details

NGS & MSI Panel (15-Jan-2023)

Biopsy location Lung

Tumor mutational burden TMB 8 mut/Mb

Microsatellite (in)stability Stable

Driver mutations KRAS G12D

IHC results

Ki67 Positive, score 90%

PD-L1 Score < 50%

Molecular history

Event	Description	2023-01-15 NGS & MSI Panel
KRAS G12D (Tier III)	Mutation (cancer-associated variant) Loss of function	VAF 0.2232%
ТМВ		8.0
MSI		Stable

REPORT DATE 17-Sep-2025

Efficacy evidence

Standard of care options considered potentially eligible

The following standard of care treatment(s) could be an option for this patient. For further details per study see 'SOC literature details' section in extended report.

Treatment	Literature efficacy eviden	ce
FOLFIRI	PHASE-3-CRC	
	Patient characteristics:	
	WHO/ECOG	0: 100, 1: 80, 2: 20, 3: 0, 4: 0
	Primary tumor location	Left: 145, Both or unknown: 10, Right: 45
	Mutations	KRAS exon 2 wild-type 200/200
	Metastatic sites	Liver only: 58 (32.0%), Lung only: 10 (6.0%)
	Previous systemic therap	y 35/200
	Prior therapies	Adjuvant chemotherapy
	Median PFS:	10.0 months (95% CI: 10.0-12.0)
	Median OS:	25.0 months (95% CI: 25.0-30.0)

PHASE-3-CRC

PHASE-3-CRC, Phase III, Adjuvant Study:

Molecular requirements: None

Therapies: FOLFIRI+Cetuximab, FOLFIRI

Patient characteristics:

	Cetuximab + FOLFIRI (n=100)	FOLFIRI (n=200)
Age (median [range])	65.0 [40-75]	65.0 [30-75]
Sex	Male: 50	Male: 120

REPORT DATE 17-Sep-2025

	Female: 50	Female: 80
Race	NA	NA
Region	Europe: 100 patients	Europe: 200 patients
WHO/ECOG	0: 80, 1: 10, 2: 10, 3: 0, 4: 0	0: 100, 1: 80, 2: 20, 3: 0, 4: 0
Primary tumor location	Left: 78	Left: 145
	Both or unknown: 3	Both or unknown: 10
	Right: 19	Right: 45
Mutations	KRAS exon 2 wild-type 100/100	KRAS exon 2 wild-type 200/200
Metastatic sites	Liver only: 62 (62.0%), Lung only: 4 (4.0%)	Liver only: 58 (32.0%), Lung only: 10 (6.0%)
Time of metastases	Unknown	Unknown
Previous systemic therapy	30/100	35/200
Prior therapies	Adjuvant chemotherapy	Adjuvant chemotherapy

Primary endpoints:

Cetuximab + FOLFIRI

FOLFIRI

Hazard ratio (HR) / Odds Ratio (OR) P value

Median follow-up for PFS was 70 months

Secondary endpoints:

	Cetuximab + FOLFIRI	FOLFIRI	Hazard ratio (HR) / Odds Ratio (OF	R) P value
Median Overall Survival (95% CI)	35.0 (25.0 - 40.0)	25.0 months (25.0 - 30.0)	0.75 (0.6 - 0.95)	p = 0.011
Median Progression-Free Survival (95% CI)	10.0 (10.0 - 12.0)	10.0 months (10.0 - 12.0)	0.99 (0.8 - 1.25)	p = 1

Median follow-up for PFS was 70 months

Treatment decisions (percentage of population assigned to systemic treatment) in NCR real-world data set

	All (n=9207)	Age 73-83y (n=2727)	WHO 1 (n=2828)	RAS positive (n=2760)	Liver only lesions (n=2715)
FOLFIRI	38.5%	23.8%	37.9%	44.6%	39.5%

Median overall survival (OS) in months in NCR real-world data set

	All (n=9207)	Age 73-83y (n=2727)	WHO 1 (n=2828)	RAS positive (n=2760)	Liver only lesions (n=2715)
FOLFIRI	16.1 , IQR: 18.2	15.4 , IQR: 18.2	14.8 , IQR: 16.3	15.8 , IQR: 14.2	16.5 , IQR: 17.4
	(n=3543)	(n=649)	(n=1071)	(n=1230)	(n=1073)
Median progression-f	free survival (PFS) in months in NC	CR real-world data set			
Median progression-f	free survival (PFS) in months in NC All (n=5018)	CR real-world data set Age 73-83y (n=1330)	WHO 1 (n=1623)	RAS positive (n=1822)	Liver only lesions (n=1534)
Median progression-f	, ,		WHO 1 (n=1623) 7.9, IQR: 5	RAS positive (n=1822) 8, IQR: 4.7	Liver only lesions (n=1534) 8.3, IQR: 5.3

Explanation:

These tables only show treatments that are considered standard of care (SOC) in colorectal cancer in the Netherlands.

The 'All' column shows results in NCR patients who were previously untreated, diagnosed with colorectal cancer with distant metastases and treated systemically without surgery, for whom the treatment could be categorized in SOC treatments.

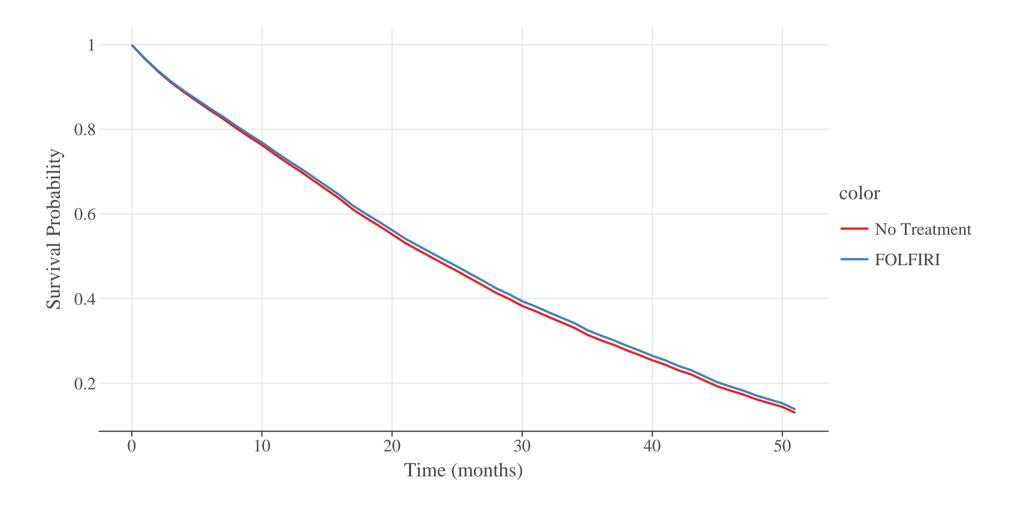
The 'Age', 'WHO', 'RAS' and 'Lesions' columns show results based on patients from the 'All' population, filtered for equal WHO, similar age, equal RAS status or equal lesion localization, respectively.

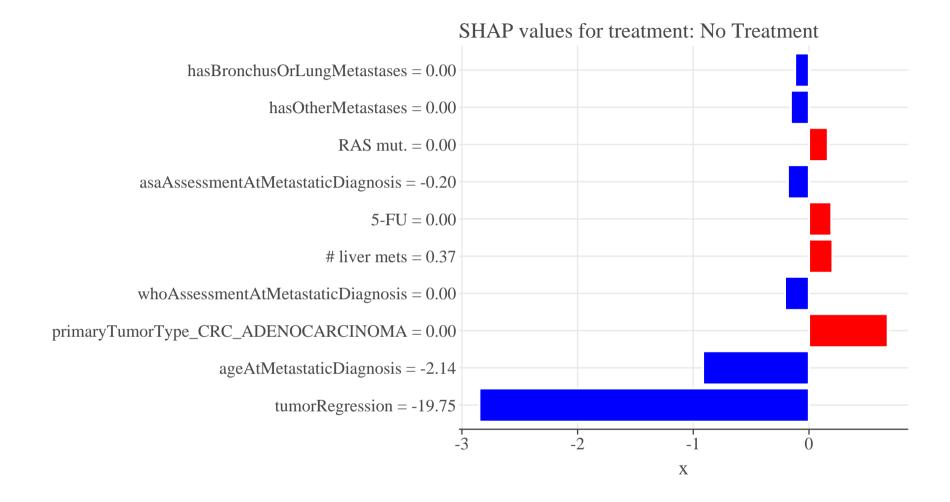
'PFS' is calculated as the duration from the date on which the first compound of the treatment was administered, until first progression.

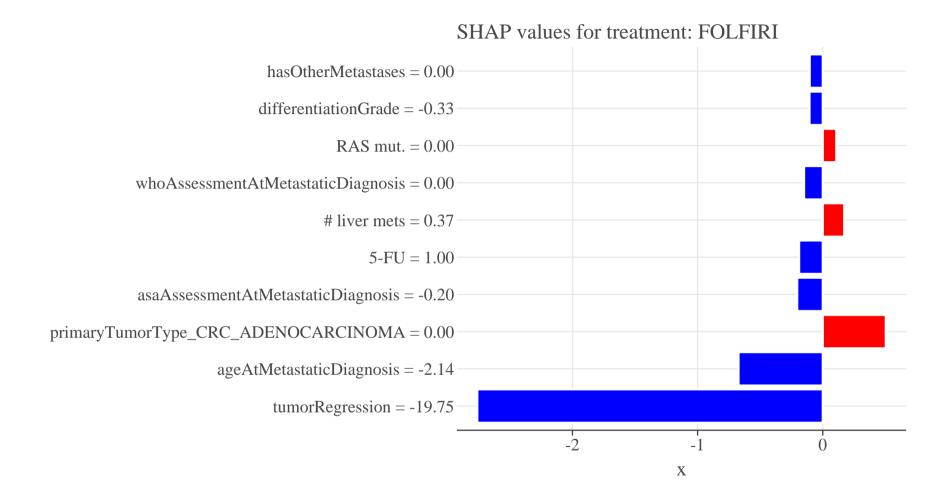
'OS' is calculated as the duration from the date on which the first compound of the treatment was administered, until death from any cause.

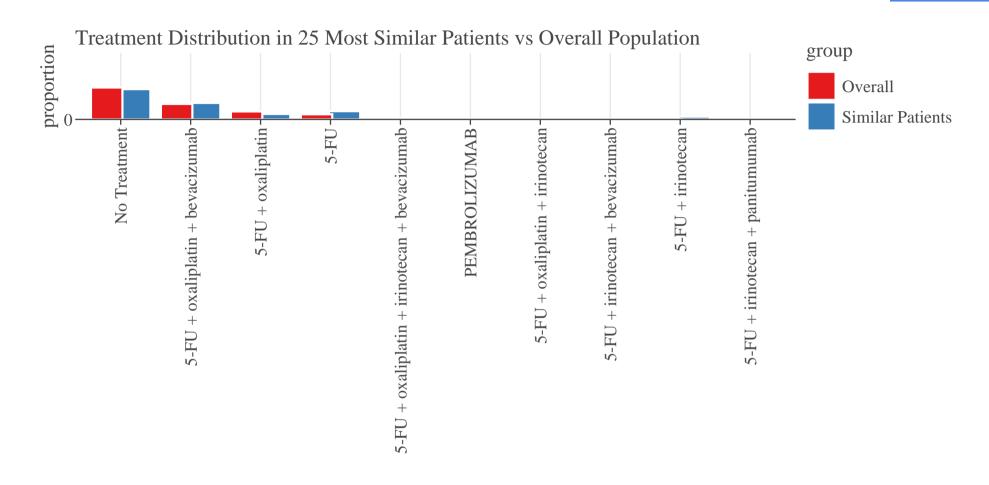
When patient number is too low ($n \le 20$) to predict PFS or OS, "NA" is shown.

17-Sep-2025









Resistance evidence

Treatment	Mutation	Evidence source	Evidence level	Found in molecular analysis
FOLFIRI	GENE S11C	[1]	D	Yes

PATIENT EXAMPLE-CRC-01

REPORT DATE 17-Sep-2025

On label clinical evidence

Level A Level B Level C Level D Event **CKB Event**

None

Off label clinical evidence

Event CKB Event Level A Level B Level C Level D

None

Efficacy evidence description

None

Treatment ranking

Treatment **Events** Score

PATIENT EXAMPLE-CRC-01

REPORT DATE 17-Sep-2025

Clinical Details

Clinical summary

Relevant systemic treatment history None

Relevant other oncological history 11/2021 Hemicolectomy right (Cecum)

Skin squamous cell carcinoma (diagnosed 6/2016, last treatment 8/2016, considered Previous primary tumor

non-active)

1/2019 Relevant non-oncological history Cerebrovascular accident

Patient current details (05-Mar-2023)

Unresolved toxicities grade => 2 None Known allergies Morphine

Recent surgeries 12-Nov-2021 Hemicolectomy right

Tumor details (05-Mar-2023)

Measurable disease Yes

Known lesions Lung, Peritoneal Unknown lesions Lymph node

No lesions present CNS, Brain, Liver, Bone

Active medication details

Medication Administration route Start date Stop date Dosage Frequency

None

Blood transfusions

Product Date

ERTHROCYTES_FILTERED 10-Jan-2023

PATIENT EXAMPLE-CRC-01

REPORT DATE 17-Sep-2025

Trial Matching Details

Trials in Other that are open and potentially eligible (0)

Trial Cohort Molecular Sites Warnings

International trials that are open and potentially eligible (1 cohort from 1 trial)

Trial Cohort Molecular Sites KRAS-G12D-TRIAL KRAS G12D KRAS G12D NL: Utrecht, Germany: Stuttgart

International trials are matched solely on molecular event and tumor type (clinical data excluded).

Trials and cohorts that are potentially eligible, but are closed (2)

Dose expansion - monotherapy

Trial	Cohort	Molecular	Sites	Warnings
METC 01 IEMOEN	Applies to all cohorts below	None		Has not exhausted SOC
	Dose escalation - monotherapy			

Trials and cohorts that are considered ineligible (2)

Trial	Cohort	Molecular	Ineligibility reasons
METC 02 KAYRAS	Applies to all cohorts below	KRAS G12D	PD-L1 expression below minimum of 50.0
	Dose expansion - monotherapy - Colorectum		
	Dose expansion - monotherapy - NSCLC		No lung non-small cell carcinoma

Trials and cohorts that are not evaluable or ignored (0)

Trial Cohort Molecular Sites Configuration

None

Other trials & cohorts

REPORT DATE 17-Sep-2025

METC 02

Potentially eligible No

Acronym KAYRAS

Title A phase 1/2 trial for first in-human usage of KAYRAS, a new specific KRAS G12D inhibitor in NSCLC and colorectal cancer

Reference Evaluation

I-05 FAIL

PD-L1 expression below minimum of 50.0

METC 02 - Dose expansion - monotherapy - NSCLC

Cohort ID A

Potentially eligible? No
Open for inclusion? Yes

Has slots available? Yes

Reference Evaluation

I-02 FAIL

No lung non-small cell carcinoma

METC 02 - Dose expansion - monotherapy - Colorectum

Cohort ID B

Potentially eligible? No

Open for inclusion? Yes

Has slots available? Yes

METC 01

Potentially eligible Yes

Acronym IEMOEN

Title Phase I first-in-human study to evaluate safety of IEMOEN, a new PD-L1 inhibitor in advanced solid tumors

All results and data described in this report are for Research Use Only and have NOT been generated using a clinically validated and controlled procedure nor is it a validated medical device. The results should NOT be used for diagnostic or treatment purposes. No rights can be derived from the content of this report.

13/15 Gene and variant annotations and related content are powered by Genomenon Cancer Knowledgebase (CKB).

REPORT DATE 17-Sep-2025

Reference	Evaluation
I-03	WARN
	Has not exhausted SOC
E-01	PASS
	Has no other condition belonging to category autoimmune disease
E-02	PASS
	Hemoglobin above 6 mmol/L
E-03	PASS
	Neutrophils above 1.5
I-01	PASS
	Patient is at least 18 years old
I-02	PASS
	Has solid primary tumor
	Stage IV is considered metastatic

METC 01 - Dose escalation - monotherapy

Cohort ID Α Potentially eligible? Yes Open for inclusion? No Has slots available? No

PATIENT **EXAMPLE-CRC-01**

REPORT DATE 17-Sep-2025

METC 01 - Dose expansion - monotherapy

В Cohort ID

Potentially eligible? Yes

Open for inclusion? No

Has slots available? No