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Date: 14 Jan 2021 1 of 13

Sample Information

Patient Name: 楊惠雯 Gender: Female ID No.: Q220007074 History No.: 25088088

Age: 55

Ordering Doctor: DOC3697E 陳怡仁

Ordering REQ.: 0BBETHN Signing in Date: 2021/01/14

Path No.: S110-98064 **MP No.:** BR21002

Assay: Oncomine BRCA1/2 Assay

Sample Type: FFPE Block No.: \$109-68989Q Percentage of tumor cells: 70%

Note:

Sample Cancer Type: Ovarian Cancer

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Relevant Ovarian Cancer Variants

Gene	Finding
BRCA1	BRCA1 p.(R1203*) c.3607C>T
BRCA2	Not detected

Relevant Biomarkers

Genomic Alteration	Relevant Therapies (In this cancer type)	Relevant Therapies (In other cancer type)	Clinical Trials
BRCA1 p.(R1203*) c.3607C>T	bevacizumab + olaparib 1	bevacizumab + olaparib 1	29
BRCA1, DNA repair associated	niraparib 1	olaparib ¹	
Allele Frequency: 83.22%	olaparib ^{1, 2} rucaparib ^{1, 2}	rucaparib ¹	

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

Variant Details

DNA Sequence Variants

				Allele				
Gene	Amino Acid Change	Coding	Locus	Frequency	Transcript	Variant Effect	ClinVar ¹	Coverage
BRCA1	p.(R1203*)	c.3607C>T	chr17:41243941	83.22%	NM_007300.3	nonsense	Pathogenic	1997
BRCA2	p.(N289H)	c.865A>C	chr13:32906480	84.88%	NM_000059.3	missense	Benign	1600
BRCA2	p.(N372H)	c.1114A>C	chr13:32906729	16.03%	NM_000059.3	missense	Benign	1996
BRCA2	p.(=)	c.1365A>G	chr13:32906980	84.58%	NM_000059.3	synonymous	Benign	1998
BRCA2	p.(=)	c.2229T>C	chr13:32910721	83.35%	NM_000059.3	synonymous	Benign	2000
BRCA2	p.(N991D)	c.2971A>G	chr13:32911463	84.15%	NM_000059.3	missense	Benign	2000
BRCA2	p.(=)	c.4563A>G	chr13:32913055	99.75%	NM_000059.3	synonymous	Benign	1993
BRCA2	p.(=)	c.6513G>C	chr13:32915005	99.60%	NM_000059.3	synonymous	Benign	1983
BRCA2	p.(V2466A)	c.7397T>C	chr13:32929387	99.85%	NM_000059.3	missense	Conflicting interpretations of pathogenicity	1997
BRCA1	p.(S1634G)	c.4900A>G	chr17:41223094	99.95%	NM_007300.3	missense	Benign	1997
BRCA1	p.(=)	c.4308T>C	chr17:41234470	99.45%	NM_007300.3	synonymous	Benign	1999
BRCA1	p.(K1183R)	c.3548A>G	chr17:41244000	99.60%	NM_007300.3	missense	Benign	1999
BRCA1	p.(E1038G)	c.3113A>G	chr17:41244435	99.35%	NM_007300.3	missense	Benign	2000
BRCA1	p.(P871L)	c.2612C>T	chr17:41244936	99.55%	NM_007300.3	missense	Benign	2000
BRCA1	p.(=)	c.2311T>C	chr17:41245237	99.90%	NM_007300.3	synonymous	Benign	1997
BRCA1	p.(=)	c.2082C>T	chr17:41245466	99.75%	NM_007300.3	synonymous	Benign	1996

¹ Based on Clinvar version 20180225

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 cancer³ 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 cancer⁶.

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. Olaparib¹⁹ (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 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, olaparib¹⁹ is approved

Biomarker Descriptions (continued)

(2020) for metastatic castration-resistant prostate cancer (mCRPC) with deleterious or suspected deleterious, germline or somatic mutations in HRR genes that includes BRCA1. Rucaparib²⁰ (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. Talazoparib²¹ (2018) is indicated for the treatment of gBRCAm HER2-negative locally advanced or metastatic breast cancer. Niraparib²² (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 reported²³. One of the most common mechanisms of resistance includes secondary intragenic mutations that restore BRCA1/2 functionality²⁴.

Relevant Therapy Summary

In this cancer type	O In other cancer type	In this cancer type and other cancer types	No evidence
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Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
rucaparib	•	•			(III)
olaparib	0	0	•	0	(II)
bevacizumab + olaparib	•	•	×	×	×
niraparib	•	•	×	×	(II)
atezolizumab, chemotherapy, niraparib	×	×	×	×	(III)
cediranib, olaparib	×	×	×	×	(III)
atezolizumab	×	×	×	×	(II)
berzosertib	×	×	×	×	(II)
ceralasertib, olaparib	×	×	×	×	(II)
olaparib, chemotherapy	×	×	×	×	(II)
olaparib, talazoparib	×	×	×	×	(II)
Senaparib	×	×	×	×	(II)
talazoparib	×	×	×	×	(II)
AMXI-5001	×	×	×	×	(/)
AT-406, nivolumab	×	×	×	×	(/)
BAY-1895344	×	×	×	×	(1/11)
durvalumab + olaparib + tremelimumab	×	×	×	×	(/)
RP-3500, talazoparib	×	×	×	×	(/)
rucaparib, nivolumab, ipilimumab	×	×	×	×	(/)
BAY-1895344, niraparib	×	×	×	×	(I)
copanlisib, olaparib, durvalumab	×	×	×	×	(l)

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

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Relevant Therapy Summary (continued)

BRCA1 p.(R1203*) c.3607C>T (continued)

Relevant Therapy	FDA	NCCN	EMA	ESMO	Clinical Trials*
HWH-340	×	×	×	×	(1)
mirvetuximab, rucaparib	×	×	×	×	(1)
olaparib, adavosertib	×	×	×	×	(1)

^{*} 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

O In other cancer type

In this cancer type and other cancer types

FDA information is current as of 2020-11-18. For the most up-to-date information, search www.fda.gov.

BRCA1 p.(R1203*) c.3607C>T

olaparib, bevacizumab + olaparib

Cancer type: Ovarian Cancer, Prostate Cancer Label as of: 2020-11-02 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 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/2020/208558s018lbl.pdf

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BRCA1 p.(R1203*) c.3607C>T (continued)

rucaparib

Cancer type: Ovarian Cancer, Prostate Cancer Label as of: 2020-10-08 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/2020/209115s008lbl.pdf

niraparib

Cancer type: Ovarian Cancer Label as of: 2020-04-29 Variant class: BRCA1 mutation

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 three 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 six 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/2020/208447s015s017lbledt.pdf

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Current NCCN Information

In this cancer type

O In other cancer type

In this cancer type and other cancer types

NCCN information is current as of 2020-11-02. 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.(R1203*) c.3607C>T

bevacizumab + olaparib

Cancer type: Ovarian Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Stage II, III, IV; Post-primary therapy, with bevacizumab used during primary therapy; Partial or complete remission (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

niraparib

Cancer type: Ovarian Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Stage II, III, IV; Post-primary therapy, with no bevacizumab during primary therapy; Partial or complete remission (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

olaparib

Cancer type: Ovarian Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Stage II, III, IV; Post-primary therapy, with no bevacizumab during primary therapy; Partial or complete remission (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

niraparib

Cancer type: Ovarian Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Stage II, III, IV; Post-primary therapy, with bevacizumab used during primary therapy; Partial or complete remission (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

BRCA1 p.(R1203*) c.3607C>T (continued)

olaparib

Cancer type: Ovarian Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Stage II, III, IV; Post-primary therapy, with bevacizumab used during primary therapy; Partial or complete remission (Maintenance therapy)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

rucaparib

Cancer type: Ovarian Cancer Variant class: BRCA mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

■ Epithelial Ovarian Cancer, Fallopian Tube Cancer, Primary Peritoneal Cancer; Platinum-Sensitive or Resistant (Recurrence therapy) (Preferred)

Reference: NCCN Guidelines® - NCCN-Ovarian Cancer [Version 1.2020]

O olaparib

Cancer type: Prostate Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 1

Population segment (Line of therapy):

- Castration Resistant Prostate Adenocarcinoma; M1; Prior therapy of abiraterone/enzalutamide (Second-line therapy) (Useful in certain circumstances)
- Castration Resistant Prostate Adenocarcinoma; M1 (Subsequent therapy) (Useful in certain circumstances)

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 2.2020]

O rucaparib

Cancer type: Prostate Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 2A

Population segment (Line of therapy):

- Castration Resistant Prostate Adenocarcinoma; M1; Prior therapy of abiraterone, enzalutamide or docetaxel (Second-line therapy) (Useful in certain circumstances)
- Castration Resistant Prostate Adenocarcinoma; M1 (Subsequent therapy) (Useful in certain circumstances)

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 2.2020]

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BRCA1 p.(R1203*) c.3607C>T (continued)

O olaparib

Cancer type: Prostate Cancer Variant class: BRCA1 mutation

NCCN Recommendation category: 2B

Population segment (Line of therapy):

 Castration Resistant Prostate Adenocarcinoma; M1; Prior therapy of docetaxel (Second-line therapy) (Useful in certain circumstances)

Reference: NCCN Guidelines® - NCCN-Prostate Cancer [Version 2.2020]

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Current EMA Information

In this cancer type

O In other cancer type

In this cancer type and other cancer types

EMA information is current as of 2020-11-18. For the most up-to-date information, search www.ema.europa.eu/ema.

BRCA1 p.(R1203*) c.3607C>T

olaparib

Cancer type: Ovarian Cancer Label as of: 2020-11-06 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: 2019-05-24 Variant class: BRCA1 mutation

Reference:

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

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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 2020-11-02. For the most up-to-date information, search www.esmo.org.

BRCA1 p.(R1203*) c.3607C>T

rucaparib

Cancer type: Ovarian Cancer Variant class: BRCA mutation

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

Population segment (Line of therapy):

■ Recurrent Platinum-Sensitive Ovarian Cancer (Not specified)

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

O olaparib

Cancer type: Prostate Cancer Variant class: BRCA1 mutation

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

Population segment (Line of therapy):

Metastatic Castration-Resistant Prostate Cancer; Progressed on prior new hormonal agent therapy (Not Specified)

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

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Signatures

Testing Personnel:

Laboratory Supervisor:

Pathologist:

References

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