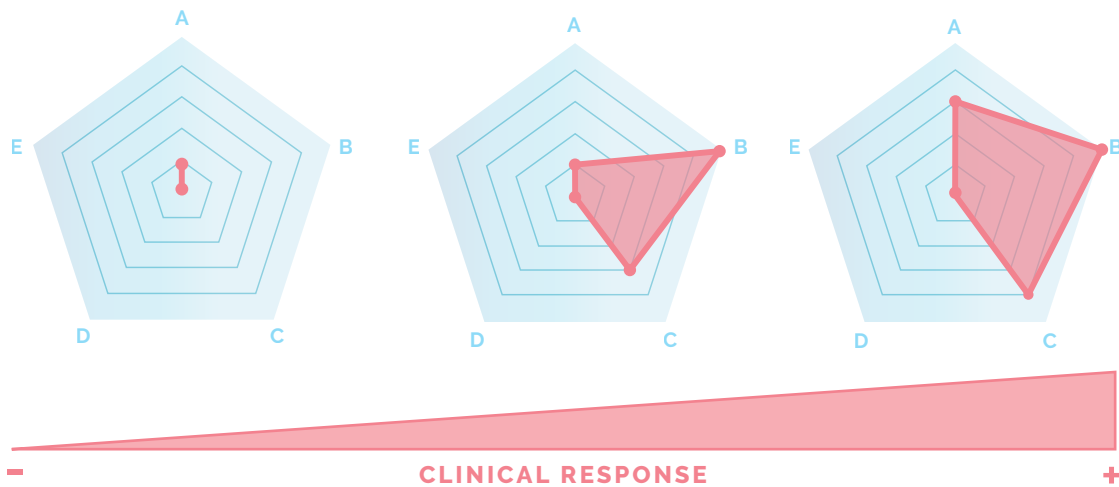


## Choose the best therapy for Head and Neck Cancer

### PERSONALIZED IMMUNOGRAM



#### **A** *MSI high (FDA) / About 5% of Head and Neck Cancer*

For patients with metastatic Head and Neck cancer that have progressed following prior treatment and who have no satisfactory alternative treatment options.

#### **B** *TMB (Tumor Mutational Burden; ASCO 2017) / 15% of TMB are MSI-*

Overall, TMB has been shown to be a predictive biomarker for immunotherapy. High, intermediate, and low TMB were defined as  $\geq 20$  mut/Mb,  $\geq 6$  and  $< 20$  mut/Mb, or  $< 6$  mut/Mb, respectively. It has been reported that a minimum of 1.1 Mb of coding genome can accurately assess this TMB compared with sequencing of the whole exome.

#### **C** *PD-L1 (%) (FDA)*

For patients with locally advanced or metastatic Head and Neck cancer that have progressed following prior treatment and who have no satisfactory alternative treatment options.

#### **D** *CD8 T cell infiltrate (ASCO 2017)*

Tumor infiltrating T lymphocytes CD8+.

#### **E** *Resistances (ASCO 2017)*

Mutations in JAK1, JAK2, POLE, STK11, PD-L1, higher number of CNVs have been associated with resistance to immunotherapy.