PATIENT

EXAMPLE-LUNG-01

REPORT DATE

01-Nov-2024

Gender: Male | Birth year: 1950 | WHO: 0

Tumor: Lung - Adenocarcinoma | Lesions: Liver | Stage: IV

## **Summary**

#### **Clinical summary**

Relevant systemic treatment history 1/2023-9/2024 Osimertinib

Relevant other oncological history None

Previous primary tumor None

Relevant non-oncological history 2022 Rheumatoid arthritis

#### **Recent molecular results**

#### Hartwig WGS (20-Aug-2024)

Biopsy location Liver (purity 50%)

Molecular tissue of origin prediction

Lung: Non-small cell (98%)

Tumor mutational load / burden

TML low (40) / TMB low (2)

Microsatellite (in)stability Stable

HR status Proficient (0)

High driver mutations EGFR L858R, EGFR C797S, KRAS G12D

Amplified genes

Deleted genes

TP53

Homozygously disrupted genes

None

Gene fusions

None

Virus detection

None

Potentially actionable events with medium/low driver:

None

IHC results PD-L1: Score 1%

### Example trials that are open and potentially eligible (2 cohorts from 2 trials)

Trial	Cohort	Molecular	Warnings
METC 04 TEDR1	Lung cancer C797S cohort	EGFR C797S	None
METC 02 KAYRAS	Dose expansion - monotherapy - NSCLC	KRAS G12D	Variant(s) KRAS G12D in KRAS but subclonal likelihood of > 50%

## Example trials that are open and potentially eligible but currently have no slots available (1 cohort from 1 trial)

Trial	Cohort	Molecular	Warnings
METC 01	Dose escalation - monotherapy		Hemoglobin 5.6 mmol/L below min of 6.0 mmol/L, History of rheumatoid
IEMOEN			arthritis, SOC not exhausted: at least platinum doublet remaining

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# **Trial Matching Summary**

Example trials and cohorts that are potentially eligible, but are closed (1)

Trial	Cohort	Molecular	Warnings
METC 01 IEMOEN	Dose expansion - monotherapy		Hemoglobin 5.6 mmol/L below min of 6.0 mmol/L, History of rheumatoid arthritis, SOC not exhausted: at least platinum doublet remaining

### Example trials and cohorts that are considered ineligible (2)

Trial	Cohort	Molecular	Ineligibility reasons
METC 02 KAYRAS	Dose expansion - monotherapy - Colorectum	KRAS G12D	No colorectal cancer
METC 03 NO-SEE797ES	Dose escalation - monotherapy		C797S detected in EGFR

Open cohorts with no slots available are shown in grey.

Example trials and cohorts that are not evaluable or ignored (0)

None

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# **Trial Matching Details**

### Potentially eligible open trials & cohorts

#### **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

Rule	Reference	Evaluation
E-02	Has hemoglobin below 6 mmol/l	FAIL (potentially recoverable)
		Hemoglobin 5.6 mmol/L is below minimum of 6.0 mmol/L
I-03	Patient should have exhausted applicable available standard-of-care treatments.	WARN
		Patient has not exhausted SOC (at least platinum doublet remaining)
E-01	Has an active autoimmune disease that requires systemic treatment and poses a risk according	WARN
	to the investigator.	Patient has history of condition(s) rheumatoid arthritis, which is indicative of autoimmune disease
E-03	Has absolute neutrophil count below 1.5 x 10^9/l	UNDETERMINED
		No measurement found for absolute neutrophil count
I-01	Patients must be ≥18 years old.	PASS
		Patient is at least 18 years old
I-02	IEMOEN monotherapy is indicated for the treatment of adults with advanced/metastatic solid tumors.	PASS
		Patient has solid primary tumor
		Tumor stage IV is considered metastatic

### METC 01 - Dose escalation - monotherapy

Cohort ID A

Potentially eligible? Yes

Open for inclusion? Yes

Has slots available? No

## METC 01 - Dose expansion - monotherapy

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

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Patient has no colorectal cancer

#### **METC 02**

Potentially eligible Yes

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

Rule	Reference		Evaluation
I-04	Patient has confirmed KRAS G12D mutation		WARN
			Variant(s) KRAS G12D in KRAS detected in canonical transcript but subclonal likelihood of > 50%
I-03	ALAT and ASAT should be at most 3*ULN, or at most 5*ULN in case of liver metastases.		UNDETERMINED
			ASAT and ALAT are not present or cannot be evaluated
I-01	Patient is ≥18 year	ars old.	PASS
			Patient is at least 18 years old
I-02		erapy is indicated for the treatment of NSCLC or colorectal patients with	PASS
	metastatic cance	r.	Tumor stage IV is considered metastation
METO	C 02 - Dose expa	nsion - monotherapy - NSCLC	
Col	nort ID	A	
Pot	entially eligible?	Yes	
Оре	en for inclusion?	Yes	
Has	s slots available?	Yes	
Rule	Reference		Evaluation
I-02	KAYRAS monoth	erapy is indicated for the treatment of NSCLC or colorectal patients with	PASS
	metastatic cance	ancer.	Patient has tumor belonging to DOID term(s) lung non-small cell carcinoma
METO	C 02 - Dose expa	nsion - monotherapy - Colorectum	
Cohort ID		В	
Potentially eligible?		No	
Оре	en for inclusion?	Yes	
Has	s slots available?	Yes	
Rule	Reference		Evaluation
I-02	KAYRAS monoth	erapy is indicated for the treatment of NSCLC or colorectal patients with	FAIL

metastatic cancer.

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#### **METC 04**

Potentially eligible Yes
Acronym TEDR1

Title TEDR1 Trial: A phase II trial to evaluate efficacy of specific EGFR inhibitors in lung cancer

Rule	Reference	Evaluation
l-1	Patient is ≥18 years of age.	PASS
		Patient is at least 18 years old
l-2	Drug 1 as monotherapy is indicated for the treatment of adults with advanced lung cancer.	PASS
		Patient has tumor belonging to DOID term(s) lung cancer
		Tumor stage IV is considered metastatic
I-3	Patient has a confirmed EGFR C797S mutation	PASS
		Variant(s) C797S in gene EGFR detected in canonical transcript

### METC 04 - Lung cancer C797S cohort

Cohort ID A

Potentially eligible? Yes

Open for inclusion? Yes

Has slots available? Yes

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#### Other trials & cohorts

#### **METC 03**

Potentially eligible No

Acronym NO-SEE797ES

Title Phase I trial for development of NO-SEE797ES, a specific inhibitor for EGFR with C797 mutations but not C797S

in solid tumors

Rule	Reference	Evaluation
I-03	Tumors should contain EGFR C797 but not EGFR C797S mutation.	FAIL
		Variant(s) C797S in gene EGFR detected in canonical transcript

#### METC 03 - Dose escalation - monotherapy

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