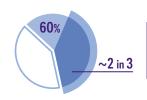
BIOMARKER TESTING CAN HELP OPTIMIZE TREATMENT OF mNSCLC

IT IS IMPORTANT TO WAIT FOR ALL BIOMARKER TEST RESULTS— IN ADDITION TO PD-L1—PRIOR TO INITIATING FIRST-LINE THERAPY



More than 60% of all non-squamous mNSCLC patients have oncogenic drivers—and of these patients, about 2 in 3 have an actionable biomarker. 1-5*



Targeted therapies may lead to better outcomes in patients with actionable biomarkers.⁶⁻⁹

- Conversely, some biomarker-driven cancers may respond poorly to less-targeted options like immunotherapy (IO)—these patients are often excluded from IO clinical trials^{10,11}
- Starting patients on IO and switching to a targeted therapy may lead to increased risk for immune-related adverse events^{12,13}



Across all PD-L1 expression levels, the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) recommend patients are **negative for actionable molecular markers before utilizing IO** as a first-line treatment option for mNSCLC.^{14†}

See the NCCN Guidelines® for NSCLC for detailed recommendations, including preferred treatment options. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

[†]The NCCN Guidelines[®] for NSCLC provide recommendations for certain individual biomarkers that should be tested and recommend testing techniques, but do not endorse any specific commercially available biomarker assays or commercial laboratories.

mNSCLC=metastatic non-small cell lung cancer; NCCN®=National Comprehensive Cancer Network®; PD-L1=programmed death-ligand 1.

^{*}Regardless of PD-L1 expression.

UNDERSTANDING THE BENEFIT OF COMPREHENSIVE BIOMARKER TESTING

By using a broad panel-based approach, like next-generation sequencing (NGS), you could improve the overall patient experience and make biomarker testing more efficient versus sequential single-gene testing¹⁵:



Account for multiple biomarkers with one test



Fewer rebiopsies and complications



Shorter time-to-test results



Lower costs to healthcare system

NCCN Guidelines® recommendations for biomarker testing in NSCLC14

The NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) recommend:

Molecular testing be performed (when feasible) via a broad panel-based approach, typically by NGS, for patients with mNSCLC.

Upfront PD-L1 expression testing before first-line therapy in patients with mNSCLC.

 $mNSCLC = metastatic \ non-small \ cell \ lung \ cancer; \ NCCN^@=National \ Comprehensive \ Cancer \ Network^@; \ PD-L1 = programmed \ death-ligand \ 1.$

Want to learn more?

Go to <u>biomarkertesting.com/contact</u> to reach out to your local representative.

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