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## **Sample Information**

Patient Name: 周玉女 Gender: Female ID No.: A201312226 History No.: 25088679

**Age:** 89

Ordering Doctor: DOC3153J 黄煦晴

Ordering REQ.: C21CN9M Signing in Date: 2020/08/20

**Path No.:** \$109-99885 **MP No.:** F20056

Assay: Oncomine Focus Assay

Sample Type: FFPE Block No.: C109-26813 Percentage of tumor cells: 20%

Note:

## Sample Cancer Type: Non-Small Cell Lung Cancer

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## **Report Highlights**

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## **Relevant Non-Small Cell Lung Cancer Findings**

Gene	Finding	Gene	Finding
ALK	Not detected	NTRK1	Not detected
BRAF	Not detected	NTRK2	Not detected
EGFR	EGFR p.(L858R) c.2573T>G	NTRK3	Not detected
ERBB2	Not detected	RET	Not detected
KRAS	Not detected	ROS1	Not detected
MET	Not detected		

### **Relevant Biomarkers**

Tier	Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
IA	EGFR p.(L858R) c.2573T>G	afatinib <sup>1, 2</sup> dacomitinib <sup>1, 2</sup>	None	196
	epidermal growth factor receptor Allele Frequency: 5.23%	erlotinib 1, 2		

Public data sources included in relevant therapies: FDA1, NCCN, EMA2, ESMO

**Tier Reference:** Li et al. Standards and Guidelines for the Interpretation and Reporting of Sequence Variants in Cancer: A Joint Consensus Recommendation of the Association for Molecular Pathology, American Society of Clinical Oncology, and College of American Pathologists. J Mol Diagn. 2017 Jan;19(1):4-23.



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## **Relevant Biomarkers (continued)**

Tier	Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
		gefitinib 1,2 osimertinib 1,2 afatinib + cetuximab bevacizumab + erlotinib 2 erlotinib + ramucirumab 2 atezolizumab + bevacizumab + chemotherapy gefitinib + chemotherapy bevacizumab + gefitinib		

Public data sources included in relevant therapies: FDA1, NCCN, EMA2, ESMO

**Tier Reference:** Li et al. Standards and Guidelines for the Interpretation and Reporting of Sequence Variants in Cancer: A Joint Consensus Recommendation of the Association for Molecular Pathology, American Society of Clinical Oncology, and College of American Pathologists. J Mol Diagn. 2017 Jan;19(1):4-23.

### **Variant Details**

Sequence Varia	ants						
Amino Acid Change	Coding	Variant ID	Locus	Allele Frequency	Transcript	Variant Effect	Coverage
p.(L858R)	c.2573T>G	COSM6224	chr7:55259515	5.23%	NM_005228.4	missense	1988
p.(D1529E)	c.4587C>G		chr2:29416366	51.28%	NM_004304.4	missense	1999
p.(I1461V)	c.4381A>G		chr2:29416572	99.90%	NM_004304.4	missense	1999
p.(=)	c.3600G>C		chr2:29443617	46.06%	NM_004304.4	synonymous	1991
p.(=)	c.3375C>A		chr2:29445458	50.28%	NM_004304.4	synonymous	1991
p.(=)	c.1953G>A		chr4:1807894	99.50%	NM_000142.4	synonymous	1998
p.(=)	c.1701A>G		chr4:55141055	99.85%	NM_006206.5	synonymous	1999
p.(P136L)	c.407C>T		chr5:176517797	99.25%	NM_213647.2	missense	2000
p.(=)	c.2307G>T		chr10:43613843	99.80%	NM_020975.4	synonymous	1994
	Amino Acid Change p.(L858R) p.(D1529E) p.(I1461V) p.(=) p.(=) p.(=) p.(=) p.(=)	p.(L858R) c.2573T>G p.(D1529E) c.4587C>G p.(I1461V) c.4381A>G p.(=) c.3600G>C p.(=) c.3375C>A p.(=) c.1953G>A p.(=) c.1701A>G p.(P136L) c.407C>T	Amino Acid Change       Coding       Variant ID         p.(L858R)       c.2573T>G       COSM6224         p.(D1529E)       c.4587C>G       .         p.(I1461V)       c.4381A>G       .         p.(=)       c.3600G>C       .         p.(=)       c.3375C>A       .         p.(=)       c.1953G>A       .         p.(=)       c.1701A>G       .         p.(P136L)       c.407C>T       .	Amino Acid Change         Coding         Variant ID         Locus           p.(L858R)         c.2573T>G         COSM6224         chr7:55259515           p.(D1529E)         c.4587C>G         .         chr2:29416366           p.(I1461V)         c.4381A>G         .         chr2:29416572           p.(=)         c.3600G>C         .         chr2:29443617           p.(=)         c.3375C>A         .         chr2:29445458           p.(=)         c.1953G>A         .         chr4:1807894           p.(=)         c.1701A>G         .         chr4:55141055           p.(P136L)         c.407C>T         .         chr5:176517797	Amino Acid ChangeCodingVariant IDLocusAllele Frequencyp.(L858R)c.2573T>GCOSM6224chr7:552595155.23%p.(D1529E)c.4587C>G.chr2:2941636651.28%p.(I1461V)c.4381A>G.chr2:2941657299.90%p.(=)c.3600G>C.chr2:2944361746.06%p.(=)c.3375C>A.chr2:2944545850.28%p.(=)c.1953G>A.chr4:180789499.50%p.(=)c.1701A>G.chr4:5514105599.85%p.(P136L)c.407C>T.chr5:17651779799.25%	Amino Acid Change         Coding         Variant ID         Locus         Frequency         Transcript           p.(L858R)         c.2573T>G         COSM6224         chr7:55259515         5.23%         NM_005228.4           p.(D1529E)         c.4587C>G         .         chr2:29416366         51.28%         NM_004304.4           p.(I1461V)         c.4381A>G         .         chr2:29416572         99.90%         NM_004304.4           p.(=)         c.3600G>C         .         chr2:29443617         46.06%         NM_004304.4           p.(=)         c.3375C>A         .         chr2:29445458         50.28%         NM_004304.4           p.(=)         c.1953G>A         .         chr4:1807894         99.50%         NM_000142.4           p.(=)         c.1701A>G         .         chr4:55141055         99.85%         NM_006206.5           p.(P136L)         c.407C>T         .         chr5:176517797         99.25%         NM_213647.2	Amino Acid Change         Coding         Variant ID         Locus         Frequency         Transcript         Variant Effect           p.(L858R)         c.2573T>G         COSM6224         chr7:55259515         5.23%         NM_005228.4         missense           p.(D1529E)         c.4587C>G         .         chr2:29416366         51.28%         NM_004304.4         missense           p.(I1461V)         c.4381A>G         .         chr2:29416572         99.90%         NM_004304.4         missense           p.(=)         c.3600G>C         .         chr2:29443617         46.06%         NM_004304.4         synonymous           p.(=)         c.3375C>A         .         chr2:29445458         50.28%         NM_004304.4         synonymous           p.(=)         c.1953G>A         .         chr4:1807894         99.50%         NM_000142.4         synonymous           p.(=)         c.1701A>G         .         chr4:55141055         99.85%         NM_006206.5         synonymous           p.(P136L)         c.407C>T         .         chr5:176517797         99.25%         NM_213647.2         missense

## **Biomarker Descriptions**

#### EGFR (epidermal growth factor receptor)

<u>Background:</u> The EGFR gene encodes the epidermal growth factor receptor (EGFR) tyrosine kinase, a member of the human epidermal growth factor receptor (HER) family. Along with EGFR/ERBB1/HER1, ERBB2/HER2, ERBB3/HER3, and ERBB4/HER4 make up the HER protein family<sup>1</sup>. EGFR ligand induced dimerization results in kinase activation and leads to stimulation of oncogenic signaling pathways including the PI3K/AKT/MTOR and RAS/RAF/MEK/ERK pathways. Activation of these pathways promote cell proliferation, differentiation, and survival<sup>2,3</sup>.

Alterations and prevalence: Recurrent somatic mutations in the tyrosine kinase domain of EGFR are observed in approximately 10-20% of lung adenocarcinoma and at higher frequencies in never-smoker, female, and in Asian populations with lung cancer<sup>4,5,6,7</sup>. The most common mutations occur near the ATP-binding pocket of the kinase domain and include short in-frame deletions in exon 19 (EGFR exon 19 deletion) and the L858R amino acid substitution in exon 218. These mutations constitutively activate the EGFR kinase resulting in downstream signaling and represent 80% of the EGFR mutations observed in lung cancer. A second group of recurrent activating



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## **Biomarker Descriptions (continued)**

mutations that are less common include E709K, G719X, S768I, L8610, and short in-frame insertions in exon 209,10,11,12, EGFR activating mutations in lung cancer tend to be mutually exclusive to KRAS activating mutations<sup>13</sup>. Although these variants are common in lung cancer, they are rare in other cancer types. In glioblastoma, recurrent activating EGFR mutations in the extracellular domain include R108K, A289V and G598V8,14. The recurrent focal amplification of the EGFR gene leads to an increase in expression in several cancer types. EGFR is amplified in up to 30% of glioblastoma, 12% of esophageal cancer, 10% of head and neck cancer, 5% of bladder cancer, and 5% of lung squamous cell carcinoma<sup>5,6,7,14,15</sup>. Deletion of exons 2-7 encoding the extracellular domain of EGFR (EGFRvIII) results in overexpression of a ligand-independent constitutively active protein which is frequently observed in glioblastoma and has been shown to lead to lung cancer development as well as sensitivity to TKIs16,17,18.

Potential relevance: Erlotinib19 (2004), afatinib20 (2013), gefitinib21 (2015), osimertinib22 (2015), and dacomitinib23 (2018) are small molecule TKIs that are FDA approved for non-small cell lung cancer (NSCLC) patients with sensitizing exon 19 deletions and exon 21 L858R mutations. Acquired secondary mutations often confer resistance to first line TKI therapy with the T790M amino acid substitution accounting for 50-60% of cases8. Osimertinib is also indicated for NSCLC patients harboring EGFR T790M mutations whose disease has progressed on or after treatment with a first line TKI. EGFR targeting antibodies including cetuximab<sup>24</sup> (2004), panitumumab<sup>25</sup> (2006), and necitumumab<sup>26</sup> (2016) are also under investigation in combination with EGFR-targeting TKIs for efficacy against EGFR mutations. The bispecific antibody, JNJ-6118637227, targeting EGFR and MET, and the tyrosine kinase inhibitor28 each received a breakthrough designation from the FDA (2020) for NSCLC tumors harboring EGFR exon 20 insertion mutations. The Oncoprex immunogene therapy CNVN-20229 in combination with the EGFR inhibitor, osimertinib, received a fast track designation from the FDA (2020) for NSCLC tumors harboring EGFR mutations. The use of cetuximab in combination with afatinib is currently recommended by the NCCN for patients who have progressed after receiving erlotinib, afatinib, dacomitinib, or gefitinib and chemotherapy30.

## **Relevant Therapy Summary**

bevacizumab + gefitinib

In this cancer type In other cancer type	In this cancer type and other cancer types		Both for use contraindica	~ ~	No evidence
EGFR p.(L858R) c.2573T>G					
Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
afatinib	•	•	•	•	(IV)
gefitinib	•	•	•		(IV)
erlotinib	•	•	•	•	<b>(III)</b>
osimertinib	•	•	•		<b>(III)</b>
dacomitinib	•	•	•	•	<b>(II)</b>
bevacizumab + erlotinib	×	•	•		<b>(II)</b>
erlotinib + ramucirumab	×	•	•	•	×
afatinib + cetuximab	×	•	×	×	×
atezolizumab + bevacizumab + carbop paclitaxel	latin +	×	×	•	×

X

×

X

<sup>\*</sup> Most advanced phase (IV, III, II/III, II, I/II, I) is shown and multiple clinical trials may be available.



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## **Relevant Therapy Summary (continued)**

In this cancer type O In other cancer

type

In this cancer type and other cancer types

Contraindicated

A Both for use and contraindicated

X No evidence

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
gefitinib + carboplatin + pemetrexed	×	×	×		×
anlotinib hydrochloride, toripalimab	×	×	×	×	(IV)
apatinib + EGFR tyrosine kinase inhibitor	×	×	×	×	(IV)
apatinib, gefitinib	×	×	×	×	(IV)
bevacizumab + osimertinib, osimertinib	×	×	×	×	(IV)
EGFR tyrosine kinase inhibitor	×	×	×	×	(IV)
erlotinib, gefitinib, icotinib hydrochloride, chemotherapy	×	×	×	×	● (IV)
gefitinib, radiation therapy	×	×	×	×	(IV)
icotinib hydrochloride	×	×	×	×	(IV)
icotinib hydrochloride, chemotherapy	×	×	×	×	(IV)
icotinib hydrochloride, radiation therapy	×	×	×	×	(IV)
ASK120067, gefitinib	×	×	×	×	<b>(III)</b>
bevacizumab, atezolizumab, chemotherapy	×	×	×	×	<b>(III)</b>
bevacizumab, erlotinib	×	×	×	×	<b>(III)</b>
BPI-7711, gefitinib	×	×	×	×	<b>(III)</b>
durvalumab, chemotherapy	×	×	×	×	<b>(III)</b>
erlotinib, chemotherapy	×	×	×	×	<b>(III)</b>
erlotinib, erlotinib + chemotherapy	×	×	×	×	<b>(III)</b>
gefitinib + chemotherapy	×	×	×	×	<b>(III)</b>
gefitinib, anlotinib hydrochloride	×	×	×	×	<b>(III)</b>
gefitinib, apatinib	×	×	×	×	<b>(III)</b>
gefitinib, chemotherapy	×	×	×	×	<b>(III)</b>
gefitinib, erlotinib	×	×	×	×	<b>(III)</b>
gefitinib, icotinib hydrochloride, erlotinib	×	×	×	×	<b>(III)</b>
HS-10296, gefitinib	×	×	×	×	(III)

<sup>\*</sup> Most advanced phase (IV, III, II/III, II, I/II, I) is shown and multiple clinical trials may be available.



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## **Relevant Therapy Summary (continued)**

In this cancer type O In other cancer

type

In this cancer type and other cancer types

Contraindicated

A Both for use and contraindicated

X No evidence

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials
lazertinib, gefitinib	×	×	×	×	
maihuatinib, gefitinib	×	×	×	×	<b>(III)</b>
nivolumab, chemotherapy	×	×	×	×	<b>(III)</b>
osimertinib, chemotherapy	×	×	×	×	<b>(III)</b>
pembrolizumab, chemotherapy	×	×	×	×	<b>(III)</b>
SH-1028, gefitinib	×	×	×	×	<b>(III)</b>
AZD-3759, erlotinib, gefitinib	×	×	×	×	<b>(</b>   /   )
D-0316, icotinib hydrochloride	×	×	×	×	<b>(</b>   /   )
afatinib, bevacizumab	×	×	×	×	<b>(II)</b>
afatinib, chemotherapy, radiation therapy	×	×	×	×	<b>(II)</b>
anlotinib hydrochloride	×	×	×	×	<b>(II)</b>
anlotinib hydrochloride, erlotinib, icotinib hydrochloride, gefitinib	×	×	×	×	<b>(II)</b>
anlotinib hydrochloride, gefitinib	×	×	×	×	<b>(II)</b>
anlotinib hydrochloride, icotinib hydrochloride	×	×	×	×	<b>(II)</b>
atezolizumab, chemotherapy	×	×	×	×	<b>(II)</b>
avitinib, AZD-3759	×	×	×	×	<b>(II)</b>
bevacizumab + gefitinib + chemotherapy	×	×	×	×	<b>(II)</b>
bevacizumab, erlotinib, chemotherapy	×	×	×	×	<b>(II)</b>
bevacizumab, osimertinib	×	×	×	×	<b>(II)</b>
bintrafusp alfa, chemoradiation therapy, durvalumab	×	×	×	×	<b>(II)</b>
chemotherapy, atezolizumab, bevacizumab	×	×	×	×	<b>(II)</b>
chemotherapy, durvalumab	×	×	×	×	<b>(II)</b>
crizotinib + chemotherapy	×	×	×	×	<b>(II)</b>
durvalumab, tremelimumab, chemotherapy	×	×	×	×	<b>(II)</b>
EGFR tyrosine kinase inhibitor + chemotherapy	×	×	×	×	<b>(II)</b>

<sup>\*</sup> Most advanced phase (IV, III, II/III, II, I/II, I) is shown and multiple clinical trials may be available.



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## **Relevant Therapy Summary (continued)**

In this cancer type O In other cancer

type

In this cancer type and other cancer types

Contraindicated

A Both for use and contraindicated

X No evidence

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
EGFR tyrosine kinase inhibitor + chemotherapy, EGFR tyrosine kinase inhibitor	×	×	×	×	<b>(II)</b>
EGFR tyrosine kinase inhibitor, apatinib	×	×	×	×	<b>(II)</b>
EGFR tyrosine kinase inhibitor, radiation therapy	×	×	×	×	<b>(II)</b>
erlotinib + chemotherapy	×	×	×	×	<b>(II)</b>
erlotinib, anlotinib hydrochloride	×	×	×	×	<b>(II)</b>
erlotinib, bevacizumab	×	×	×	×	<b>(II)</b>
erlotinib, gefitinib	×	×	×	×	<b>(II)</b>
erlotinib, gefitinib, icotinib hydrochloride, erlotinib + chemotherapy, gefitinib + chemotherapy, icotinib hydrochloride + chemotherapy	×	×	×	×	<b>(II)</b>
erlotinib, radiation therapy	×	×	×	×	<b>(II)</b>
famitinib, HS-10296	×	×	×	×	<b>(II)</b>
gefitinib, hormone therapy	×	×	×	×	<b>(II)</b>
gefitinib, surgical intervention	×	×	×	×	<b>(II)</b>
gefitinib, thalidomide	×	×	×	×	<b>(II)</b>
nazartinib, gefitinib	×	×	×	×	<b>(II)</b>
nivolumab, ipilimumab	×	×	×	×	<b>(II)</b>
osimertinib, afatinib	×	×	×	×	<b>(II)</b>
osimertinib, bevacizumab	×	×	×	×	<b>(II)</b>
osimertinib, gefitinib + osimertinib	×	×	×	×	<b>(II)</b>
osimertinib, radiation therapy	×	×	×	×	<b>(II)</b>
osimertinib, ramucirumab	×	×	×	×	<b>(II)</b>
osimertinib, savolitinib	×	×	×	×	<b>(II)</b>
osimertinib, selumetinib	×	×	×	×	<b>(II)</b>
poziotinib	×	×	×	×	(II)

<sup>\*</sup> Most advanced phase (IV, III, II/II, II, I/II, I) is shown and multiple clinical trials may be available.



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## **Relevant Therapy Summary (continued)**

In this cancer type O In other cancer

type

In this cancer type and other cancer types

Contraindicated

A Both for use and contraindicated

X No evidence

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
ramucirumab, chemotherapy, cytokine	×	×	×	×	<b>(II)</b>
ramucirumab, osimertinib	×	×	×	×	<b>(II)</b>
SH-1028	×	×	×	×	<b>(II)</b>
tyrosine kinase inhibitors, radiation therapy	×	×	×	×	<b>(II)</b>
zoledronic acid, gefitinib	×	×	×	×	<b>(II)</b>
anlotinib hydrochloride, chemotherapy	×	×	×	×	<b>(</b> I/II)
BDTX-189	×	×	×	×	<b>(</b> I/II)
bevacizumab + erlotinib + chemotherapy	×	×	×	×	(I/II)
CBT-502, anlotinib hydrochloride	×	×	×	×	<b>(</b>  /  )
DZD-9008	×	×	×	×	<b>(</b>  /  )
EMB01	×	×	×	×	<b>(</b> 1/11)
gefitinib + osimertinib	×	×	×	×	<b>(</b> I/II)
icotinib hydrochloride + chemotherapy	×	×	×	×	<b>(</b>  /  )
KP-673	×	×	×	×	<b>(</b> I/II)
ningetinib, gefitinib	×	×	×	×	<b>(</b> 1/11)
telaglenastat, osimertinib	×	×	×	×	<b>(</b> 1/11)
U3-1402	×	×	×	×	<b>(</b>  /  )
AB-928, zimberelimab, chemotherapy	×	×	×	×	(I)
afatinib, chemotherapy	×	×	×	×	(I)
afatinib, immunostimulant	×	×	×	×	(I)
afatinib, osimertinib	×	×	×	×	(I)
alisertib, osimertinib	×	×	×	×	(I)
CK-101	×	×	×	×	(I)
dacomitinib, osimertinib	×	×	×	×	<b>(</b> l)
DS-1205c, osimertinib	×	×	×	×	<b>(</b> I)

<sup>\*</sup> Most advanced phase (IV, III, II/III, II, I/II, I) is shown and multiple clinical trials may be available.

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## **Relevant Therapy Summary (continued)**

In this cancer type O In other cancer

type

In this cancer type and other cancer types

Contraindicated

Both for use and contraindicated

X No evidence

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
EGFR tyrosine kinase inhibitor, anlotinib hydrochloride	×	×	×	×	<b>(</b> I)
genolimzumab, fruquintinib	×	×	×	×	<b>(</b> I)
JNJ-61186372, lazertinib	×	×	×	×	<b>(</b> I)
lazertinib, JNJ-61186372	×	×	×	×	<b>(</b> I)
nazartinib + trametinib, nazartinib + ribociclib, LXH254 + nazartinib, capmatinib + nazartinib, gefitinib + nazartinib	×	×	×	×	<b>(</b> 1)
neratinib, palbociclib, everolimus, trametinib	×	×	×	×	<b>(</b> I)
niraparib, osimertinib	×	×	×	×	<b>(</b> 1)
osimertinib, necitumumab	×	×	×	×	<b>(</b> 1)
pirotinib	×	×	×	×	<b>(</b> 1)
ramucirumab, erlotinib, osimertinib	×	×	×	×	<b>(</b> 1)
telisotuzumab vedotin, osimertinib	×	×	×	×	<b>(</b> 1)
TNO-155	×	×	×	×	<b>(</b> 1)
TP-0903	×	×	×	×	<b>(</b> 1)
TQB 3804	×	×	×	×	<b>(</b> 1)
tyrosine kinase inhibitors, tyrosine kinase inhibitors + chemotherapy	×	×	×	×	<b>(</b> I)
WSD-0922	×	×	×	×	<b>(</b> I)

<sup>\*</sup> Most advanced phase (IV, III, II/III, II, I/II, I) is shown and multiple clinical trials may be available.



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## **Relevant Therapy Details**

#### **Current FDA Information**

					- 1

In this cancer type O In other cancer type

In this cancer type and other cancer types

Ontraindicated

Not recommended

Resistance

FDA information is current as of 2020-05-26. For the most up-to-date information, search www.fda.gov.

## EGFR p.(L858R) c.2573T>G

## afatinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2019-10-11 Variant class: EGFR L858R mutation

#### Indications and usage:

GILOTRIF® is a kinase inhibitor indicated for:

 First-line treatment of patients with metastatic non-small cell lung cancer (NSCLC) whose tumors have non-resistant epidermal growth factor receptor (EGFR) mutations as detected by an FDA-approved test.

Limitation of Use: Safety and efficacy of GILOTRIF® were not established in patients whose tumors have resistant EGFR mutations

■ Treatment of patients with metastatic, squamous NSCLC progressing after platinum-based chemotherapy

#### Reference:

https://www.accessdata.fda.gov/drugsatfda\_docs/label/2019/201292s015lbl.pdf

## dacomitinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2018-09-27 Variant class: EGFR L858R mutation

#### Indications and usage:

VIZIMPRO® is a kinase inhibitor indicated for the first-line treatment of patients with metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR) exon 19 deletion or exon 21 L858R substitution mutations as detected by an FDA-approved test.

#### Reference:

https://www.accessdata.fda.gov/drugsatfda\_docs/label/2018/211288s000lbl.pdf



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## EGFR p.(L858R) c.2573T>G (continued)

## erlotinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2016-10-18 Variant class: EGFR L858R mutation

#### Indications and usage:

TARCEVA® is a kinase inhibitor indicated for:

- The treatment of patients with metastatic non-small cell lung cancer (NSCLC) whose tumors have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations as detected by an FDA-approved test receiving first-line, maintenance, or second or greater line treatment after progression following at least one prior chemotherapy regimen.
- First-line treatment of patients with locally advanced, unresectable or metastatic pancreatic cancer, in combination with gemcitabine.

#### Limitations of Use:

- Safety and efficacy of TARCEVA® have not been established in patients with NSCLC whose tumors have other EGFR
  mutations.
- TARCEVA® is not recommended for use in combination with platinum-based chemotherapy.

#### Reference:

https://www.accessdata.fda.gov/drugsatfda\_docs/label/2016/021743s025lbl.pdf

### gefitinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2018-08-22 Variant class: EGFR L858R mutation

### Indications and usage:

IRESSA® is a tyrosine kinase inhibitor indicated for the first-line treatment of patients with metastatic non-small cell lung cancer (NSCLC) whose tumors have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations as detected by an FDA-approved test.

Limitation of Use: Safety and efficacy of IRESSA® have not been established in patients whose tumors have EGFR mutations other than exon 19 deletions or exon 21 (L858R) substitution mutations.

#### Reference:

https://www.accessdata.fda.gov/drugsatfda\_docs/label/2018/206995s003lbl.pdf



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## EGFR p.(L858R) c.2573T>G (continued)

## osimertinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2019-12-19 Variant class: EGFR L858R mutation

#### Indications and usage:

TAGRISSO® is a kinase inhibitor indicated for

- the first-line treatment of patients with metastatic NSCLC whose tumors have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 L858R mutations, as detected by an FDA-approved test.
- the treatment of patients with metastatic EGFR T790M mutation-positive NSCLC, as detected by an FDA-approved test, whose disease has progressed on or after EGFR TKI therapy.

#### Reference:

https://www.accessdata.fda.gov/drugsatfda\_docs/label/2019/208065s013lbl.pdf



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#### **Current NCCN Information**

In this cancer type \(\Omega\) In other cancer type

In this cancer type and other cancer types

Contraindicated

Not recommended Resistance

NCCN information is current as of 2020-05-01. For the most up-to-date information, search www.nccn.org. For NCCN International Adaptations & Translations, search www.nccn.org/global/international\_adaptations.aspx.

## EGFR p.(L858R) c.2573T>G

#### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 1

#### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered prior to first-line systemic therapy (First-line therapy) (Other Recommended)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### dacomitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 1

#### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered prior to first-line systemic therapy (First-line therapy) (Other Recommended)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

## erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 1

#### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered prior to first-line systemic therapy (First-line therapy) (Other Recommended)



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## EGFR p.(L858R) c.2573T>G (continued)

## gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 1

### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
 Sensitizing EGFR mutation discovered prior to first-line systemic therapy (First-line therapy) (Other Recommended)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### osimertinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 1

#### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
 EGFR sensitizing mutation discovered prior to first-line systemic therapy (First-line therapy) (Preferred)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered during first-line systemic therapy; Interrupt or complete planned systemic therapy, including maintenance therapy (First-line therapy)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Progression on erlotinib +/- (ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### afatinib + cetuximab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

### Population segment (Line of therapy):

 Non-Small Cell Lung Cancer; Progression on erlotinib, afatinib, dacomitinib, gefitinib, chemotherapy, or osimertinib; Systemic multiple lesions (Subsequent therapy)



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## EGFR p.(L858R) c.2573T>G (continued)

### bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

### Population segment (Line of therapy):

Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Progression on erlotinib +/- (ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

### dacomitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Sensitizing EGFR mutation discovered during first-line systemic therapy; Interrupt or complete planned systemic therapy,
   including maintenance therapy (First-line therapy)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Progression on erlotinib +/- (ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Sensitizing EGFR mutation discovered during first-line systemic therapy; Interrupt or complete planned systemic therapy, including maintenance therapy (First-line therapy)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Progression on erlotinib +/- (ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or isolated lesions (Subsequent therapy)



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## EGFR p.(L858R) c.2573T>G (continued)

#### erlotinib + ramucirumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Sensitizing EGFR mutation discovered prior to or during first-line systemic therapy (First-line therapy) (Other Recommended)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Progression on erlotinib +/(ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or
  isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

### gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Sensitizing EGFR mutation discovered during first-line systemic therapy; Interrupt or complete planned systemic therapy,
   including maintenance therapy (First-line therapy)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease;
   Progression on erlotinib +/- (ramucirumab or bevacizumab), afatinib, gefitinib, or dacomitinib; Asymptomatic or symptomatic with brain metastases or isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### osimertinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

Non-Small Cell Lung Cancer; Leptomeningeal and spine metastases (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 2.2020]



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## EGFR p.(L858R) c.2573T>G (continued)

### osimertinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered during first-line systemic therapy; Interrupt or complete planned systemic therapy, including maintenance therapy (First-line therapy) (Preferred)
- Progression on osimertinib; Advanced or metastatic disease; Asymptomatic or symptomatic with brain or isolated lesions (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2B

#### Population segment (Line of therapy):

 Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Advanced or metastatic disease; Sensitizing EGFR mutation discovered prior to or during first-line systemic therapy (First-line therapy) (Useful in Certain Circumstances)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

NCCN Recommendation category: 2B

### Population segment (Line of therapy):

Non-Small Cell Lung Cancer; Leptomeningeal and spine metastases; Pulsatile erlotinib (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 2.2020]

#### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

NCCN Recommendation category: 2A

#### Population segment (Line of therapy):

Non-Small Cell Lung Cancer; Brain metastases; Use agents active against primary tumor; Pulsatile erlotinib (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 2.2020]



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## EGFR p.(L858R) c.2573T>G (continued)

### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

Non-Small Cell Lung Cancer; Brain metastases; Use agents active against primary tumor (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 2.2020]

### gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

Non-Small Cell Lung Cancer; Brain metastases; Use agents active against primary tumor (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 2.2020]

### alectinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

Summary:

NCCN Guidelines® include the following supporting statement(s):

■ "Thus, crizotinib, ceritinib, alectinib, brigatinib, or lorlatinib are not recommended as subsequent therapy for patients with sensitizing EGFR mutations who relapse on EGFR TKI therapy."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

## brigatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

Summary:

NCCN Guidelines® include the following supporting statement(s):

■ "Thus, crizotinib, ceritinib, alectinib, brigatinib, or lorlatinib are not recommended as subsequent therapy for patients with sensitizing EGFR mutations who relapse on EGFR TKI therapy."



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## EGFR p.(L858R) c.2573T>G (continued)

## ceritinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"Thus, crizotinib, ceritinib, alectinib, brigatinib, or lorlatinib are not recommended as subsequent therapy for patients with sensitizing EGFR mutations who relapse on EGFR TKI therapy."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

### crizotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"Thus, crizotinib, ceritinib, alectinib, brigatinib, or lorlatinib are not recommended as subsequent therapy for patients with sensitizing EGFR mutations who relapse on EGFR TKI therapy."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### lorlatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"Thus, crizotinib, ceritinib, alectinib, brigatinib, or lorlatinib are not recommended as subsequent therapy for patients with sensitizing EGFR mutations who relapse on EGFR TKI therapy."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### atezolizumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"Therefore, subsequent therapy with pembrolizumab, nivolumab, or atezolizumab is not recommended in patients with EGFR mutations or ALK fusions."



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## EGFR p.(L858R) c.2573T>G (continued)

## nivolumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

" Therefore, subsequent therapy with pembrolizumab, nivolumab, or atezolizumab is not recommended in patients with EGFR mutations or ALK fusions."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

## pembrolizumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR mutation

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"Therefore, subsequent therapy with pembrolizumab, nivolumab, or atezolizumab is not recommended in patients with EGFR mutations or ALK fusions."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 4.2020]

#### pembrolizumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR mutation

Other criteria: CD274 overexpression

#### Summary:

NCCN Guidelines® include the following supporting statement(s):

"A small study suggests that single-agent pembrolizumab is not effective as first-line therapy in patients with metastatic NSCLC and EGFR mutations, even those with PD-L1 levels more than 50%."



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#### **Current EMA Information**

In this cancer type	O In other cancer type	0		6	Contraindicated	Not recommended	U	Resistance
			other cancer types					

EMA information is current as of 2020-05-26. For the most up-to-date information, search www.ema.europa.eu/ema.

## EGFR p.(L858R) c.2573T>G

#### afatinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2020-02-13 Variant class: EGFR L858R mutation

Reference

https://www.ema.europa.eu/en/documents/product-information/giotrif-epar-product-information\_en.pdf

#### bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2020-03-11 Variant class: EGFR L858R mutation

Reference:

https://www.ema.europa.eu/en/documents/product-information/avastin-epar-product-information\_en.pdf

### dacomitinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2019-06-05 Variant class: EGFR L858R mutation

Reference:

https://www.ema.europa.eu/en/documents/product-information/vizimpro-epar-product-information\_en.pdf

#### erlotinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2019-04-24 Variant class: EGFR L858R mutation

Reference:

 $https://www.ema.europa.eu/documents/product-information/tarceva-epar-product-information\_en.pdf\\$ 

#### erlotinib + ramucirumab

Cancer type: Non-Small Cell Lung Cancer Label as of: 2020-02-25 Variant class: EGFR L858R mutation

Reference:

 $https://www.ema.europa.eu/en/documents/product-information/cyramza-epar-product-information\_en.pdf$ 



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## EGFR p.(L858R) c.2573T>G (continued)

gefitinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2019-05-28 Variant class: EGFR L858R mutation

Reference:

https://www.ema.europa.eu/en/documents/product-information/iressa-epar-product-information\_en.pdf

osimertinib

Cancer type: Non-Small Cell Lung Cancer Label as of: 2020-02-25 Variant class: EGFR L858R mutation

Reference:

https://www.ema.europa.eu/en/documents/product-information/tagrisso-epar-product-information\_en.pdf



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#### **Current ESMO Information**

In this cancer type O In other cancer type

In this cancer type and other cancer types

Contraindicated

Not recommended Resistance

ESMO information is current as of 2020-05-01. For the most up-to-date information, search www.esmo.org.

## EGFR p.(L858R) c.2573T>G

### atezolizumab + bevacizumab + carboplatin + paclitaxel

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR L858R mutation

ESMO Level of Evidence/Grade of Recommendation: III / A

#### Population segment (Line of therapy):

- Metastatic Non-Squamous; Magnitude of Clinical Benefit Scale Score version 1.1 score: 3 (First-line therapy)
- Metastatic; PS 0-1; Without contraindications to immunotherapy after targeted therapies have been exploited (Second-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

#### Population segment (Line of therapy):

Advanced stage (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

#### Population segment (Line of therapy):

Advanced stage (First-line therapy)



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## EGFR p.(L858R) c.2573T>G (continued)

## gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

Population segment (Line of therapy):

Advanced stage (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### osimertinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

Population segment (Line of therapy):

Advanced stage; ESMO-Magnitude of Clinical Benefit Scale Version 1.1 Score: 4 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### dacomitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: I / B

Population segment (Line of therapy):

Stage IV; Magnitude of Clinical Benefit Scale Version v1.1 Score: 3 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFRi sensitizing mutation

ESMO Level of Evidence/Grade of Recommendation: III / B

Population segment (Line of therapy):

Non-Squamous (Maintenance therapy)



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## EGFR p.(L858R) c.2573T>G (continued)

### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

Population segment (Line of therapy):

Stage IV; PS 0-2 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

Population segment (Line of therapy):

Stage IV; PS 0-2 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: I / A

Population segment (Line of therapy):

Stage IV; PS 0-2 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

## gefitinib + carboplatin + pemetrexed

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: I / B

Population segment (Line of therapy):

Advanced stage (First-line therapy)



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## EGFR p.(L858R) c.2573T>G (continued)

### bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: II / B

Population segment (Line of therapy):

Stage IV; ESMO-Magnitude of Clinical Benefit Scale Version 1.1 Score: 3 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

### bevacizumab + gefitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: II / B

Population segment (Line of therapy):

Stage IV; ESMO-Magnitude of Clinical Benefit Scale Version 1.1 Score: 3 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### erlotinib + ramucirumab

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: II / B

Population segment (Line of therapy):

■ Stage IV (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### afatinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: III / A

Population segment (Line of therapy):

Stage IV; PS 3-4 (First-line therapy)



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# EGFR p.(L858R) c.2573T>G (continued)

## dacomitinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: III / A

Population segment (Line of therapy):

■ Stage IV; PS 3-4 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

#### erlotinib

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: III / A

Population segment (Line of therapy):

Stage IV; PS 3-4 (First-line therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Non-Small-Cell Lung Cancer [Ann Oncol (2018) 29 (suppl 4): iv192-iv237; https://www.esmo.org/Guidelines/Lung-and-Chest-Tumours/Metastatic-Non-Small-Cell-Lung-Cancer]

### gefitinib

Pathologist:

Cancer type: Non-Small Cell Lung Cancer Variant class: EGFR activating mutation

ESMO Level of Evidence/Grade of Recommendation: III / A

Population segment (Line of therapy):

Stage IV; PS 3-4 (First-line therapy)

Signatures		
Testing Personnel:		
Laboratory Supervisor:		

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