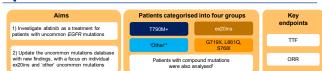
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- Around 7-23% of patients with EGFRm+NSCLC have tumours harbouring uncommon mutations (non-Del19/L858R): up to 25% of EGFRm+ tumours harbour compound mutations (>1 EGFR mutation)1
- · There is a lack of clinical data assessing the activity of EGFR TKIs in patients with NSCLC harbouring uncommon
- Increased use of NGS for mutation detection and plasma-based assays will increase identification of uncommon EGFR mutations in everyday clinical practice2
- Previously, we developed a database of 693 patients with NSCLC and uncommon EGFR mutations treated with afatinib in RCTs and real-world practice (https://www.uncommonegfrmutations.com). Here we provide an update of >1000 patients, with more data on specific mutations

EGFRm+, epidermal growth factor receptor mutation positive; NGS, next generation sequencing; NSCLC, non-small cell lung cancer; RCTs, randomised controlled

Methods

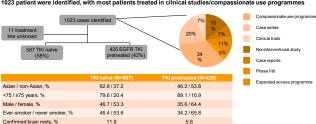


*Any mutation not represented in the other groups; †Defined as ≥2 mutations with at least one uncommon mutation ex20ins, exon 20 insertions; ORR, objective response rate; TTF, time to treatment failure

III Results

mets metastases

1023 patient were identified, with most patients treated in clinical studies/compassionate use programmes



Key findings and conclusions

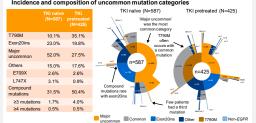
- Data are in line with previously published data
- Afatinib demonstrated strong activity against major uncommon, compound, and 'other' uncommon mutations
- Afatinib showed excellent activity against E709X and L747X mutations in TKI-naïve patients
- Afatinib demonstrated activity against certain exon 20 insertions at residues A763, M766, N771, and V769
- Afatinib showed activity against the osimertinib resistance mutations G724S, L718Q, L718V, and C797S



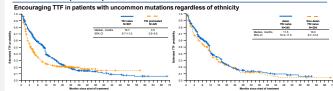
*Corresponding author email address: chihyang@ntu.edu.tw

III. Results (cont'd)

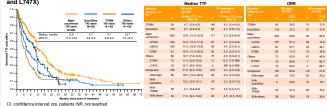
Incidence and composition of uncommon mutation categories



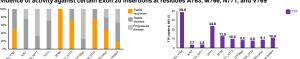
Results (cont'd)



TTF was also encouraging in patients with uncommon mutations, regardless of presence of brain metastasis; 8.2 months (95% CI; 5.5-12.6) Strong TTF and ORRs against major uncommon, compound and 'other' uncommon mutations (including E790X and L747X)



Evidence of activity against certain Exon 20 insertions at residues A763, M766, N771, and V769



Evidence of activity against osimertinib resistance mechanisms

Patients with known osimertinib resistance mutations



*Two patients received afatinib combined with osimertinib ORR, overall response rate: DCR, disease control rate

36%

Evidence of activity of afatinib after osimertinib

osimertinib ORR was 36% and DCR was 1009

In the 15 pts who received afatinib after

References

Yang JC. et al. J Thorac Oncol 2020:15:803–15: 2. Kobayashi Y & Mitsudomi T. Cancer Sci 2016:107:1179–86