



Sample Information

Patient Name: 王佳豪
Gender: Male
ID No.: Y120223983
History No.: 14880003
Age: 50

Ordering Doctor: DOC8919E 周逸峰
Ordering REQ.: OCBMPCA
Signing in Date: 2022/11/1

Path No.: S111-97964
MP No.: MY22032
Assay: 2022/10/21
Sample Type: Bone Marrow
Bone Marrow Aspirating Date: Oncomine Myeloid Assay

Reporting Doctor: DOC5466K 葉奕成 (Phone: 8#5466)

Note:

Sample Cancer Type: Acute Myeloid Leukemia

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Report Highlights

2 Relevant Biomarkers
12 Therapies Available
0 Clinical Trials

Relevant Acute Myeloid Leukemia Variants

Gene	Finding	Gene	Finding
ABL1	None detected	MECOM	None detected
ASXL1	None detected	MLLT3	None detected
CEBPA	None detected	MYH11	None detected
CREBBP	None detected	NPM1	NPM1 p.(W288Cfs*12) c.863_864insTCTG
FLT3	FLT3 ITD mutation	NUP214	None detected
IDH1	None detected	RARA	None detected
IDH2	None detected	RUNX1	None detected
KMT2A	None detected	TP53	None detected

Relevant Biomarkers

Tier	Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
IA	FLT3 ITD mutation fms related receptor tyrosine kinase 3 Allele Frequency: 26.30%	gilteritinib ^{1,2} midostaurin + chemotherapy ^{1,2} cytarabine + daunorubicin cytarabine + daunorubicin + etoposide cytarabine + etoposide + idarubicin cytarabine + fludarabine + idarubicin + filgrastim cytarabine + idarubicin cytarabine + mitoxantrone gemtuzumab ozogamicin + chemotherapy sorafenib sorafenib + chemotherapy venetoclax + chemotherapy	None	0
Prognostic significance: ELN 2017: Favorable to Intermediate				
IA	NPM1 p.(W288Cfs*12) c.863_864insTCTG nucleophosmin 1 Allele Frequency: 49.33%	cytarabine + daunorubicin cytarabine + daunorubicin + etoposide cytarabine + etoposide + idarubicin cytarabine + fludarabine + idarubicin + filgrastim cytarabine + idarubicin cytarabine + mitoxantrone gemtuzumab ozogamicin + chemotherapy midostaurin + chemotherapy	None	0
Prognostic significance: ELN 2017: Favorable to Intermediate				
Diagnostic significance: Acute Myeloid Leukemia				

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

Public data sources included in prognostic and diagnostic significance: NCCN, ESMO

Prevalent cancer biomarkers without relevant evidence based on included data sources

PHF6 p.(K21*) c.60_61insT, PHF6 p.(R198Sfs*20) c.594delG, DNMT3A p.(R882C) c.2644C>T

Variants (Exclude variant in Taiwan BioBank with >1% allele frequency)

DNA Sequence Variants								
Gene	Amino Acid Change	Coding	Variant ID	Locus	Allele Frequency	Transcript	Variant Effect	Coverage
DNMT3A	p.(R882C)	c.2644C>T	COSM53042	chr2:25457243	48.12%	NM_022552.4	missense	1999
NPM1	p.(W288Cfs*12)	c.863_864insTCTG	COSM17559	chr5:170837547	49.33%	NM_002520.6	frameshift Insertion	1778
FLT3	p.(Y572_D593dup)	c.1779_1780insTAT GAAAGCCAGCTACA GATGGTACAGGTGA CCGGCTCCTCAGAT AATGAGTACTTCTA CGTTGAT	.	chr13:28608276	26.30%	NM_004119.3	nonframeshift Insertion	
PHF6	p.(K21*)	c.60_61insT	.	chrX:133511706	45.42%	NM_032458.3	nonsense	1843

Variants (Exclude variant in Taiwan BioBank with >1% allele frequency) (continued)

DNA Sequence Variants (continued)

Gene	Amino Acid Change	Coding	Variant ID	Locus	Allele Frequency	Transcript	Variant Effect	Coverage
PHF6	p.(R198Sfs*20)	c.594delG	.	chrX:133547859	38.10%	NM_032458.3	frameshift Deletion	1433
GATA2	p.(A372T)	c.1114G>A	.	chr3:128200691	48.10%	NM_032638.5	missense	2000

Biomarker Descriptions

DNMT3A (DNA methyltransferase 3 alpha)

Background: The DNMT3A gene encodes the DNA methyltransferase 3 alpha which functions as a de novo methyltransferase (DNMT) with equal methylation efficiency for unmethylated and hemimethylated DNA¹. Methylation of DNA occurs at CpG islands, a region of DNA consisting of sequential cytosine/guanine dinucleotide pairs. CpG island methylation plays an important role in development as well as stem cell regulation. Alterations to global DNA methylation patterns are dependent on DNMTs, which are associated with cancer initiation and progression^{2,3}.

Alterations and prevalence: DNMT3A mutations are observed in approximately 25% of all acute myeloid leukemia (AML) including 29-34% of AML with normal karyotype (NK-AML)^{4,5,6,7,8,9,10}. Mutations in DNMT3A are also reported in 12-18% of myelodysplastic syndromes (MDS) as well as 4-6% of melanoma, lung adenocarcinoma, and uterine cancer^{9,11}. The majority of mutations in DNMT3A are missense however, frameshift, nonsense, and splice site mutations have also been reported^{4,9}. Missense mutations at R882 are most prevalent and are observed to coexist with NPM1 and FLT3 mutations^{12,13}. The R882 mutations occur at the dimer/tetramer interface within the catalytic domain, which leads to disruption of DNMT3A tetramerization and loss of CpG methylation^{14,15}. However, DNMT3A mutations observed in AML at positions other than R882 also contribute to pathogenesis by mechanisms that do not involve methyltransferase activity¹⁶.

Potential relevance: DNMT3A mutations confer shorter overall survival (OS) in patients with AML including those with NK-AML^{4,7,8,13}. DNMT3A mutations are a useful in the diagnosis of angioimmunoblastic T-cell lymphoma (AITCL) when trying to differentiate from other peripheral T-cell lymphomas (PTCL)¹⁷.

FLT3 (fms related receptor tyrosine kinase 3)

Background: The FLT3 gene encodes the fms related tyrosine kinase 3, a tyrosine kinase receptor that is a member of the class III receptor tyrosine kinase family that also includes PDGFR, FMS, and KIT¹⁸. FLT3 is highly expressed in hematopoietic progenitor cells¹⁹. Genomic alterations in FLT3 activate downstream oncogenic pathways including PI3K/AKT/mTOR and RAS/RAF/MEK/ERK pathways which promote cellular proliferation, survival, and inhibition of differentiation¹⁸.

Alterations and prevalence: Somatic mutations occur in approximately 30% of acute myeloid leukemia (AML), 7-10% of melanoma, and up to 8% of uterine cancer^{9,20,21,22}. The most common activating FLT3 mutations are internal tandem duplications (ITD) that range from 3 to 400 base pairs in length within exons 14 and 15 in the juxtamembrane (JM) domain²³. The second most frequent mutations are point mutations in exon 20 within the tyrosine kinase domain (TKD)²⁴. FLT3 is amplified in up to 8% of colorectal cancer, 3% of stomach cancer, and is commonly overexpressed in AML^{9,22,25}.

Potential relevance: The presence of FLT3-ITD confers poor prognosis in myelodysplastic syndrome (MDS) and AML^{10,11}. Similarly, the FLT3 TKD mutation D835 confers poor prognosis in MDS¹¹. Midostaurin²⁶ (2017) and gilteritinib²⁷ (2018) are kinase inhibitors approved for AML patients with FLT3-ITD and TKD mutations including D835 and I836 mutations. The FDA granted fast track designations in 2017 to crenolanib²⁸ for FLT3 mutation-positive relapsed or refractory AML and in 2018 to quizartinib²⁹ for AML with FLT3-ITD. A phase II trial testing crenolanib in 34 patients with FLT3-ITD and TKD mutated relapsed/refractory AML, reported that FLT3 inhibitor naïve patients demonstrated a longer overall survival (OS) and event free survival (EFS) in comparison to previously treated patients (median OS: 55 weeks vs 13 weeks; median EFS: 13 weeks vs 7 weeks)³⁰. Another phase II trial of crenolanib with chemotherapy in newly diagnosed FLT3 mutated AML reported complete remission in 24/29 (83%) patients³¹. Several multi-targeted tyrosine kinase inhibitors such as sorafenib (2005), sunitinib (2006), cabozantinib (2012), and ponatinib (2012) are FDA approved and include FLT3 as a target. Sorafenib is recommended in combination with chemotherapy in FLT3-ITD mutated AML¹⁰.

NPM1 (nucleophosmin 1)

Background: The NPM1 gene encodes the nucleophosmin protein, a histone chaperone of the nucleophosmin/nucleoplasmin family, which also includes NPM2 and NPM3³². NPM1 functions as an oncogene and tumor suppressor, and is important in maintaining

Biomarker Descriptions (continued)

genomic stability, DNA repair, and apoptosis^{32,33}. NPM1 has a highly conserved N-terminal region which constitutes the core domain responsible for oligomerization, an acidic domain, a nuclear localization signal, and a disorganized C-terminal region which is required for nucleolar localization³². Oligomerization of NPM1 localizes the protein in the nucleus of proliferating cells where it binds to Akt in response to growth factor stimulation and escapes proteolytic degradation by caspase activity, thereby promoting cell survival^{32,33}. NPM1 is one of the most frequently altered genes in hematological cancers³⁴. Most NPM1 mutations occur in the C-terminus, impacting protein folding or the nucleolar localization signal, and result in the localization of NPM1 to the cytoplasm (NPMc) instead of to the nucleus³².

Alterations and prevalence: NPM1 mutations are observed in 45-60% of AML with a normal karyotype (NK-AML), 28-35% of de novo acute myeloid leukemia (AML) and are frequently co-mutated with DNMT3A and/or FLT3-ITD^{10,35,36}. NPM1 fusions are associated with distinct partner genes in acute promyelocytic leukemia (APL), anaplastic large-cell lymphoma (ALCL), AML, and myelodysplasia³⁴. Specifically, NPM1-ALK fusion is found in 30% of all ALCL and this specific fusion is observed in 85% of ALK-positive ALCL³². The t(5;17)(q35;q21) translocation that results in NPM1-RARA fusion is observed in APL³⁷.

Potential relevance: NPM1 mutated AML is recognized as a distinct diagnostic disease entity by the World Health Organization (WHO)³⁸. NPM1 mutations are associated with better outcomes, increased complete remission, and improved overall survival in AML^{10,36}. NPM1 without FLT3-ITD mutations or with <0.5 allelic ratio FLT3-ITD mutations are associated with favorable risk in AML¹⁰. Concurrent NPM1 and with >0.5 allelic ratio FLT3-ITD mutations confer intermediate risk in AML, whereas wild-type NPM1 confers poor/adverse risk¹⁰. The NPM1 frameshift mutation W288fs*12 is associated with poor prognosis in myelodysplastic syndrome (MDS)¹¹. The ALK-NPM1 fusion, and translocation t(2;5)(p23;q35) which leads to an ALK-NPM1 fusion, is diagnostic of ALK-positive anaplastic large cell lymphoma^{17,39}.

PHF6 (PHD finger protein 6)

Background: The PHF6 gene encodes the plant homeodomain (PHD) finger protein 6 which contains four nuclear localization signals and two imperfect PHD zinc finger domains. PHF6 is a tumor suppressor that interacts with the nucleosome remodeling deacetylase (NuRD) complex, which regulates nucleosome positioning and transcription of genes involved in development and cell-cycle progression^{40,41}.

Alterations and prevalence: The majority of PHF6 aberrations are nonsense, frameshift (70%), or missense (30%) mutations, which result in complete loss of protein expression^{40,42,43,44}. Truncating or missense mutations in PHF6 are observed in 38% of adult and 16% of pediatric T-cell acute lymphoblastic leukemia (T-ALL), 20-25% of mixed phenotype acute leukemias (MPAL), and 3% of AML, and 2.6% of hepatocellular carcinoma (HCC)^{42,44}. Missense mutations recurrently involve codon C215 and the second zinc finger domain of PHF6⁴². PHF6 mutations are frequently observed in hematologic malignancies from male patients^{40,42}.

Potential relevance: Somatic mutations in PHF6 are associated with reduced overall survival in AML patients treated with high-dose induction chemotherapy⁴⁵.

Relevant Therapy Summary

☒ In this cancer type
 ☐ In other cancer type
 ☒ In this cancer type and other cancer types
 ☒ No evidence

FLT3 ITD mutation

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
gilteritinib	●	●	●	●	×
midostaurin + cytarabine + daunorubicin	●	●	●	●	×
cytarabine + daunorubicin	×	●	×	×	×
cytarabine + daunorubicin + etoposide	×	●	×	×	×
cytarabine + etoposide + idarubicin	×	●	×	×	×
cytarabine + fludarabine + idarubicin + filgrastim	×	●	×	×	×

Relevant Therapy Summary (continued)

☒ In this cancer type
 ☐ In other cancer type
 ☒ In this cancer type and other cancer types
 ✕ No evidence

FLT3 ITD mutation (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
cytarabine + idarubicin	✕	●	✕	✕	✕
cytarabine + mitoxantrone	✕	●	✕	✕	✕
gemtuzumab ozogamicin + cytarabine + daunorubicin	✕	●	✕	✕	✕
midostaurin + cytarabine	✕	●	✕	✕	✕
sorafenib	✕	●	✕	✕	✕
sorafenib + azacitidine	✕	●	✕	✕	✕
sorafenib + decitabine	✕	●	✕	✕	✕
venetoclax + azacitidine	✕	●	✕	✕	✕
venetoclax + cytarabine	✕	●	✕	✕	✕
venetoclax + decitabine	✕	●	✕	✕	✕

NPM1 p.(W288Cfs*12) c.863_864insTCTG

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
cytarabine + daunorubicin	✕	●	✕	✕	✕
cytarabine + daunorubicin + etoposide	✕	●	✕	✕	✕
cytarabine + etoposide + idarubicin	✕	●	✕	✕	✕
cytarabine + fludarabine + idarubicin + filgrastim	✕	●	✕	✕	✕
cytarabine + idarubicin	✕	●	✕	✕	✕
cytarabine + mitoxantrone	✕	●	✕	✕	✕
gemtuzumab ozogamicin + cytarabine + daunorubicin	✕	●	✕	✕	✕
midostaurin + cytarabine + daunorubicin	✕	●	✕	✕	✕

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 2022-08-17. For the most up-to-date information, search www.fda.gov.

FLT3 ITD mutation

● gilteritinib

Cancer type: Acute Myeloid Leukemia

Label as of: 2022-01-12

Variant class: FLT3 ITD mutation

Indications and usage:

XOSPATA® is a kinase inhibitor indicated for the treatment of adult patients who have relapsed or refractory acute myeloid leukemia (AML) with a FLT3 mutation as detected by an FDA-approved test.

Reference:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2022/211349s003lbl.pdf

● midostaurin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Label as of: 2021-11-15

Variant class: FLT3 ITD mutation

Indications and usage:

RYDAPT® is a kinase inhibitor indicated for the treatment of adult patients with:

- Newly diagnosed acute myeloid leukemia (AML) that is FLT3 mutation-positive as detected by an FDA-approved test, in combination with standard cytarabine and daunorubicin induction and cytarabine consolidation.

Limitations of Use: RYDAPT® is not indicated as a single-agent induction therapy for the treatment of patients with AML.

- Aggressive systemic mastocytosis (ASM), systemic mastocytosis with associated hematological neoplasm (SM-AHN), or mast cell leukemia (MCL).

Reference:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/207997s008lbl.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 2022-08-01. For the most up-to-date information, search www.nccn.org.
For NCCN International Adaptations & Translations, search www.nccn.org/global/international_adaptations.aspx.

FLT3 ITD mutation + NPM1 p.(W288Cfs*12) c.863_864insTCTG

● cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + daunorubicin + etoposide

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + etoposide + idarubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + idarubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

FLT3 ITD mutation + NPM1 p.(W288Cfs*12) c.863_864insTCTG (continued)**● cytarabine + daunorubicin**

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + idarubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + mitoxantrone

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● gemtuzumab ozogamicin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● midostaurin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

FLT3 ITD mutation + NPM1 p.(W288Cfs*12) c.863_864insTCTG (continued)**● cytarabine + daunorubicin + etoposide**

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + etoposide + idarubicin

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● cytarabine + fludarabine + idarubicin + filgrastim

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

FLT3 ITD mutation**● gilteritinib**

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Relapsed, Refractory (Line of therapy not specified)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

FLT3 ITD mutation (continued)

● midostaurin + cytarabine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Consolidation therapy)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● midostaurin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Subsequent therapy)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● sorafenib

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● sorafenib + azacitidine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention
- Relapsed, Refractory (Line of therapy not specified)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

FLT3 ITD mutation (continued)

● sorafenib + decitabine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention
- Relapsed, Refractory (Line of therapy not specified)

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● venetoclax + azacitidine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● venetoclax + cytarabine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Other recommended intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

● venetoclax + decitabine

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- (Induction therapy); Preferred intervention

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

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 2022-08-17. For the most up-to-date information, search www.ema.europa.eu/ema.

FLT3 ITD mutation

☒ gilteritinib

Cancer type: Acute Myeloid Leukemia

Label as of: 2021-09-08

Variant class: FLT3 ITD mutation

Reference:

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

☒ midostaurin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Label as of: 2022-07-01

Variant class: FLT3 ITD mutation

Reference:

https://www.ema.europa.eu/en/documents/product-information/rydapt-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 2022-08-01. For the most up-to-date information, search www.esmo.org.

FLT3 ITD mutation

☒ midostaurin + cytarabine + daunorubicin

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 ITD mutation

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

Population segment (Line of therapy):

- (Induction therapy)

Reference: ESMO Clinical Practice Guidelines - ESMO-Acute Myeloblastic Leukaemia in Adult Patients [Ann Oncol (2020); 31(6): 697-712.]

☒ gilteritinib

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 mutation

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

Population segment (Line of therapy):

- Relapsed, Refractory (Line of therapy not specified)

Reference: ESMO Clinical Practice Guidelines - ESMO-Acute Myeloblastic Leukaemia in Adult Patients [Ann Oncol (2020); 31(6): 697-712.]

Prognostic Details

Current NCCN Information

NCCN information is current as of 2022-08-01. For the most up-to-date information, search www.nccn.org.
For NCCN International Adaptations & Translations, search www.nccn.org/global/international_adaptations.aspx.

FLT3 ITD mutation + NPM1 p.(W288Cfs*12) c.863_864insTCTG

Prognostic significance: ELN 2017: Intermediate

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

NCCN Recommendation category: 2A

Summary:

- FLT3-ITD^{high}; High defined as allelic ratio (≥ 0.5).

Reference: NCCN Guidelines® - NCCN-Acute Myeloid Leukemia [Version 2.2022]

Current ESMO Information

ESMO information is current as of 2022-08-01. For the most up-to-date information, search www.esmo.org.

FLT3 ITD mutation + NPM1 p.(W288Cfs*12) c.863_864insTCTG

Prognostic significance: ELN 2017: Intermediate

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

Summary:

- FLT3-ITD^{High}; High defined as allelic ratio (≥ 0.5)

Reference: ESMO Clinical Practice Guidelines - ESMO-Acute Myeloblastic Leukaemia in Adult Patients [Ann Oncol (2020); 31(6): 697-712.]

Prognostic significance: ELN 2017: Favorable

Cancer type: Acute Myeloid Leukemia

Variant classes: FLT3 ITD mutation & NPM1 mutation

Summary:

- FLT3-ITD^{Low}; Low defined as allelic ratio (< 0.5)

Reference: ESMO Clinical Practice Guidelines - ESMO-Acute Myeloblastic Leukaemia in Adult Patients [Ann Oncol (2020); 31(6): 697-712.]

Diagnostic Details

Current ESMO Information

ESMO information is current as of 2022-08-01. For the most up-to-date information, search www.esmo.org.

NPM1 p.(W288Cfs*12) c.863_864insTCTG

Diagnostic significance: Acute Myeloid Leukemia

Variant class: NPM1 mutation

Diagnostic notes:

- AML with recurrent genetic abnormalities; WHO classification of AML

Reference: ESMO Clinical Practice Guidelines - ESMO-Acute Myeloblastic Leukaemia in Adult Patients [Ann Oncol (2020); 31(6): 697-712.]

Alerts Informed By Public Data Sources


Current FDA Information

 Contraindicated

 Not recommended

 Resistance

 Breakthrough

 Fast Track

FDA information is current as of 2022-08-17. For the most up-to-date information, search www.fda.gov.

FLT3 ITD mutation

crenolanib

Cancer type: Acute Myeloid Leukemia

Variant class: FLT3 mutation

Supporting Statement:

The FDA has granted Fast Track Designation to the benzimidazole type I kinase inhibitor, crenolanib, for:

- FLT3 mutation-positive relapsed or refractory acute myeloid leukemia (AML)
- PDGFRA D842V mutated unresectable or metastatic gastrointestinal stromal tumors (GIST)

Reference:

<https://www.globenewswire.com/news-release/2017/12/01/1216122/0/en/Arog-Pharmaceuticals-Receives-FDA-Fast-Track-Designation-for-Crenolanib-in-Relapsed-or-Refractory-FLT3-Positive-AML.html>

Signatures

Testing Personnel:

Laboratory Supervisor:

Pathologist:

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