Taipei Veterans General Hospital

Department of Pathology and Laboratory Medicine
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Sample Information

Patient Name: 張冰心
Gender: Female
ID No.: S220213592
History No.: 24227007
Age: 49

Ordering Doctor: DOC3569B 陳綺珊
Ordering REQ.: 0BWESTP
Signing in Date: 2022/06/10

Path No.: S111-99522
MP No.: BR22035
Assay: Oncomine BRCA1/2 Assay
Sample Type: FFPE
Block No.: S111-66950N
Percentage of tumor cells: 80%

Reporting Doctor: DOC5424G 彭昱璟 (Phone: 8#5424)

Note:

Sample Cancer Type: Ovarian Cancer

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Relevant Ovarian Cancer Variants

Gene	Finding
BRCA1	***BRCA1 p.(K654Nfs*47) c.1962delG***
BRCA2	None detected

Relevant Biomarkers

Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
*BRCA1 p.(K654Nfs*47) c.1962delG* BRCA1 DNA repair associated Allele Frequency: 74.97%	**bevacizumab + olaparib** [1, 2] **niraparib** [1] **olaparib** [1, 2] **rucaparib** [1, 2]	**bevacizumab + olaparib** [1, 2] **olaparib** [1, 2] **rucaparib** [1] talazoparib	0

Public data sources included in relevant therapies: FDA[1], NCCN, **EMA**[2], ESMO

Variant Details

DNA Sequence Variants

Gene	Amino Acid Change	Coding	Locus	Allele Frequency	Transcript	Variant Effect	ClinVar[1]	Coverage
BRCA1	p.(K654Nfs*47)	c.1962delG	chr17:41245585	74.97%	NM_007294.4	frameshift Deletion		923
BRCA2	p.(S455=)	c.1365A>G	chr13:32906980	43.90%	NM_000059.3	synonymous	Benign	2000
BRCA2	p.(H743=)	c.2229T>C	chr13:32910721	50.55%	NM_000059.3	synonymous	Benign	2000
BRCA2	p.(N991D)	c.2971A>G	chr13:32911463	48.20%	NM_000059.3	missense	Benign	2000
BRCA2	p.(K1132=)	c.3396A>G	chr13:32911888	55.15%	NM_000059.3	synonymous	Benign	2000
BRCA2	p.(L1521=)	c.4563A>G	chr13:32913055	99.87%	NM_000059.3	synonymous	Benign	1492
BRCA2	p.(R2108C)	c.6322C>T	chr13:32914814	49.05%	NM_000059.3	missense	Benign	1996
BRCA2	p.(V2171=)	c.6513G>C	chr13:32915005	100.00%	NM_000059.3	synonymous	Benign	2000
BRCA2	p.(S2414=)	c.7242A>G	chr13:32929232	46.58%	NM_000059.3	synonymous	Benign	964
BRCA2	p.(V2466A)	c.7397T>C	chr13:32929387	99.75%	NM_000059.3	missense	Benign	1999
BRCA2	p.(T3349A)	c.10045A>G	chr13:32972695	2.10%	NM_000059.3	missense	Benign	2000
BRCA1	p.(S1613G)	c.4837A>G	chr17:41223094	22.97%	NM_007294.4	missense	Benign	1994
BRCA1	p.(S1436=)	c.4308T>C	chr17:41234470	22.56%	NM_007294.4	synonymous	Benign	1999
BRCA1	p.(K1183R)	c.3548A>G	chr17:41244000	24.56%	NM_007294.4	missense	Benign	1999
BRCA1	p.(E1038G)	c.3113A>G	chr17:41244435	22.96%	NM_007294.4	missense	Benign	1999
BRCA1	p.(P871L)	c.2612C>T	chr17:41244936	21.16%	NM_007294.4	missense	Benign	1999
BRCA1	p.(L771=)	c.2311T>C	chr17:41245237	20.46%	NM_007294.4	synonymous	Benign	1852
BRCA1	p.(S694=)	c.2082C>T	chr17:41245466	24.05%	NM_007294.4	synonymous	Benign	2000

[1] Based on Clinvar version 20200329

Biomarker Descriptions

BRCA1 (BRCA1 DNA repair associated)

Background: The breast cancer early onset gene 1 (BRCA1) encodes one of two BRCA proteins (BRCA1 and BRCA2) initially discovered as major hereditary breast cancer genes. Although structurally unrelated, both BRCA1 and BRCA2 exhibit tumor suppressor function and are integrally involved in the homologous recombination repair (HRR) pathway, a pathway critical in the repair of damaged DNA. Specifically, BRCA1/2 are required for repair of chromosomal double strand breaks (DSBs) which are highly unstable and compromise genome integrity[1,2]. Inherited pathogenic mutations in BRCA1/2 are known to confer increased risk in women for breast and ovarian cancer[3] and in men for breast and prostate cancer[4,5]. For individuals diagnosed with inherited pathogenic or likely pathogenic BRCA1/2 variants, estimated lifetime risks range from 41% to 90% for developing breast cancer and 8 to 62% for developing ovarian cancer[6].

Alterations and prevalence: Inherited BRCA1/2 mutations occur in 1:400 to 1:500 individuals and are observed in 10-15% of ovarian cancer and 5-10% of breast cancer[7,8,9,10,11,12,13]. Somatic alterations in BRCA1 are observed in 2-8% of breast, ovarian, cervical, uterine, diffuse large B-cell lymphoma (DLBCL), melanoma, gastric, bladder, squamous lung, colorectal, and head and neck cancers[14,15].

Potential relevance: Individuals possessing BRCA1/2 pathogenic germline or somatic mutations are shown to exhibit sensitivity to platinum based chemotherapy as well as treatment with poly (ADP-ribose) polymerase inhibitors (PARPi)[16]. Inhibitors targeting PARP induce synthetic lethality in recombination deficient BRCA1/2 mutant cells[17,18]. Consequently, several PARP inhibitors have been FDA approved for BRCA1/2-mutated cancers. Olaparib[19] (2014) was the first PARPi to be approved by the FDA for BRCA1/2 aberrations. Originally approved for the treatment of germline variants, olaparib is now indicated (2018) for the maintenance treatment

Biomarker Descriptions (continued)

of both germline BRCA1/2-mutated (gBRCAm) and somatic BRCA1/2-mutated (sBRCAm) epithelial ovarian, fallopian tube, or primary peritoneal cancers that are responsive to platinum-based chemotherapy. Olaparib is also indicated for the treatment of patients with gBRCAm HER2-negative metastatic breast cancer and metastatic pancreatic adenocarcinoma. Additionally, olaparib[19] is approved (2020) for metastatic castration-resistant prostate cancer (mCRPC) with deleterious or suspected deleterious, germline or somatic mutations in HRR genes that includes BRCA1. Rucaparib[20] (2016) was the first PARPi approved for the treatment of patients with either gBRCAm or sBRCAm epithelial ovarian, fallopian tube, or primary peritoneal cancers and is also approved (2020) for deleterious gBRCAm or sBRCAm mCRPC. Talazoparib[21] (2018) is indicated for the treatment of gBRCAm HER2-negative locally advanced or metastatic breast cancer. Niraparib[22] (2017) is another PARPi approved for the treatment of epithelial ovarian, fallopian tube, or primary peritoneal cancers with a deleterious or suspected deleterious BRCA mutation. Despite tolerability and efficacy, acquired resistance to PARP inhibition has been clinically reported[23]. One of the most common mechanisms of resistance includes secondary intragenic mutations that restore BRCA1/2 functionality[24]. In addition to PARP inhibitors, other drugs which promote synthetic lethality have been investigated for BRCA mutations. In 2022, the FDA granted fast track designation to the small molecule inhibitor, pidnarulex[25], for BRCA1/2, PALB2, or other homologous recombination deficiency (HRD) mutations in breast and ovarian cancers. Like PARPi, pidnarulex promotes synthetic lethality but through an alternative mechanism which involves stabilization of G-quadruplexes at the replication fork leading to DNA breaks and genomic instability.

Relevant Therapy Summary

● In this cancer type ○ In other cancer type ◑ In this cancer type and other cancer types ✖ No evidence

BRCA1 p.(K654Nfs*47) c.1962delG

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
olaparib	◑	◑	◑	◑	✖
rucaparib	◑	◑	●	●	✖
bevacizumab + olaparib	◑	●	◑	●	✖
niraparib	●	●	✖	●	✖
talazoparib	✖	✖	✖	○	✖

Relevant Therapy Details

Current FDA Information

● In this cancer type ○ In other cancer type ◑ In this cancer type and other cancer types

FDA information is current as of 2022-04-13. For the most up-to-date information, search www.fda.gov.

BRCA1 p.(K654Nfs*47) c.1962delG

◑ olaparib, bevacizumab + olaparib

Cancer type: Castration-Resistant Prostate Cancer, Ovarian Cancer **Label as of:** 2022-03-11 **Variant class:** BRCA1 mutation

Indications and usage:

LYNPARZA® is a poly (ADP-ribose) polymerase (PARP) inhibitor indicated:

Ovarian cancer

- for the maintenance treatment of adult patients with deleterious or suspected deleterious germline or somatic BRCA-mutated advanced epithelial ovarian, fallopian tube or primary peritoneal cancer who are in complete or partial response to first-line platinum-based chemotherapy. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.
- in combination with bevacizumab for the maintenance treatment of adult patients with advanced epithelial ovarian, fallopian tube or primary peritoneal cancer who are in complete or partial response to first-line platinum-based chemotherapy and whose cancer is associated with homologous recombination deficiency (HRD)-positive status defined by either:
  - a deleterious or suspected deleterious BRCA mutation, and/or
  - genomic instability.

Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.

- for the maintenance treatment of adult patients with recurrent epithelial ovarian, fallopian tube or primary peritoneal cancer, who are in complete or partial response to platinum-based chemotherapy.
- for the treatment of adult patients with deleterious or suspected deleterious germline BRCA-mutated (gBRCAm) advanced ovarian cancer who have been treated with three or more prior lines of chemotherapy. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.

Breast cancer

- for the adjuvant treatment of adult patients with deleterious or suspected deleterious gBRCAm human epidermal growth factor receptor 2 (HER2)-negative high risk early breast cancer who have been treated with neoadjuvant or adjuvant chemotherapy. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.
- for the treatment of adult patients with deleterious or suspected deleterious gBRCAm, HER2-negative metastatic breast cancer who have been treated with chemotherapy in the neoadjuvant, adjuvant or metastatic setting. Patients with hormone receptor (HR)-positive breast cancer should have been treated with a prior endocrine therapy or be considered inappropriate for endocrine therapy. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.

Pancreatic cancer

- for the maintenance treatment of adult patients with deleterious or suspected deleterious gBRCAm metastatic pancreatic adenocarcinoma whose disease has not progressed on at least 16 weeks of a first-line platinum-based chemotherapy regimen. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.

Prostate cancer

- for the treatment of adult patients with deleterious or suspected deleterious germline or somatic homologous recombination repair (HRR) gene-mutated metastatic castration-resistant prostate cancer (mCRPC) who have progressed following prior treatment with enzalutamide or abiraterone. Select patients for therapy based on an FDA-approved companion diagnostic for LYNPARZA®.

Reference:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2022/208558s023lbl.pdf

BRCA1 p.(K654Nfs*47) c.1962delG (continued)

rucaparib

Cancer type: Castration-Resistant Prostate Cancer, Ovarian Cancer

Label as of: 2021-09-30

Variant class: BRCA1 mutation

Indications and usage:

RUBRACA® is a poly (ADP-ribose) polymerase (PARP) inhibitor indicated:

Ovarian cancer

- for the maintenance treatment of adult patients with recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancer who are in a complete or partial response to platinum-based chemotherapy.
- for the treatment of adult patients with a deleterious BRCA mutation (germline and/or somatic)-associated epithelial ovarian, fallopian tube, or primary peritoneal cancer who have been treated with two or more chemotherapies. Select patients for therapy based on an FDA-approved companion diagnostic for RUBRACA®.

Prostate cancer

- for the treatment of adult patients with a deleterious BRCA mutation (germline and/or somatic)-associated metastatic castration-resistant prostate cancer (mCRPC) who have been treated with androgen receptor-directed therapy and a taxane-based chemotherapy. Select patients for therapy based on an FDA-approved companion diagnostic for RUBRACA®.

This indication is approved under accelerated approval based on objective response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trials.

Reference:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/209115s009lbl.pdf

niraparib

Cancer type: Ovarian Cancer

Label as of: 2021-07-27

Variant class: BRCA1 mutation or HR Deficient

Indications and usage:

ZEJULA® is a poly (ADP-ribose) polymerase (PARP) inhibitor indicated:

- for the maintenance treatment of adult patients with advanced epithelial ovarian, fallopian tube, or primary peritoneal cancer who are in a complete or partial response to first-line platinum-based chemotherapy.
- for the maintenance treatment of adult patients with recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancer who are in a complete or partial response to platinum-based chemotherapy.
- for the treatment of adult patients with advanced ovarian, fallopian tube, or primary peritoneal cancer who have been treated with 3 or more prior chemotherapy regimens and whose cancer is associated with homologous recombination deficiency (HRD) positive status defined by either:
  - a deleterious or suspected deleterious BRCA mutation, or
  - genomic instability and who have progressed more than 6 months after response to the last platinum-based chemotherapy.

Select patients for therapy based on an FDA-approved companion diagnostic for ZEJULA®.

Reference:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/208447s022s024lbl.pdf

Current NCCN Information

● In this cancer type ○ In other cancer type ◑ In this cancer type and other cancer types

NCCN information is current as of 2022-03-31. For the most up-to-date information, search www.nccn.org.
For NCCN International Adaptations & Translations, search www.nccn.org/global/international_adaptations.aspx.

BRCA1 p.(K654Nfs*47) c.1962delG

● bevacizumab + olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Stage II, Stage III, Stage IV; Partial response, Complete response (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

● niraparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Persistent, Recurrent, Partial response, Complete response (Maintenance therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

● niraparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Stage II, Stage III, Stage IV; Partial response, Complete response (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

● olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Persistent, Recurrent, Partial response, Complete response (Maintenance therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

BRCA1 p.(K654Nfs*47) c.1962delG (continued)

olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Stage II, Stage III, Stage IV; Partial response, Complete response (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

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rucaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Persistent, Recurrent, Partial response, Complete response (Maintenance therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

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niraparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Stage II, Stage III, Stage IV; Partial response, Complete response (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

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niraparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation or HR Deficient

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Epithelial, Less Common Ovarian Cancers, Fallopian Tube, Primary Peritoneal; Recurrent (Recurrence therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

BRCA1 p.(K654Nfs*47) c.1962delG (continued)

olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Epithelial, Fallopian Tube, Primary Peritoneal; Stage II, Stage III, Stage IV; Partial response, Complete response (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

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rucaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Epithelial, Less Common Ovarian Cancers, Fallopian Tube, Primary Peritoneal; Recurrent (Recurrence therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

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olaparib

Cancer type: Castration-Resistant Prostate Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):
- Adenocarcinoma; Metastatic (Subsequent therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 3.2022]

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rucaparib

Cancer type: Pancreatic Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Adenocarcinoma; Metastatic (Maintenance therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Pancreatic Adenocarcinoma [Version 1.2022]

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rucaparib

Cancer type: Castration-Resistant Prostate Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):
- Adenocarcinoma; Metastatic (Subsequent therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 3.2022]

BRCA1 p.(K654Nfs*47) c.1962delG (continued)

olaparib

Cancer type: Castration-Resistant Prostate Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):
- Adenocarcinoma; Visceral Metastases (Subsequent therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 3.2022]

rucaparib

Cancer type: Castration-Resistant Prostate Cancer **Variant class:** BRCA1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):
- Adenocarcinoma; Visceral Metastases (Subsequent therapy); Useful in certain circumstances

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 3.2022]

Current EMA Information

● In this cancer type ○ In other cancer type ◑ In this cancer type and other cancer types

EMA information is current as of 2022-04-13. For the most up-to-date information, search www.ema.europa.eu/ema.

BRCA1 p.(K654Nfs*47) c.1962delG

◑ olaparib, bevacizumab + olaparib

Cancer type: Castration-Resistant Prostate Cancer, Ovarian Cancer **Label as of:** 2022-03-25 **Variant class:** BRCA1 mutation

Reference:

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

● rucaparib

Cancer type: Ovarian Cancer **Label as of:** 2021-09-20 **Variant class:** BRCA1 mutation

Reference:

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

Current ESMO Information

● In this cancer type ○ In other cancer type ◑ In this cancer type and other cancer types

ESMO information is current as of 2022-03-31. For the most up-to-date information, search www.esmo.org.

BRCA1 p.(K654Nfs*47) c.1962delG

● bevacizumab + olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA mutation or HR Deficient

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

Population segment (Line of therapy):
- Epithelial; Relapsed (Maintenance therapy); ESMO-MCBS v1.1 score: 3

Reference: ESMO Clinical Practice Guidelines - ESMO-Newly Diagnosed and Relapsed Epithelial Ovarian Carcinoma [Ann Oncol 2013; 24 (Suppl 6): vi24-vi32. (eUpdate: 19 July 2021, 01 April 2020, 21 September 2016; Corrigendum: 03 October 2018)]

● niraparib

Cancer type: Ovarian Cancer **Variant class:** BRCA mutation or HR Deficient

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

Population segment (Line of therapy):
- Epithelial; Relapsed (Maintenance therapy); ESMO-MCBS v1.1 score: 3

Reference: ESMO Clinical Practice Guidelines - ESMO-Newly Diagnosed and Relapsed Epithelial Ovarian Carcinoma [Ann Oncol 2013; 24 (Suppl 6): vi24-vi32. (eUpdate: 19 July 2021, 01 April 2020, 21 September 2016; Corrigendum: 03 October 2018)]

● olaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA mutation

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

Population segment (Line of therapy):
- Epithelial; Relapsed (Maintenance therapy); ESMO-MCBS v1.1 score: 4

Reference: ESMO Clinical Practice Guidelines - ESMO-Newly Diagnosed and Relapsed Epithelial Ovarian Carcinoma [Ann Oncol 2013; 24 (Suppl 6): vi24-vi32. (eUpdate: 19 July 2021, 01 April 2020, 21 September 2016; Corrigendum: 03 October 2018)]

● rucaparib

Cancer type: Ovarian Cancer **Variant class:** BRCA mutation

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

Population segment (Line of therapy):
- Epithelial; Recurrent (Line of therapy not specified)

Reference: ESMO Clinical Practice Guidelines - ESMO-Newly Diagnosed and Relapsed Epithelial Ovarian Carcinoma [Ann Oncol 2013; 24 (Suppl 6): vi24-vi32. (eUpdate: 19 July 2021, 01 April 2020, 21 September 2016; Corrigendum: 03 October 2018)]

BRCA1 p.(K654Nfs*47) c.1962delG (continued)

olaparib

Cancer type: Breast Cancer **Variant class:** BRCA1 mutation

Other criteria: ERBB2 negative, ER positive

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

Population segment (Line of therapy):
- Luminal A; Advanced, Metastatic (Second-line therapy); ESMO-MCBS v1.1 score: 4

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Breast Cancer [Ann Oncol (2021) VOLUME 32, ISSUE 12, P1475-1495, DECEMBER 01, 2021; DOI:https://doi.org/10.1016/j.annonc.2021.09.019]

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talazoparib

Cancer type: Breast Cancer **Variant class:** BRCA1 mutation

Other criteria: ERBB2 negative, ER positive

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

Population segment (Line of therapy):
- Luminal A; Advanced, Metastatic (Second-line therapy); ESMO-MCBS v1.1 score: 4

Reference: ESMO Clinical Practice Guidelines - ESMO-Metastatic Breast Cancer [Ann Oncol (2021) VOLUME 32, ISSUE 12, P1475-1495, DECEMBER 01, 2021; DOI:https://doi.org/10.1016/j.annonc.2021.09.019]

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olaparib

Cancer type: Castration-Resistant Prostate Cancer **Variant class:** BRCA1 mutation

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

Population segment (Line of therapy):
- Metastatic, Progression (Line of therapy not specified)

Reference: ESMO Clinical Practice Guidelines - ESMO-Cancer of the Prostate [Ann Oncol (2020)]

Alerts Informed By Public Data Sources

Current FDA Information

Contraindicated Not recommended Resistance Breakthrough Fast Track

FDA information is current as of 2022-04-13. For the most up-to-date information, search www.fda.gov.

BRCA1 p.(K654Nfs*47) c.1962delG

pidnarulex

Cancer type: Breast Cancer, Ovarian Cancer **Variant class:** HR Deficient

Supporting Statement:
The FDA has granted Fast Track Designation to the small molecule inhibitor, pidnarulex for BRCA1/2, PALB2, or other HRD mutations in breast and ovarian cancers.

Reference:

https://www.senhwabio.com//en/news/20220125

Current NCCN Information

Contraindicated Not recommended Resistance Breakthrough Fast Track

NCCN information is current as of 2022-03-31. For the most up-to-date information, search www.nccn.org.
For NCCN International Adaptations & Translations, search www.nccn.org/global/international_adaptations.aspx.

BRCA1 p.(K654Nfs*47) c.1962delG

bevacizumab

Cancer type: Ovarian Cancer **Variant class:** BRCA1 mutation

Summary:

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

- "bevacizumab monotherapy is no longer recommended for patients with BRCA1/2 mutations"

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2022]

Signatures

Testing Personnel: Shin-Ying Lin 2022.06.17 15:57:22 +08'00'

Laboratory Supervisor: 2022.06.17 15:57:34 +08'00'

Pathologist: Yu-Ching Peng 2022.06.17 15:57:47 +08'00'

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