

The background of the slide features a stylized, semi-transparent illustration. On the right side, a DNA double helix is depicted in shades of orange and yellow. On the left side, there is a representation of a cell membrane, shown as a textured surface with various receptors and proteins in red and purple hues. The overall color palette is soft and biological.

Queensland Molecular Tumour Board

9th Oct 2019

Room 2004, TRI, Princess Alexandra Hospital,
Woolloongabba, QLD

Clinical Trial finding PA Cohort studies

Methodology:

Match Molecular Mutations to ascertain relevant clinical trials

Matching can be done at gene and/or mutation level

As some somatic mutations maybe be just passengers

Examples

PIK3CA mutated

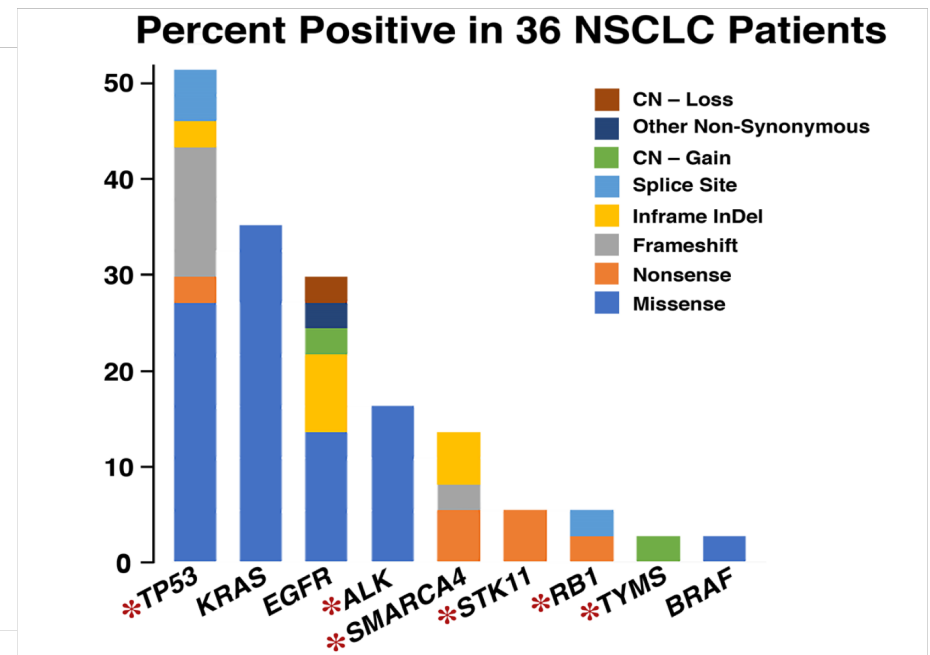
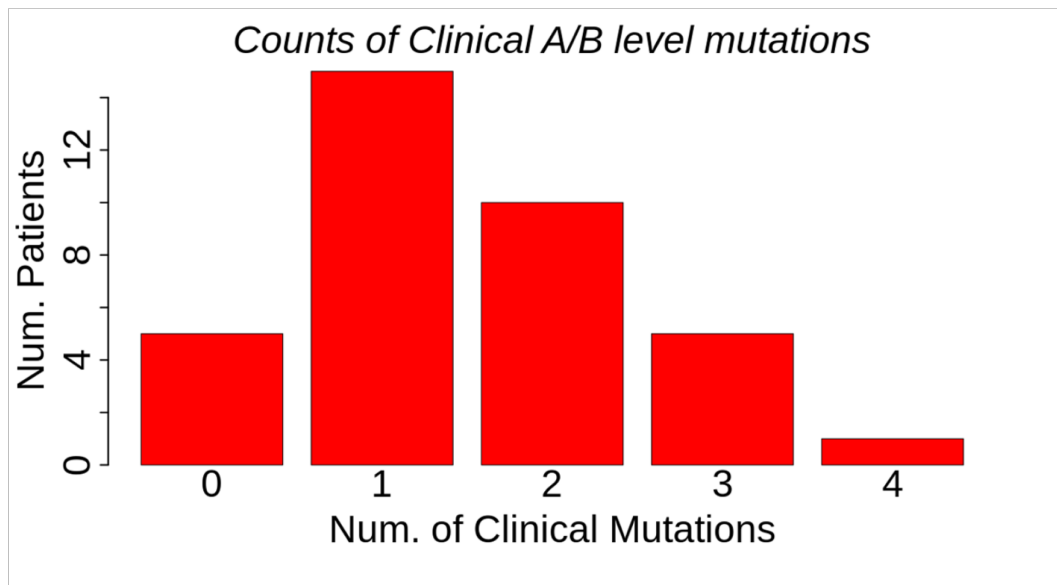
PIK3CA:p.H1047R (well know activating mutation, appears 2300 times in TCGA cancers)

PIK3CA:p.A345T (mutation never seen in TCGA cancers, unknown significance)

Match with Gene and protein level is preferred!

Examples for PA sequencing Experience in Lung cancers – Data Presented at WCLC 2019 :

N=36 patients. From eBUS and FFPE samples a relevant mutation was found in most samples
There were a variant of different types:



Matching at the gene /mutation level, recruiting Australian clinical trials:
(they excluded TMB as an immunotherapy biomarker- 11 out of 36 had a high TMB)

24 % of lung cancer patients matched clinical trails in routinely tested gene *EGFR*, *KRAS*, *NRAS*, or *BRAF* were used

41% is samples could be match if the other large panel gene were included trails below

Gene	Mutations Detected	e.g. Clinical Trial Eligibility (Australia)
<i>ATM</i>	Ser1250Phe, Leu1465Phe, Ser2812ValfsTer3	NCT03330405
<i>BRAF</i>	CN – GAIN	NCT02974725
<i>BRCA1</i>	Arg959Lys	NCT03330405
<i>BRCA2</i>	CN – LOSS	NCT03330405
<i>CDKN2A</i>	CN – LOSS	NCT02857270
<i>CDKN2B</i>	CN – LOSS	NCT02857270
<i>EGFR</i>	CN – GAIN	NCT03974022
<i>FGFR2</i>	Arg61Cys	NCT02052778
<i>MET</i>	CN – GAIN	NCT03539536
<i>NTRK1</i>	CN – GAIN	NCT02568267
<i>PTEN</i>	CN – LOSS	NCT03330405

Examples

Preliminary results for Renal cancers :

In n=30 patients there are no Australian clinical trials specific to RCC and specific molecular biomarker

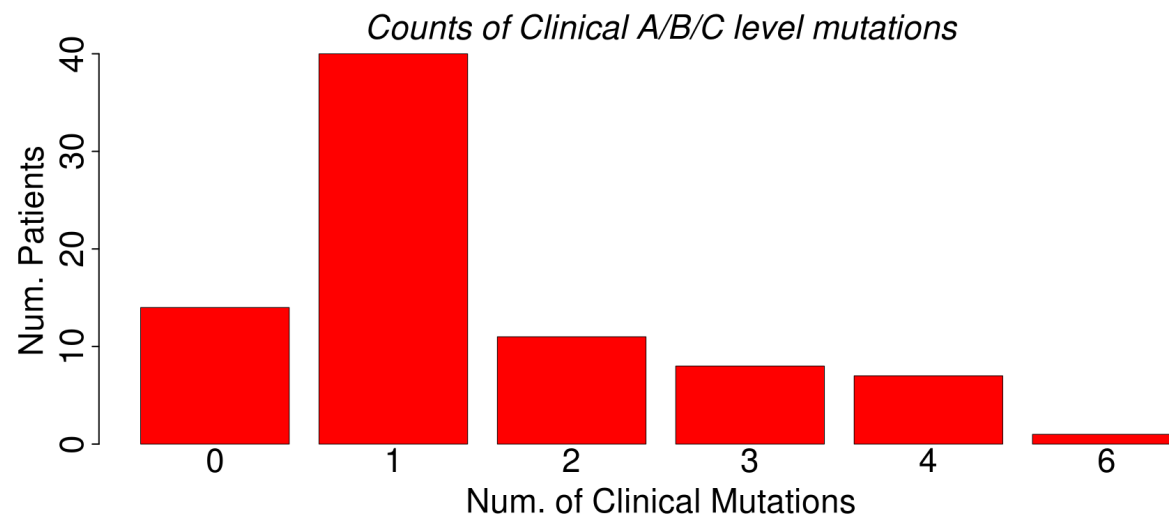
There were clinical trials for patients with
“advanced or Metastatic cancers targeting pathways involved in mutation in:
MSH6, SKI1, SMARCB1, BRCA2,
TSC1, FBXW7, EGFR, CDK12 , NRAS, BRAF

OF which ~ 30% of patients has a mutation

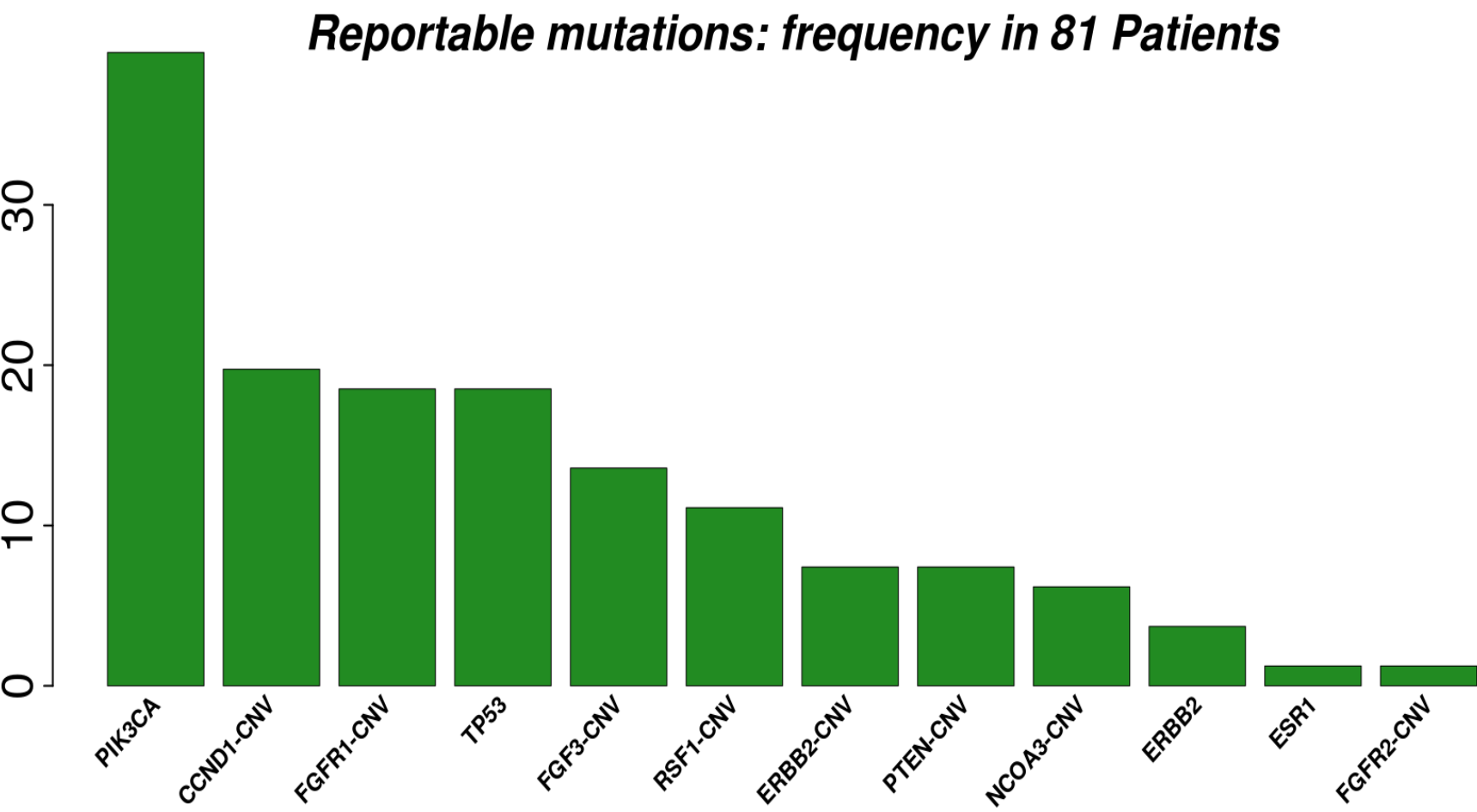
Breast cancers – A similar analysis is underway:

N=81. On average 1.5 somatic variants (Level A-C described in large clinical trails):

ABCC3, AKT1, CCND1, CCNE1, CDKN2A, ERBB2, ESR1, FGF3, FGFR1, FGFR2, MTOR, NCOA3, NF2, PIK3CA, PIK3R1, PTEN, RB1, RSF1, SF3B1, TP53



In Breast Cancer Copy number loss and amplifications are more important



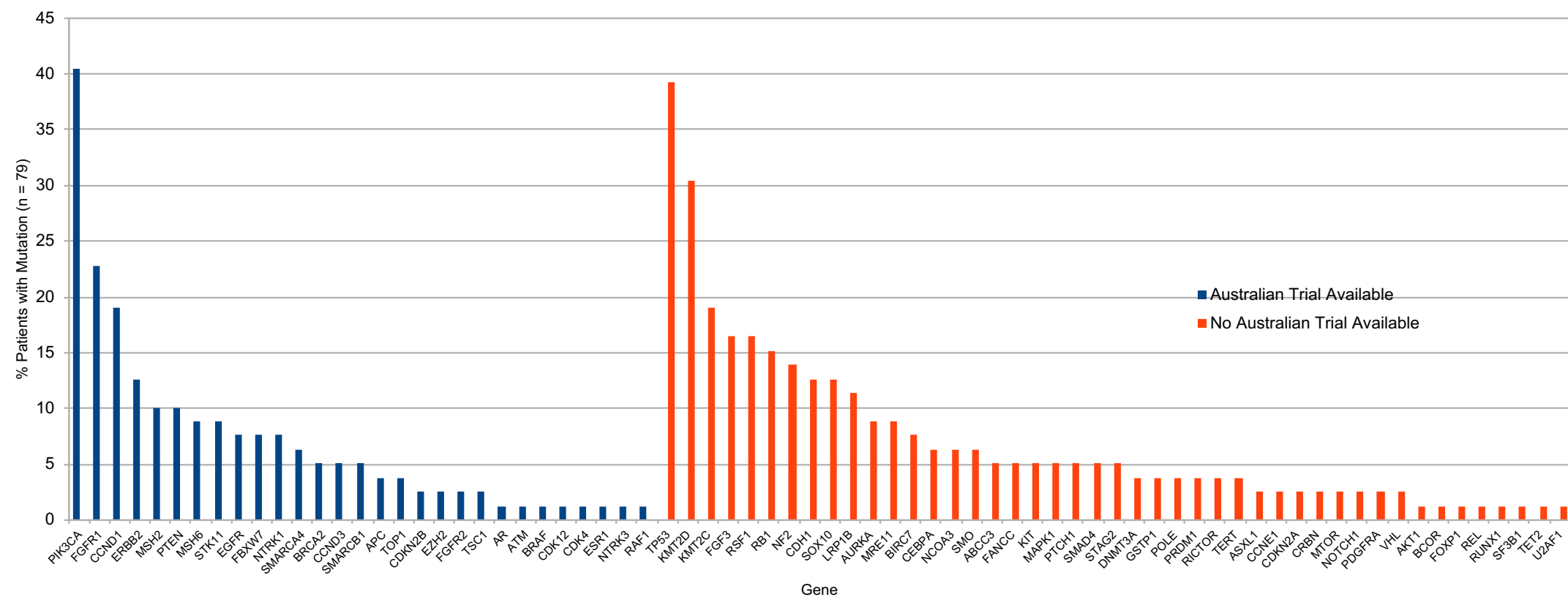
Matching at the gene mutation level

- What trials might capture the largest % of the cohort?
- What are the unmet needs?
- What genes are the most informative?
- Does the profile assist in directing to the most relevant clinical trial?

A clinical trial matching tool: *molecular match* was used to assign clinical trials based on molecular profiling reports:

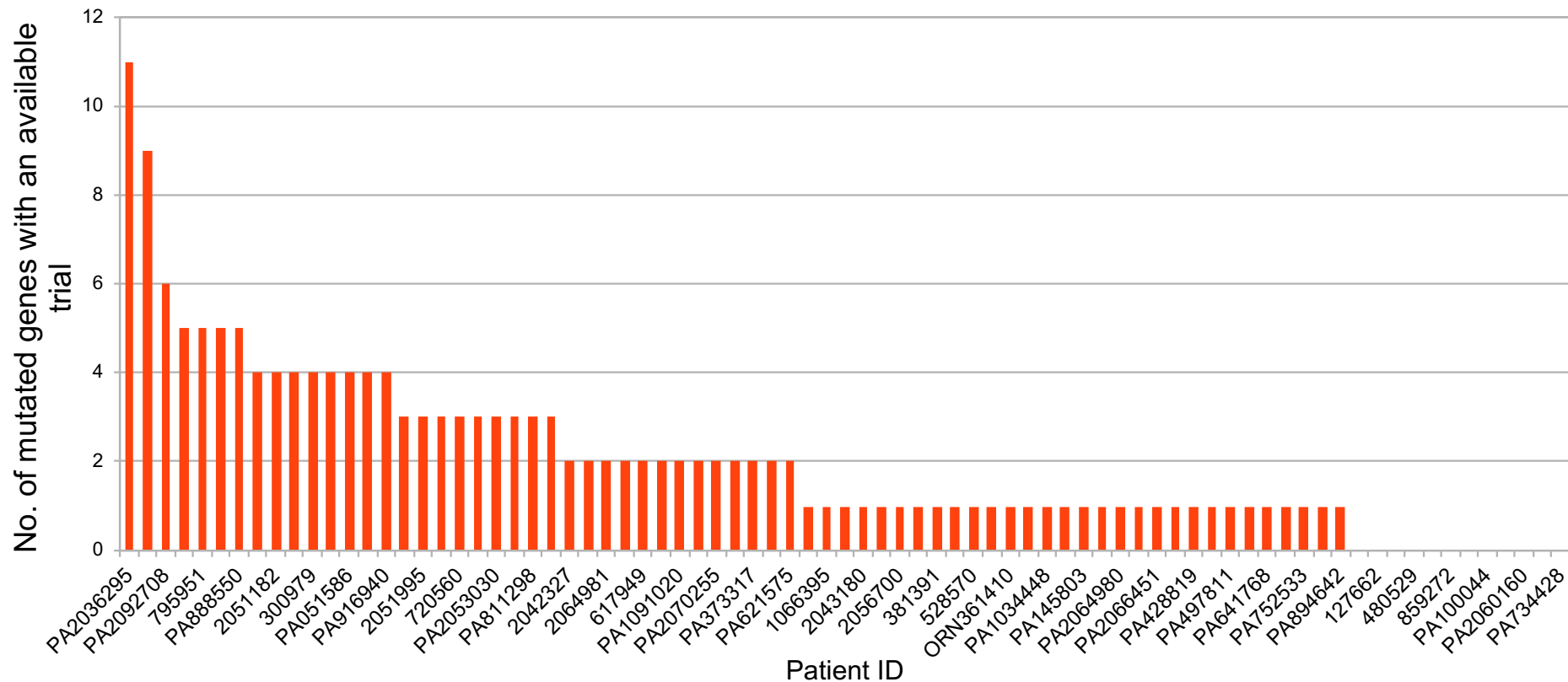
<https://app.molecularmatch.com>

By taking into account all mutations that might be informative for clinical trials we identify other genes /mutations in these patients:



85% patient had mutations which could potentially be linked to a clinical trial

- Some had >1 relevant mutation

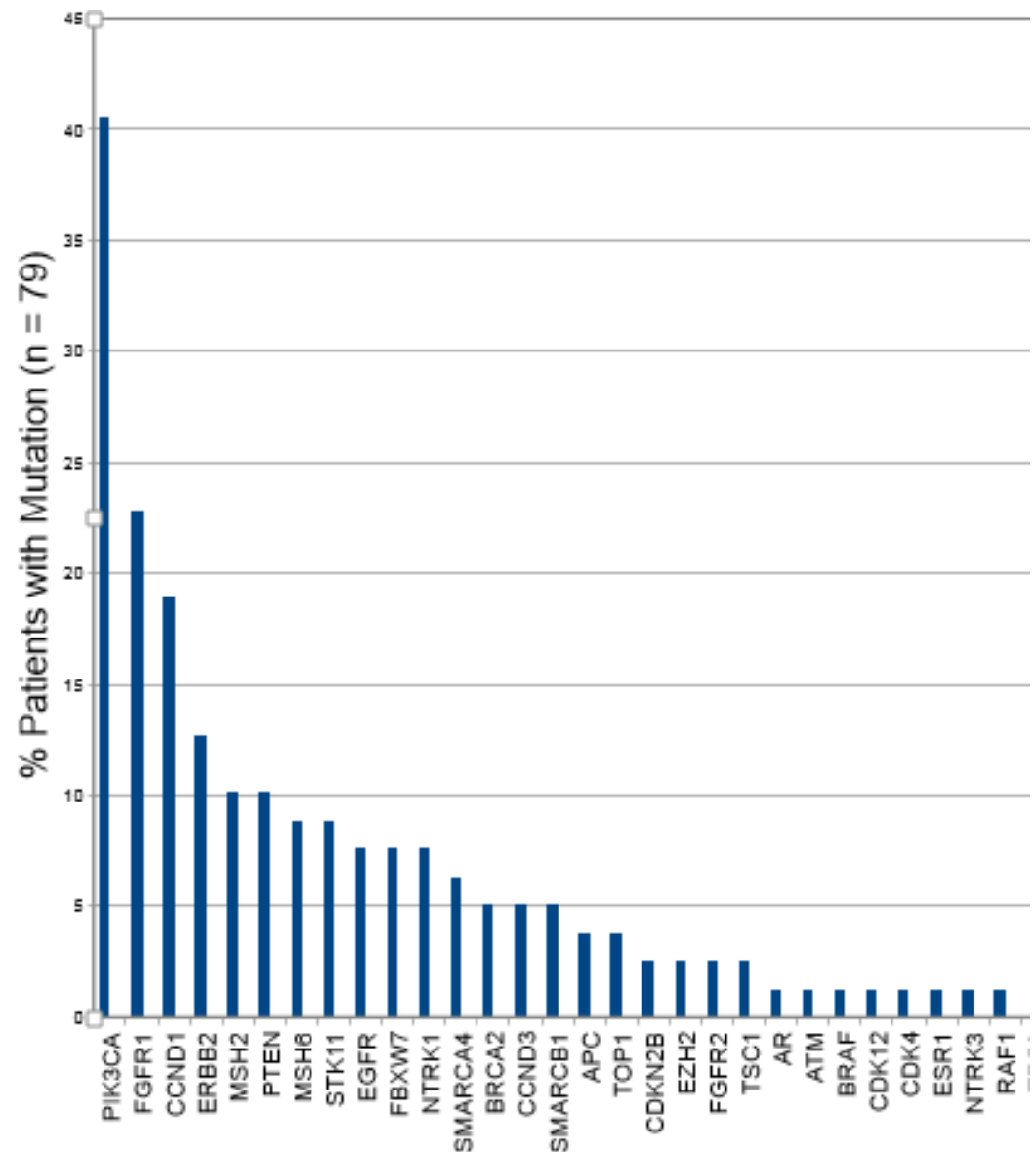


The improvement from 77% to 85% came from genes not typically reported for Breast Cancer . But are relevant to trials in metastatic cancer that are accessible to Breast Cancer Patients

Examples

FGFR1 : 22 patients

SMARCB1/EZH2 : 5 patients



Molecular Tumor Board

Suggested strategy: Discuss relevant trials using quick approach utilizing all variants in metastatic patients

Include those of well established clinical utility and those that match to clinical trials in metastatic cancers

UR: [REDACTED]

DOB: [REDACTED]

ER.PR.HER.2: 60%/60%/neg

T3N1M1 Grade 3 De novo Met

Gene	Mutation	Trial?	No Trails	Trials	Drugs
CCND1	6x	yes	2	NCT02107703, NCT03701334	Abemaciclib + Fulvestrant
CCNE1	23x	no	0		
FGF3	6x	no	0		
FGFR1	23x	yes	1	NCT02052778	TAS-120
PIK3CA	p.Glu545Lys	yes	1	NCT03337724	Ipatasertib, Paclitaxel
RSF1	7x	no	0		
TP53	p.Arg213Ter	no	0		

Clinical Trial Discussion:

PIK3CA.p.G545L:

NCT03337724 ; A Study of Ipatasertib in Combination With Paclitaxel as a Treatment for Participants With PIK3CA/AKT1/PTEN-Altered, Locally Advanced or Metastatic, Triple-Negative Breast Cancer or Hormone Receptor-Positive, HER2-Negative Breast Cancer (Phase 3 local)

CCND1 6x

NCT02107703 - A Study of Abemaciclib (LY2835219) Combined With Fulvestrant in Women With Hormone Receptor Positive HER2 Negative Breast Cancer (Phase 3 local)

NCT03701334 - A Trial to Evaluate Efficacy and Safety of Ribociclib With Endocrine Therapy as Adjuvant Treatment in Patients With HR+/HER2- Early Breast Cancer

NCT02052778 - A Study of TAS-120 in Patients With Advanced Solid Tumors

FGFR1 23x

NCT02052778 - A Study of TAS-120 in Patients With Advanced Solid Tumors (NSW only)