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Cracking the Code – The Essential Role of *EGFR* Testing

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Dr. Cho:
Welcome, everyone. My name is Byoung Chul Cho. Here today we have Dr. Leighl and Dr. Kerr.

So I have a question to Dr. Kerr. Can you start with a review of the role of EGFR testing in NSCLC?

Dr. Kerr:
Thank you, Dr. Cho. Our EGFR testing strategy in non-small cell lung cancer generally occurs in the context of a broader molecular profiling of patients' tumors to identify quite a large number of molecular alterations that may be targeted. We know very well that targeting these alterations in patients who have these driver mutations leads to much better clinical outcomes. So there is a survival benefit and a benefit, therefore, for the patient in identifying the correct patients and getting the correct drugs to those patients.

One of the most commonly found alterations in our patients with non-small cell lung cancer is, of course, the family of EGFR mutations, which is a very broad and complex family of alterations which behave clinically and biologically rather differently. And they have different implications, both in terms of biology but also in terms of response to therapy in our patients. It's therefore very important when we're testing our patients for EGFR mutations, that we cover all of the possible alterations that may be present in our patients.

This testing strategy therefore requires us to be quick and early in with our testing so that we can get the results back for our patients as quickly as possible. And the breadth of testing now is beginning to evolve, at least in a research sense, to those co-occurring mutations that may actually alter the response to particular drugs for patients who have an EGFR mutation.

So it's a complex business, but it's definitely for the benefit of our patients to identify targets that we can treat.

Dr. Leighl:
And I think just from my perspective, just adding to what Dr. Kerr has talked about, I think it's so important, too, wherever you are, that the team you work with and your pathologists have a system. Now we test from stage I to stage IV, and it's so important to get those answers as fast as possible. And I think in many places still, for example, in Asia, you may have some triage testing, where you test for EGFR first and then move on to NGS. But I think we really want the answers for all of our patients as quickly as possible. So, so important to make sure that you work closely with your pathologist, that you have reflex testing across all stages.

Dr. Cho:
So same here. So in Asian regions, EGFR mutation is the most common genomic alteration in lung adenocarcinoma. So diagnosing EGFR-mutant lung cancer is really important, and we do EGFR-mutant testing as a reflex test across all stages of lung adenocarcinoma. Because we have very effective treatment options such as osimertinib and lazertinib–amivantamab combination or osimertinib–chemo combination these days. And diagnosis and identifying EGFR mutation, for example, particularly in stage IV lung cancer setting, is really

important to manage these patients effectively and quickly.

Well, this has been a great review and our time is up. Thank you for listening.

Announcer:
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