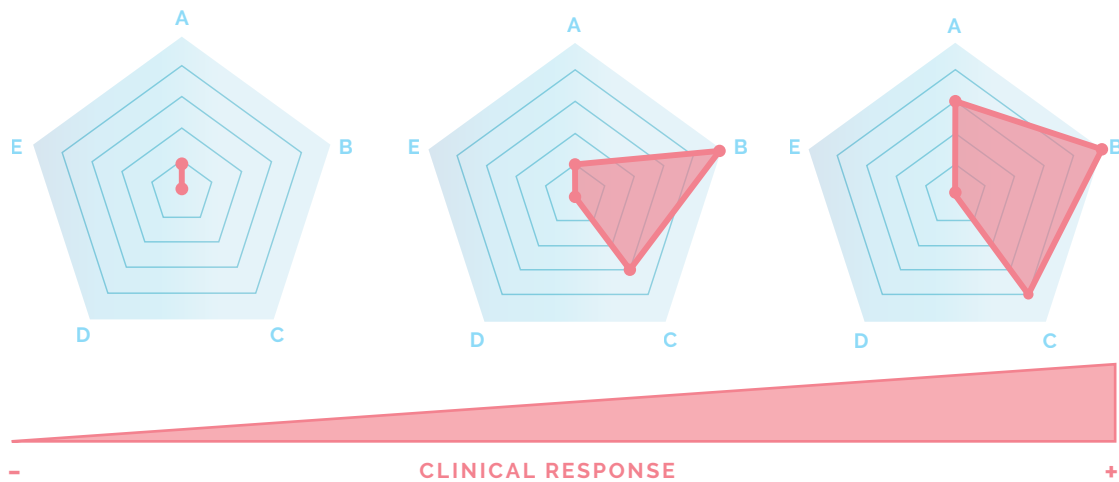


# Choose the best therapy for Melanoma

## PERSONALIZED IMMUNOGRAM



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

An approved biomarker in NSCLC. But in metastatic melanoma, the predictive value of PD-L1 is still under research, as a definite role has been limited by the expression assays and the cutoffs used in the different studies. And although studies support a predictive role of PD-L1 expression, some melanoma patients with PD-L1 negative have achieved durable response.

**APPROVED BIOMARKER IN OTHER CANCERS, BUT SOLO NOT ENOUGH, ITS EXPRESSION LEVEL VERY DYNAMIC AND SENSITIVE TO TUMOR HETEROGENEITY**

### 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.

**NOT ENOUGH SINCE TUMOR MIGHT CARRY SOME MUTATIONS OF RESISTANCE OR MIGHT NOT HAVE THE RIGHT ENVIRONMENT FOR A GOOD IMMUNE RESPONSE**

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

Studies have shown that in melanoma, increased numbers of tumour-infiltrating CD8+ T-lymphocytes are associated with better clinical outcome.

**SOLO NOT ENOUGH SINCE LIKE THE EXPRESSION OF PD-L1, IT IS HIGHLY DYNAMIC AND SENSITIVE TO HETEROGENEITY**

### D **MSI high (FDA)**

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

**APPROVED BUT RARE IN MELANOMA (MOST ARE LOW-FREQUENCY MSI)**

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

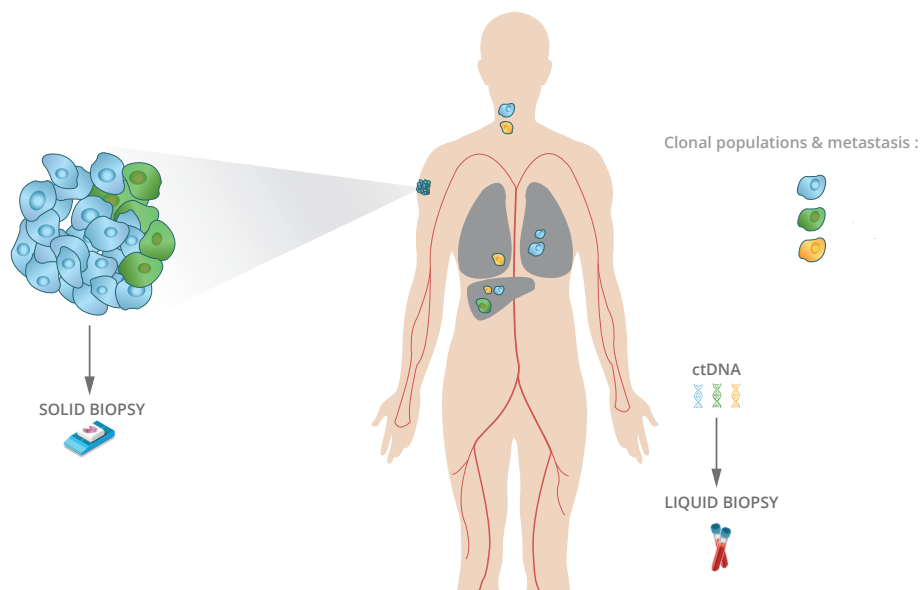
Mutations in JAK1, JAK2, POLE, STK11, PD-L1, higher number of CNVs, MET-ex14 have been associated with resistance to immunotherapy.

## TARGETED THERAPY

	 FDA APPROVED	 OFF-LABEL (FDA APPROVED FOR OTHER)	 IN DEVELOPMENT (ONGOING CLINICAL TRIALS)
BRAF mutations + transloc	✓		✓
NRAS mutations	✓		✓
GNAQ/ GNA11 / NF1 mutations	✓		✓
c-KIT mutations + CNV		✓	✓
ErbBs mutations + CNV		✓	✓
PI3K pathway mutations + CNV		✓	✓
CDK pathway mutations + CNV		✓	✓
NTRKs translocations			✓
CSF1R mutations			✓
AKT1 mutations			✓
TERT expression			✓

## BLOOD

Improve the assessment of cancer heterogeneity by combining Solid and Liquid Biopsy



## KEY FACT

On June 23<sup>rd</sup> 2017, the FDA approved the first NGS companion diagnostic that screens for multiple drugs. This test is using the OncoMINE® Dx Target panel and the Ion Torrent technology. Since the beginning we have bet on Ion Torrent technology for our Onco solutions and our **OncoSTRAT&GO®** has been built based on the design of the OncoMINE® comprehensive panel that we improved by adding key regions or genes needed to increase treatment's options for the patients.