



Sample Information

Patient Name:**Gender:** Male**ID No.:** F103691438**History No.:** 28948110**Age:** 87**Ordering Doctor:** DOC3109L**Ordering REQ.:** C212L7P**Signing in Date:** 2020/06/17**Path No.:** S109-99594**MP No.:** F20034**Assay:** Oncomine Focus Assay**Sample Type:** FFPE**Block No.:** S109-16245A**Percentage of tumor cells:** 70%**Note:**

Sample Cancer Type: Non-Small Cell Lung Cancer

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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 exon 19 deletion, EGFR amplification	NTRK3	Not detected
ERBB2	Not detected	RET	Not detected
KRAS	Not detected	ROS1	Not detected
MET	Not detected		



Relevant Biomarkers

■ Indicated ■ Contraindicated

Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
EGFR exon 19 deletion epidermal growth factor receptor Tier: IA Allele Frequency: 54.92%	afatinib ^{1,2} dacomitinib ^{1,2} erlotinib ^{1,2} gefitinib ^{1,2} osimertinib ^{1,2} bevacizumab* + erlotinib ² erlotinib + ramucirumab ² afatinib + cetuximab atezolizumab + bevacizumab + chemotherapy gefitinib + chemotherapy bevacizumab + gefitinib	None	188
EGFR amplification epidermal growth factor receptor Tier: IIC	None	None	7
CDK6 amplification cyclin dependent kinase 6 Tier: IIC	None	None	4

 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.

* Includes biosimilars

Variant Details

DNA Sequence Variants

Gene	Amino Acid Change	Coding	Variant ID	Locus	Allele Frequency	Transcript	Variant Effect	Coverage
EGFR	p.(E746_A750del)	c.2235_2249delGGA ATTAAGAGAAGC	COSM6223	chr7:55242464	54.92%	NM_005228.4	nonframeshift Deletion	1963
ALK	p.(D1529E)	c.4587C>G	.	chr2:29416366	49.07%	NM_004304.4	missense	1999
ALK	p.(I1461V)	c.4381A>G	.	chr2:29416572	99.85%	NM_004304.4	missense	2000
ALK	p.(R1436C)	c.4306C>T	.	chr2:29416647	52.66%	NM_004304.4	missense	1994
ALK	p.(=)	c.3375C>A	.	chr2:29445458	45.28%	NM_004304.4	synonymous	1992
FGFR3	p.(=)	c.1953G>A	.	chr4:1807894	99.69%	NM_000142.4	synonymous	652
PDGFRA	p.(=)	c.1701A>G	.	chr4:55141055	99.95%	NM_006206.5	synonymous	1996
FGFR4	p.(P136L)	c.407C>T	.	chr5:176517797	99.30%	NM_213647.2	missense	1714
FGFR4	p.(=)	c.483A>G	.	chr5:176517985	26.44%	NM_213647.2	synonymous	885
EGFR	p.(=)	c.2361G>A	.	chr7:55249063	60.05%	NM_005228.4	synonymous	2000



Variant Details (continued)

DNA Sequence Variants (continued)

Gene	Amino Acid Change	Coding	Variant ID	Locus	Allele Frequency	Transcript	Variant Effect	Coverage
RET	p.(=)	c.2307G>T	.	chr10:43613843	100.00%	NM_020975.4	synonymous	1414

Copy Number Variations

Gene	Locus	Copy Number
EGFR	chr7:55198956	5.26
CDK6	chr7:92245595	6.03

Biomarker Descriptions

CDK6 (cyclin dependent kinase 6)

Background: The CDK6 gene encodes the cyclin dependent kinase 6 protein, a homologue of CDK4. Both proteins are serine/threonine protein kinases and involved in the regulation of the G1/S phase transition of the mitotic cell cycle^{1,2}. Following complex formation of CDK6 with D-type cyclins (e.g., CCND1, CCND2 or CCND3), CDK6 kinase activation leads to the phosphorylation of retinoblastoma protein (RB) followed by E2F activation, DNA replication, and cell cycle progression³.

Alterations and prevalence: Recurrent somatic mutations of CDK6 have not been characterized. CDK6 is recurrently amplified in esophageal carcinoma (10-15%), stomach adenocarcinoma (5-10%), lung squamous cell carcinoma (5%), and head and neck squamous cell carcinoma (4%)^{4,5,6,7}.

Potential relevance: Currently, no therapies are approved for CDK6 aberrations. Small molecule inhibitors targeting CDK4/6 including palbociclib (2015), abemaciclib (2017), and ribociclib (2017) are FDA approved in combination with an aromatase inhibitor or fulvestrant for the treatment of hormone receptor positive, HER2-negative advanced or metastatic breast cancer.

EGFR (epidermal growth factor receptor)

Background: 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 family⁸. 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^{9,10}.

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^{4,7,11,12}. 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 21¹³. 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 mutations that are less common include E709K, G719X, S768I, L861Q, and short in-frame insertions in exon 20^{14,15,16,17}. EGFR activating mutations in lung cancer tend to be mutually exclusive to KRAS activating mutations¹⁸. 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 G598V^{13,19}. 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^{4,6,7,12,19}. 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 TKIs^{20,21,22}.



Biomarker Descriptions (continued)

Potential relevance: Erlotinib²³ (2004), afatinib²⁴ (2013), gefitinib²⁵ (2015), osimertinib²⁶ (2015), and dacomitinib²⁷ (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 cases¹³. 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 cetuximab²⁸ (2004), panitumumab²⁹ (2006), and necitumumab³⁰ (2016) are also under investigation in combination with EGFR-targeting TKIs for efficacy against 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 chemotherapy³¹.

Relevant Therapy Summary

● In this cancer type ○ In other cancer type ● In this cancer type and other cancer types ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
afatinib	●	●	●	●	● (IV)
gefitinib	●	●	●	●	● (IV)
erlotinib	●	●	●	●	● (III)
osimertinib	●	●	●	●	● (III)
dacomitinib	●	●	●	●	● (I)
bevacizumab + erlotinib	✕	●	●	●	● (II)
erlotinib + ramucirumab	✕	●	●	●	✕
afatinib + cetuximab	✕	●	✕	✕	✕
bevacizumab (Allergan) + erlotinib	✕	✕	●	✕	✕
atezolizumab + bevacizumab + carboplatin + paclitaxel	✕	✕	✕	●	✕
bevacizumab + gefitinib	✕	✕	✕	●	✕
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)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ⓘ In this cancer type and other cancer types ⚡ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
erlotinib, gefitinib, icotinib hydrochloride, chemotherapy	✕	✕	✕	✕	● (IV)
gefitinib, radiation therapy	✕	✕	✕	✕	● (IV)
icotinib hydrochloride	✕	✕	✕	✕	● (IV)
icotinib hydrochloride, icotinib hydrochloride + chemotherapy	✕	✕	✕	✕	● (IV)
icotinib hydrochloride, radiation therapy	✕	✕	✕	✕	● (IV)
ASK120067, gefitinib	✕	✕	✕	✕	● (III)
bevacizumab (Shanghai Hengrui Pharmaceutical) + chemotherapy, bevacizumab + chemotherapy	✕	✕	✕	✕	● (III)
bevacizumab, atezolizumab, chemotherapy	✕	✕	✕	✕	● (III)
bevacizumab, erlotinib	✕	✕	✕	✕	● (III)
BPI-7711, gefitinib	✕	✕	✕	✕	● (III)
durvalumab, chemotherapy	✕	✕	✕	✕	● (III)
erlotinib, chemotherapy	✕	✕	✕	✕	● (III)
erlotinib, erlotinib + chemotherapy	✕	✕	✕	✕	● (III)
gefitinib + chemotherapy	✕	✕	✕	✕	● (III)
gefitinib, anlotinib hydrochloride	✕	✕	✕	✕	● (III)
gefitinib, apatinib	✕	✕	✕	✕	● (III)
gefitinib, chemotherapy	✕	✕	✕	✕	● (III)
gefitinib, erlotinib	✕	✕	✕	✕	● (III)
gefitinib, erlotinib, gefitinib + radiation therapy, erlotinib + radiation therapy	✕	✕	✕	✕	● (III)
gefitinib, icotinib hydrochloride, erlotinib, gefitinib + radiation therapy, icotinib hydrochloride + radiation therapy, erlotinib + radiation therapy	✕	✕	✕	✕	● (III)
HS-10296, gefitinib	✕	✕	✕	✕	● (III)
icotinib hydrochloride, chemotherapy	✕	✕	✕	✕	● (III)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ⓘ In this cancer type and other cancer types ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
icotinib hydrochloride, icotinib hydrochloride + radiation therapy	✕	✕	✕	✕	● (III)
nivolumab, chemotherapy	✕	✕	✕	✕	● (III)
osimertinib, chemotherapy	✕	✕	✕	✕	● (III)
pembrolizumab, chemotherapy	✕	✕	✕	✕	● (III)
AZD-3759, erlotinib, gefitinib	✕	✕	✕	✕	● (II/III)
afatinib + DFP-14323, erlotinib + DFP-14323, osimertinib + DFP-14323	✕	✕	✕	✕	● (II)
afatinib, bevacizumab	✕	✕	✕	✕	● (II)
afatinib, chemotherapy, radiation therapy	✕	✕	✕	✕	● (II)
anlotinib hydrochloride + icotinib hydrochloride	✕	✕	✕	✕	● (II)
anlotinib hydrochloride, erlotinib, icotinib hydrochloride, gefitinib	✕	✕	✕	✕	● (II)
atezolizumab, chemotherapy	✕	✕	✕	✕	● (II)
bevacizumab + gefitinib + chemotherapy	✕	✕	✕	✕	● (II)
bevacizumab, erlotinib, chemotherapy	✕	✕	✕	✕	● (II)
bevacizumab, osimertinib	✕	✕	✕	✕	● (II)
bintrafusp alfa, chemoradiation therapy, durvalumab	✕	✕	✕	✕	● (II)
chemotherapy, atezolizumab, bevacizumab	✕	✕	✕	✕	● (II)
chemotherapy, ramucirumab	✕	✕	✕	✕	● (II)
crizotinib + chemotherapy	✕	✕	✕	✕	● (II)
durvalumab, tremelimumab, chemotherapy	✕	✕	✕	✕	● (II)
EGFR tyrosine kinase inhibitor + chemotherapy	✕	✕	✕	✕	● (II)
EGFR tyrosine kinase inhibitor + chemotherapy, EGFR tyrosine kinase inhibitor	✕	✕	✕	✕	● (II)
EGFR tyrosine kinase inhibitor, radiation therapy	✕	✕	✕	✕	● (II)
erlotinib + chemotherapy	✕	✕	✕	✕	● (II)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ● In this cancer type and other cancer types ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
erlotinib + surgical intervention	✕	✕	✕	✕	● (II)
erlotinib, bevacizumab + erlotinib	✕	✕	✕	✕	● (II)
erlotinib, gefitinib	✕	✕	✕	✕	● (II)
erlotinib, gefitinib, icotinib hydrochloride, erlotinib + chemotherapy, gefitinib + chemotherapy, icotinib hydrochloride + chemotherapy	✕	✕	✕	✕	● (II)
erlotinib, radiation therapy	✕	✕	✕	✕	● (II)
famitinib, HS-10296	✕	✕	✕	✕	● (II)
gefitinib + fulvestrant	✕	✕	✕	✕	● (II)
gefitinib + nazartinib	✕	✕	✕	✕	● (II)
gefitinib, surgical intervention	✕	✕	✕	✕	● (II)
gefitinib, thalidomide	✕	✕	✕	✕	● (II)
icotinib hydrochloride + radiation therapy	✕	✕	✕	✕	● (II)
icotinib hydrochloride + radiation therapy, icotinib hydrochloride	✕	✕	✕	✕	● (II)
nivolumab, ipilimumab	✕	✕	✕	✕	● (II)
osimertinib + radiation therapy	✕	✕	✕	✕	● (II)
osimertinib + selumetinib	✕	✕	✕	✕	● (II)
osimertinib, afatinib	✕	✕	✕	✕	● (II)
osimertinib, bevacizumab	✕	✕	✕	✕	● (II)
osimertinib, gefitinib + osimertinib	✕	✕	✕	✕	● (II)
osimertinib, necitumumab	✕	✕	✕	✕	● (II)
osimertinib, radiation therapy	✕	✕	✕	✕	● (II)
osimertinib, ramucirumab	✕	✕	✕	✕	● (II)
osimertinib, savolitinib	✕	✕	✕	✕	● (II)
pembrolizumab + chemotherapy	✕	✕	✕	✕	● (II)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ⓘ In this cancer type and other cancer types ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
poziotinib	✕	✕	✕	✕	● (II)
ramucirumab, osimertinib	✕	✕	✕	✕	● (II)
tyrosine kinase inhibitors, radiation therapy	✕	✕	✕	✕	● (II)
zoledronic acid, gefitinib	✕	✕	✕	✕	● (II)
AZD-3759	✕	✕	✕	✕	● (I/II)
bevacizumab + erlotinib + chemotherapy	✕	✕	✕	✕	● (I/II)
CBT-502, anlotinib hydrochloride	✕	✕	✕	✕	● (I/II)
DZD-9008	✕	✕	✕	✕	● (I/II)
EMB01	✕	✕	✕	✕	● (I/II)
erlotinib + trametinib	✕	✕	✕	✕	● (I/II)
gefitinib + osimertinib	✕	✕	✕	✕	● (I/II)
icotinib hydrochloride + chemotherapy + radiation therapy	✕	✕	✕	✕	● (I/II)
KP-673	✕	✕	✕	✕	● (I/II)
lazertinib	✕	✕	✕	✕	● (I/II)
ningetinib, gefitinib	✕	✕	✕	✕	● (I/II)
oleclumab + osimertinib	✕	✕	✕	✕	● (I/II)
S-49076, gefitinib	✕	✕	✕	✕	● (I/II)
telaglenastat, osimertinib	✕	✕	✕	✕	● (I/II)
U3-1402	✕	✕	✕	✕	● (I/II)
afatinib, chemotherapy	✕	✕	✕	✕	● (I)
afatinib, immunostimulant	✕	✕	✕	✕	● (I)
afatinib, osimertinib	✕	✕	✕	✕	● (I)
alisertib, osimertinib	✕	✕	✕	✕	● (I)
anlotinib hydrochloride + erlotinib	✕	✕	✕	✕	● (I)
CK-101	✕	✕	✕	✕	● (I)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ● In this cancer type and other cancer types
 ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR exon 19 deletion (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
dacomitinib, osimertinib	✕	✕	✕	✕	● (I)
DS-1205c, gefitinib	✕	✕	✕	✕	● (I)
DS-1205c, osimertinib	✕	✕	✕	✕	● (I)
EGFR tyrosine kinase inhibitor, anlotinib hydrochloride	✕	✕	✕	✕	● (I)
everolimus + neratinib, neratinib + palbociclib, neratinib + trametinib	✕	✕	✕	✕	● (I)
genolimzumab, fruquintinib	✕	✕	✕	✕	● (I)
JNJ-61186372, lazertinib	✕	✕	✕	✕	● (I)
lazertinib, JNJ-61186372	✕	✕	✕	✕	● (I)
nazartinib + trametinib, nazartinib + ribociclib, LXH254 + nazartinib, capmatinib + nazartinib, gefitinib + nazartinib	✕	✕	✕	✕	● (I)
niraparib, osimertinib	✕	✕	✕	✕	● (I)
nivolumab, ipilimumab, radiation therapy	✕	✕	✕	✕	● (I)
osimertinib + radiation therapy, osimertinib	✕	✕	✕	✕	● (I)
osimertinib, sapanisertib	✕	✕	✕	✕	● (I)
pirotinib	✕	✕	✕	✕	● (I)
SH-1028	✕	✕	✕	✕	● (I)
telisotuzumab vedotin, osimertinib	✕	✕	✕	✕	● (I)
TNO-155	✕	✕	✕	✕	● (I)
TP-0903	✕	✕	✕	✕	● (I)
tyrosine kinase inhibitors, tyrosine kinase inhibitors + chemotherapy	✕	✕	✕	✕	● (I)

EGFR amplification

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
apatinib + gefitinib	✕	✕	✕	✕	● (IV)

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



Relevant Therapy Summary (continued)

● In this cancer type ○ In other cancer type ● In this cancer type and other cancer types ⛔ Contraindicated ⚠ Both for use and contraindicated ✕ No evidence

EGFR amplification (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
erlotinib	✕	✕	✕	✕	● (II)
gefitinib	✕	✕	✕	✕	● (II)
osimertinib, necitumumab	✕	✕	✕	✕	● (II)
everolimus + neratinib, neratinib + palbociclib, neratinib + trametinib	✕	✕	✕	✕	● (I)
TP-0903	✕	✕	✕	✕	● (I)

CDK6 amplification

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
abemaciclib	✕	✕	✕	✕	● (II)
palbociclib	✕	✕	✕	✕	● (II)
palbociclib, abemaciclib	✕	✕	✕	✕	● (II)

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



Relevant Therapy Details

Current FDA Information

☒ In this cancer type
 ☐ In other cancer type
 ☐ In this cancer type and other cancer types
 ☐ Contraindicated
 ☐ Not recommended
 ☐ Resistance

FDA information is current as of 2020-02-28. For the most up-to-date information, search www.fda.gov.

EGFR exon 19 deletion

● afatinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2019-10-11

Variant class: EGFR exon 19 deletion

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 exon 19 deletion

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



EGFR exon 19 deletion (continued)

● erlotinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2016-10-18

Variant class: EGFR exon 19 deletion

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 exon 19 deletion

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



EGFR exon 19 deletion (continued)

● osimertinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2019-12-19

Variant class: EGFR exon 19 deletion

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



Current NCCN Information

☒ In this cancer type
 ☐ In other cancer type
 ☒ In this cancer type and other cancer types
 ☒ Contraindicated
 ☒ Not recommended
 ☒ Resistance

NCCN information is current as of 2019-11-01. 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 exon 19 deletion

● afatinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; 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 2.2020]

● dacomitinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; 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 2.2020]

● erlotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; 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 2.2020]



EGFR exon 19 deletion (continued)

● gefitinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; 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 2.2020]

● osimertinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 1

Population segment (Line of therapy):

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● afatinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 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; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- Non-Squamous Non-Small Cell Lung Cancer; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]



EGFR exon 19 deletion (continued)

● dacomitinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 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; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● erlotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 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; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● erlotinib + ramucirumab

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 first-line systemic therapy (First-line therapy) (Other Recommended)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Sensitizing EGFR mutation discovered during first-line systemic therapy (First-line therapy)
- Adenocarcinoma, Large Cell, Non-Small Cell Lung Cancer (NOS), Squamous Cell Carcinoma; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]



EGFR exon 19 deletion (continued)

● gefitinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 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; Progression after first-line therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● osimertinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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 during first-line systemic therapy; Interrupt or complete planned systemic therapy, including maintenance therapy (First-line therapy) (Preferred)
- Progression on osimertinib (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

● bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 2B

Population segment (Line of therapy):

- Non-Squamous Non-Small Cell Lung Cancer; Sensitizing EGFR mutation discovered prior to first-line systemic therapy (First-line therapy) (Useful in Certain Circumstances)
- Non-Squamous Non-Small Cell Lung Cancer; Sensitizing EGFR mutation discovered during first-line systemic therapy (First-line therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]



EGFR exon 19 deletion (continued)

● erlotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

NCCN Recommendation category: 2B

Population segment (Line of therapy):

- Non-Small Cell Lung Cancer; Leptomeningeal and Spine metastases; Weekly pulse erlotinib (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 3.2019]

● afatinib

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; Recurrent disease; Use agents active against primary tumor (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 3.2019]

● afatinib + cetuximab

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Other criteria: EGFR T790M negative

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- Non-Small Cell Lung Cancer; Progression after receiving erlotinib, afatinib, dacomitinib, or gefitinib and systemic therapy (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [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; Recurrent disease; Use agents active against primary tumor (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 3.2019]



EGFR exon 19 deletion (continued)

● gefitinib

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; Recurrent disease; Use agents active against primary tumor (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 3.2019]

● osimertinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- Non-Small Cell Lung Cancer; Brain metastases; Newly diagnosed (Not specified)
- Non-Small Cell Lung Cancer; Leptomeningeal and Spine metastases (Not specified)

Reference: NCCN Guidelines® - NCCN-Central Nervous System Cancers [Version 3.2019]

🗨 alectinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Summary:

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

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

🗨 brigatinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Summary:

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

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]



EGFR exon 19 deletion (continued)

ceritinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Summary:

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

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

crizotinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Summary:

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

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

lorlatinib

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFRi sensitizing mutation

Summary:

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

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

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]

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%."

Reference: NCCN Guidelines® - NCCN-Non-Small Cell Lung Cancer [Version 2.2020]



Current EMA Information

- ☒ In this cancer type
 ☐ In other cancer type
 ☒ In this cancer type and other cancer types
 ☒ Contraindicated
 ☒ Not recommended
 ☒ Resistance

EMA information is current as of 2020-02-28. For the most up-to-date information, search www.ema.europa.eu/ema.

EGFR exon 19 deletion

● afatinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2020-02-13

Variant class: EGFR exon 19 deletion

Reference:

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

● bevacizumab (Allergan) + erlotinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2019-11-12

Variant class: EGFR exon 19 deletion

Reference:

https://www.ema.europa.eu/en/documents/product-information/mvasi-epar-product-information_en.pdf

● bevacizumab + erlotinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2020-02-20

Variant class: EGFR exon 19 deletion

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 exon 19 deletion

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 exon 19 deletion

Reference:

https://www.ema.europa.eu/documents/product-information/tarceva-epar-product-information_en.pdf



EGFR exon 19 deletion (continued)

● erlotinib + ramucirumab

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2020-02-25

Variant class: EGFR exon 19 deletion

Reference:

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

● gefitinib

Cancer type: Non-Small Cell Lung Cancer

Label as of: 2019-05-28

Variant class: EGFR exon 19 deletion

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 exon 19 deletion

Reference:

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



Current ESMO Information

- ☒ In this cancer type
 ☐ In other cancer type
 ☒ In this cancer type and other cancer types
 ☒ Contraindicated
 ☒ Not recommended
 ☒ Resistance

ESMO information is current as of 2019-11-01. For the most up-to-date information, search www.esmo.org.

EGFR exon 19 deletion

● atezolizumab + bevacizumab + carboplatin + paclitaxel

Cancer type: Non-Small Cell Lung Cancer

Variant class: EGFR exon 19 deletion

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)

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>]



EGFR exon 19 deletion (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)

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>]



EGFR exon 19 deletion (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)

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>]



EGFR exon 19 deletion (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)

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>]



EGFR exon 19 deletion (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

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>]

Signatures

Testing Personnel:

Laboratory Supervisor:

Pathologist:



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