

# LUNG-MAP

A lung cancer precision medicine trial

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NEWSLETTER

WWW.LUNG-MAP.ORG

## Lung-MAP 3.0: A Pragmatic Approach to Genomic Screening

**LUNGMAP protocol revision #9 is live, with a major expansion of genomic screening options that marks the third generation of Lung-MAP: Lung-MAP 3.0.**

This means you can now submit tissue test results from almost any CLIA-certified next-generation sequencing (NGS) platform that is sufficiently broad ( $\geq 150$  markers) to have your patient assigned to a Lung-MAP treatment sub-study at disease progression.

You can find the list of allowable testing platforms – now at more than 40 tests, from both commercial and academic labs – linked from [swog.org/lung-map-resources](http://swog.org/lung-map-resources). Several blood-based tests that are approved for Lung-MAP screening are also identified.

The vast majority of NGS tests now used with these patients are already listed. And more will be added regularly.

We've also developed a process for rapid review and approval of new assays, so you can email us at [LungMAPNGS@swog.org](mailto:LungMAPNGS@swog.org) and get an answer *in real time* (usually within a day) about whether your patient's results from *assay X* can be used to assign them to a Lung-MAP sub-study.

On-study genomic screening using the Foundation Medicine platform remains available, and at no cost to your patients, either as pre-screening or at the time of disease progression.

The Lung-MAP 3.0 approach makes the trial more pragmatic – you can have your patients screened for Lung-MAP using the NGS platforms you and your patients already use (note that some sub-studies may have more specific testing requirements).

When your patient with NSCLC has disease progression, or when their NGS results show a rare subtype, think Lung-MAP.

## S1900J is Open: Subcutaneous Amivantamab in NSCLC with MET Amplification

S1900J activated earlier this fall! This biomarker sub-study is enrolling patients with MET amplification in stage IV or recurrent non-small cell lung cancer (NSCLC). Patients must not have other actionable oncogenic alterations and must not have been treated previously with a MET tyrosine kinase inhibitor.

All participants on S1900J are treated with subcutaneous amivantamab, a bispecific antibody targeting both EGFR and MET. This is one of the first non-industry sponsored studies of amivantamab given subcutaneously. Subcutaneous administration should take less time than intravenous, a benefit for both patients and sites.

S1900J is looking to enroll 88 participants, who will be stratified into squamous cell and non-squamous cell cohorts. The trial is also banking circulating tumor DNA (ctDNA) starting at baseline, to evaluate next-generation sequencing using ctDNA.

Drs. Shirish Gadgeel and Christian Rolfo are leading the S1900J sub-study, with biostatistical leadership by Dr. Mary Redman and Katherine Minichiello, MS.

Because MET amplification is a particularly complicated biomarker, only a subset of the Lung-MAP-

**LUNG-MAP**  
LUNGMAP NGS Testing Reference Page  
Approved Commercial and Academic Laboratories  
As of 11/22/2024

Approved tissue-based NGS testing laboratories include:

Commercial Laboratories:

- BostonGene (Tumor Portrait Test)
- Caris Life Sciences (MI Tumor Seek Hybrid)
- Exact Sciences, Inc. (OncoExTra)
- Foundation Medicine (FoundationOne CDx)
- Genomic Testing Cooperative (Solid Tumor Profile)
- Myriad Genetics (Precise Tumor)
- NeoGenomics Laboratories (Neo Comprehensive – Solid Tumor)
- PathGroup (SmartGenomics Complete)
- Quest Diagnostics Inc. (Solid Tumor Expanded Panel)
- sParagon Diagnostic Informatics (sParagon, Comprehensive NGS)
- Strata Oncology (Strata Select)
- Tempus (xT Solid Tumor)
- The Jackson Laboratory (SOMASEQ)

Academic Laboratories:

- Augusta University
- Brigham and Women's Hospital
- Cedars-Sinai Medical Center
- Children's Hospital of Philadelphia
- City of Hope National Medical Center
- Columbia University
- Dana-Farber Cancer Institute
- Fox Chase Cancer Center
- Frederick National Laboratory for Cancer Research
- Johns Hopkins Genomics
- Knight Diagnostic Laboratories at Oregon Health & Science University
- Massachusetts General Hospital
- Memorial Sloan-Kettering Cancer Center
- Moffitt Cancer Center
- National Cancer Institute – Laboratory of Pathology
- Providence Genomics
- Stanford Health Care
- Texas Children's Hospital
- The University of Texas MD Anderson Cancer Center
- University of California San Francisco
- University of Chicago
- University of Colorado
- University of Illinois Chicago
- University of Michigan
- University of Washington
- Weill Cornell Medicine
- Yale University

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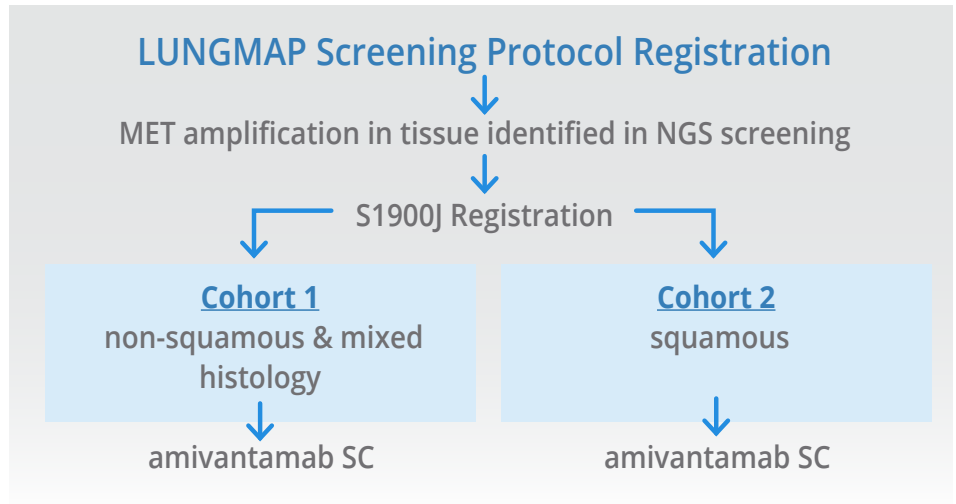
LEARN MORE AT [WWW.LUNG-MAP.ORG](http://WWW.LUNG-MAP.ORG)



**S1900J** FROM PAGE 1

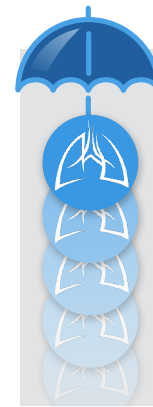
accepted NGS assays will be accepted for assigning patients to S1900J. Consult the Lung-MAP Sub-Studies Reference Table linked from [swog.org/lung-map-resources](http://swog.org/lung-map-resources) for the current list of allowable assays for this sub-study.

Finally, when presenting S1900J to patients, hand them a copy of the sub-study's patient-friendly trial summary, online and in PDF format at [swog.org/S1900J](http://swog.org/S1900J).



**Lung-MAP is an umbrella trial for patients with advanced NSCLC with rare alterations and molecular subtypes. It works best when sites offer Lung-MAP's full suite of biomarker sub-studies to these patients!**

- **S1900E:** for NSCLC with a KRAS<sup>G12C</sup> gene mutation:
  - Cohort 1 (co-mutation with TP53) – FULL and closed to accrual
  - Cohort 2 (co-mutation with STK11) – FULL and closed to accrual
  - Cohort 3 (all other co-mutations, or no co-mutation) – OPEN (expected to close soon)
- **S1900G:** for NSCLC with an EGFR mutation and with MET amplification *at progression*
- **S1900J:** for NSCLC with MET amplification
- **S1900K:** for NSCLC with a MET exon 14-skipping gene change
- **S1800E:** *our next non-match sub-study – standard of care plus or minus an anti-PD1 antibody – will open very soon!*



Find the complete Lung-MAP Sub-Studies Reference Table, the growing list of approved NGS-based tests, and much more at [swog.org/lung-map-resources](http://swog.org/lung-map-resources).

**S1900G EDUCATIONAL WEBINAR – FEB 5, 2025, 12-1 PM CT**

**“Optimizing Care for Patients with EGFR-Mutant Lung Cancer: A Focus on S1900G and EA5182”**

Register at <https://swog.webex.com/weblink/register/rd0cd0ef47ec0cc52afc085d1dd5b652b>

## How Do I Read an NGS Results Report?

To request Lung-MAP sub-study assignment for a patient based on previous NGS test results, you must complete the LUNGMAP Genomic Alterations Form in Rave. This form asks you to consult the patient's results report and record its findings on two dozen specific genomic alterations – present or absent.

To help you quickly find this information in these reports, the Lung-MAP team is developing guides for the most common NGS platforms. Each guide lists where results for each alteration can be found in the given report, followed by an annotated sample of that report.

The guides are available at [swog.org/lung-map-resources](http://swog.org/lung-map-resources), in the **LUNGMAP NGS Test Guides and Sample Reports** section. New guides will be added regularly.

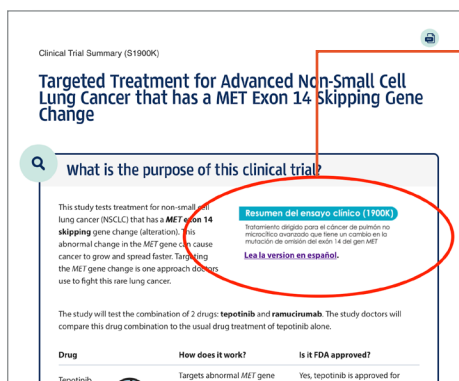
oncoExtra™				EXACT SCIENCES		
Patient: Sample Patient				Reporting Physician: Sample Physician		
Sex at Birth: Female				Ordering Physician: Sample Physician		
DOB: MM/DD/YYYY				Sample Physician: Sample Physician		
Medical Record #: MR 000000				Sample Physician: Sample Physician		
Client Accession #: CA 000000				Sample Physician: Sample Physician		
Ordering Physician: Sample Physician				Sample Physician: Sample Physician		
Specimen Type: FFPE Block				Sample Physician: Sample Physician		
Specimen Site: Lung				Sample Physician: Sample Physician		
Tumor Collection Date: MM/DD/YYYY				Sample Physician: Sample Physician		
Normal Collection Date: MM/DD/YYYY				Sample Physician: Sample Physician		
Received Date: MM/DD/YYYY				Sample Physician: Sample Physician		
Results Snapshot				Results Snapshot		
Analysis sequenced: DNA+RNA+HC				Results Snapshot		
Activatable Targets: 5				Results Snapshot		
IHC Based: 1				Results Snapshot		
TMB: Intermediate				Results Snapshot		
PD-L1: See Below				Results Snapshot		
MSI: Stable				Results Snapshot		
Clinical Trials: Yes				Results Snapshot		
Diagnosis: Lung Cancer						
KEY BIOMARKER FINDINGS						
KEY BIOMARKERS	FDA-APPROVED DRUGS -for patient's cancer*	FDA-APPROVED DRUGS -for another cancer*	DRUGS PREDICTED NON-BENEFICIAL/ REDUCED BENEFIT	POTENTIAL CLINICAL TRIALS		
TUMOR GENOMIC ALTERATIONS						
ARID1A (S2249*)				Yes		
CD74/ROS1 (Fusion)	crizotinib, entrectinib	cabozantinib, ceritinib, lorlatinib		Yes		
NF1 (Q369*)		binimetinib, everolimus, temsirolimus, trametinib		Yes		
TP53 (I98T)				Yes		
TUMOR MUTATION BURDEN (TMB)						
INTERMEDIATE (8 mut/Mb)				No		
MICROSATELLITE STATUS (MSI)						
STABLE				No		
IHC RESULTS						
PD-L1 (22C3): Low	atezolizumab, durvalumab, nivolumab + ipilimumab, pembrolizumab		dostarlimab-gly			
HIGH INTEREST BIOMARKERS						

As part of the OncoExtra test, key biomarkers relevant to the patient's tumor type have been assessed: NTRK1, NTRK2.

# Lung-MAP Patient-Friendly Summaries: ¡En Español!

Spanish-language versions of patient-friendly summaries are now available for all Lung-MAP sub-studies. These are prominently linked from the English-language versions:

- [swog.org/S1900E](http://swog.org/S1900E)
- [swog.org/S1900G](http://swog.org/S1900G)
- [swog.org/S1900J](http://swog.org/S1900J)
- [swog.org/S1900K](http://swog.org/S1900K)
- [swog.org/S1800E](http://swog.org/S1800E) (soon!)



Clinical Trial Summary (S1900K)  
**Targeted Treatment for Advanced Non-Small Cell Lung Cancer that has a MET Exon 14 Skipping Gene Change**

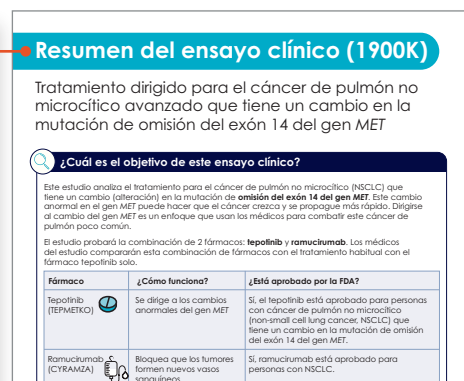
What is the purpose of this clinical trial?

This study tests treatment for non-small cell lung cancer (NSCLC) that has a **MET exon 14 skipping gene change (alteration)**. This abnormal change in the MET gene can cause cancer to grow and spread faster. Targeting the MET gene change is one approach doctors use to fight this rare lung cancer.

**Resumen del ensayo clínico (1900K)**  
Tratamiento dirigido para el cáncer de pulmón no microcítico avanzado que tiene un cambio en la mutación de omisión del exón 14 del gen MET.  
[Lea la versión en español.](#)

The study will test the combination of 2 drugs: **tepotinib** and **ramucicicmab**. The study doctors will compare this drug combination to the usual drug treatment of tepotinib alone.

Drug	How does it work?	Is it FDA approved?
Tepotinib	Targets abnormal MET gene	Yes, tepotinib is approved for



**Resumen del ensayo clínico (1900K)**

Tratamiento dirigido para el cáncer de pulmón no microcítico avanzado que tiene un cambio en la mutación de omisión del exón 14 del gen MET

¿Cuál es el objetivo de este ensayo clínico?

Este estudio analiza el tratamiento para el cáncer de pulmón no microcítico (NSCLC) que tiene un cambio (alteración) en la mutación de omisión del exón 14 del gen MET. Este cambio anómalo en el gen MET puede hacer que el cáncer crezca y se propague más rápido. Diríjase al cambio del gen MET es un enfoque que usan los médicos para combatir este cáncer de pulmón poco común.


El estudio probará la combinación de 2 fármacos: **tepotinib** y **ramucicmab**. Los médicos del estudio compararán esta combinación de fármacos con el tratamiento habitual con el fármaco tepotinib solo.

Fármaco	¿Cómo funciona?	¿Está aprobado por la FDA?
Tepotinib (TEPNETKO)	Se dirige a los cambios anómalo del gen MET	Si, el tepotinib está aprobado para personas con cáncer de pulmón no microcítico (non-small cell lung cancer, NSCLC) que tiene un cambio en la mutación de omisión del exón 14 del gen MET.
Ramucicmab (CYRAMZA)	Bloqueo que los tumores formen nuevos vasos sanguíneos	Si, ramucicmab está aprobado para personas con NSCLC.

## TOP-ACCRUING SITES TO LUNGMAP\*

UPMC Hillman Cancer Center	Pittsburgh, PA	154
Edwards Comprehensive Cancer Center	Huntington, WV	80
UNM Comprehensive Cancer Center	Albuquerque, NM	74
Wilmot Cancer Institute Univ of Rochester	Rochester, NY	60
Palo Alto Medical Foundation – Sunnyvale	Sunnyvale, CA	54
Missouri Baptist Medical Center	St. Louis, MO	51
Harold Alfond Center for Cancer Care	Augusta, ME	51
Cleveland Clinic Mercy Medical Center	Canton, OH	49
VA Connecticut Healthcare System – West Haven	West Haven, CT	40
Dartmouth Hitchcock Med Ctr/Dartmouth Cancer Ctr	Lebanon, NH	39
Eastern Maine Medical Center Cancer Care	Brewer, ME	39
Baystate Medical Center	Springfield, MA	38
UC Davis Comprehensive Cancer Center	Sacramento, CA	37
AnMed Health Cancer Center	Anderson, SC	37

\* As of December 12, 2024



**AS OF DECEMBER 12, 2024, THE NEW LUNGMAP PROTOCOL HAS LOGGED:**

**3,541**  
screening registrations

**1,755**  
sub-study assignments

**493**  
sub-study registrations

## CONTACT US

**Request Review of New NGS Test**  
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**Protocol & Regulatory Questions**  
[jbeeler@swog.org](mailto:jbeeler@swog.org)

**Eligibility & Data Submission Questions**  
[LUNGMAPQuestion@crab.org](mailto:LUNGMAPQuestion@crab.org)

**Central Monitoring Questions**  
[centralmonitorquestion@crab.org](mailto:centralmonitorquestion@crab.org)

**Quality Assurance Auditing Questions**  
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**Funding Questions**  
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**S1900G Study Chairs**  
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**S1900J Study Chairs**  
[S1900JMedicalQuery@swog.org](mailto:S1900JMedicalQuery@swog.org)

**S1900K Study Chairs**  
[S1900KMedicalQuery@swog.org](mailto:S1900KMedicalQuery@swog.org)

The latest list of acceptable NGS tests for Lung-MAP screening is at [swog.org/lung-map-resources](http://swog.org/lung-map-resources). Click on "LUNGMAP NGS Testing Reference Page."