

Histology independent indications in oncology

The BRAF Story

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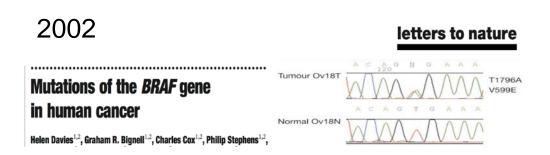


- Introduction
 - the discovery
- Case study in BRAF mutant melanoma
 - heterogeneity within the tumour
 - variability over time
- Heterogeneity between histo/organs
 - VE-BASKET and beyond

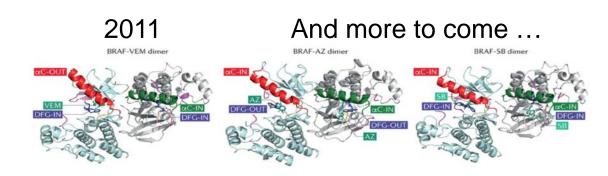
Discovery of BRAF V600 mutation



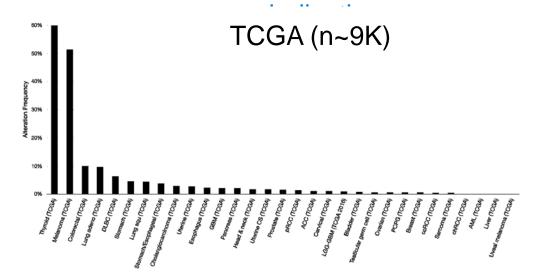
Oncogenic mutations

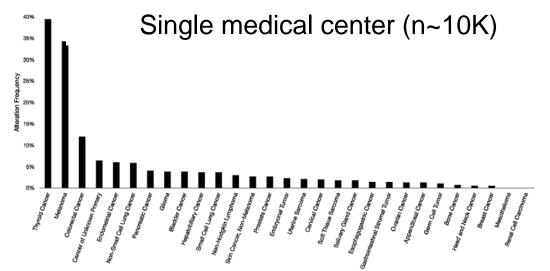


Oncogenic mutation specific drugs



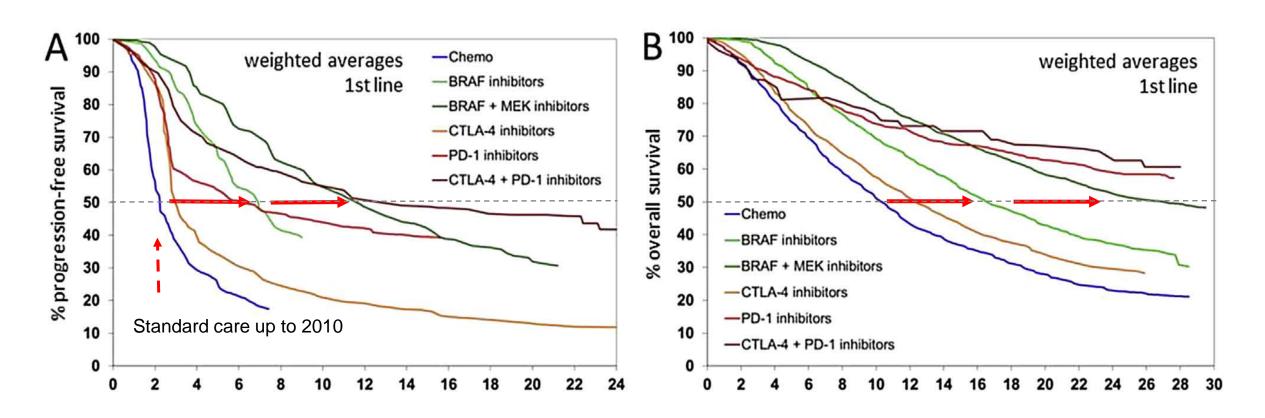
BRAF V600 mutations across oncology





Introduction of BRAF inhibition improved survival of melanoma patients (tale of tails...)

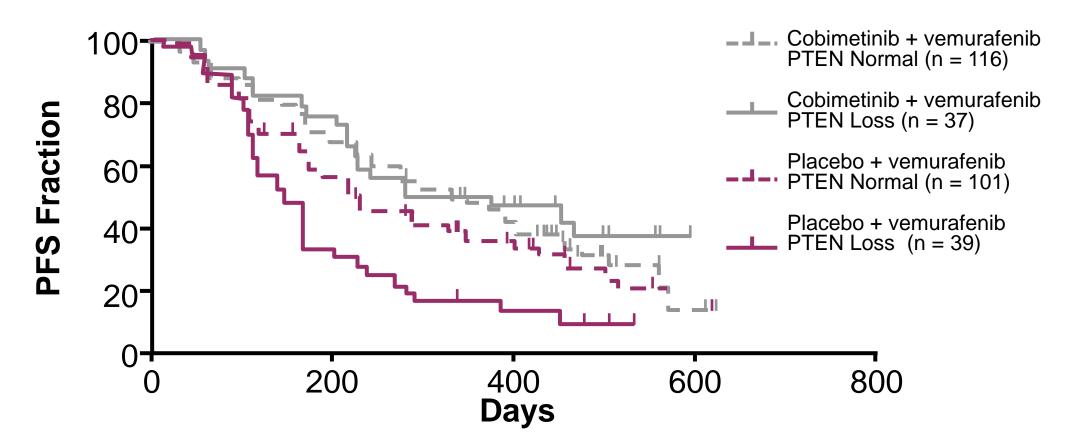




Mean survival curves (A: PFS; B: OS) by weighted averaging of Kaplan-Meier curves of first line melanoma patients treated in clinical trials.



BRAF Inhibition - heterogeneity of tumour genetic alterations



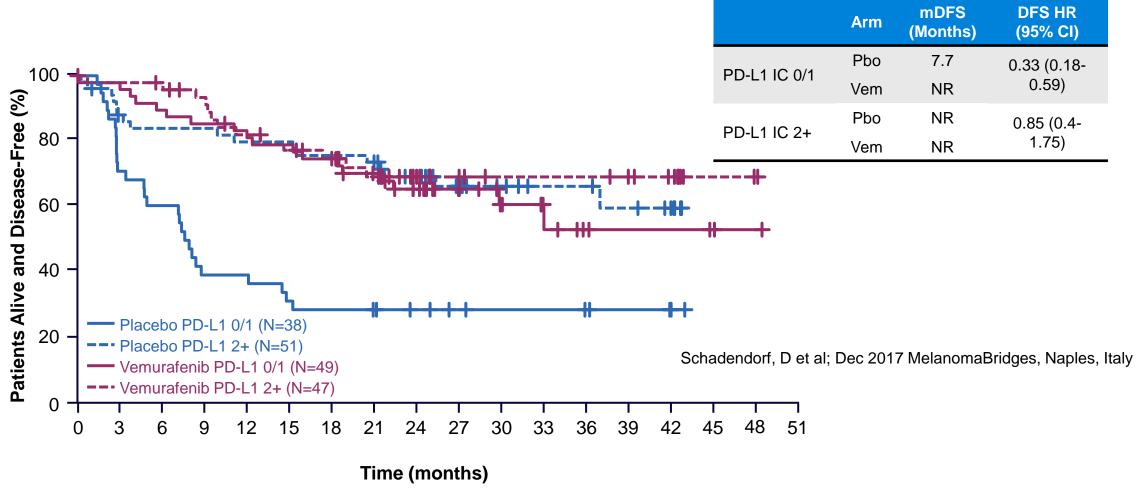
PTEN loss affected PFS and OS in patients treated with BRAFi, not MEKi + BRAFi (From retrospective exploratory analysis of CoBRIM)



BRAF Inhibition - heterogeneity of tumour immune

contextures

Adjuvant vemurafenib improved DFS in patients with melanoma expressing low PD-L1 (From retrospective exploratory analysis of BRIM8)

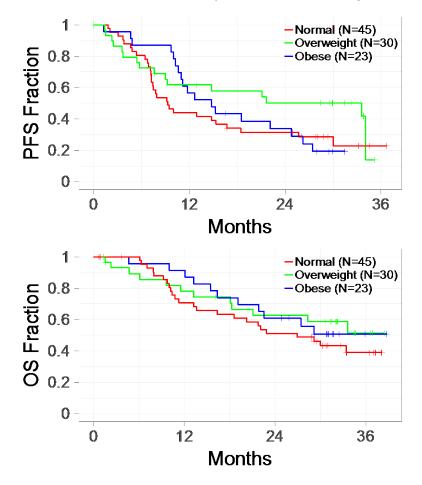




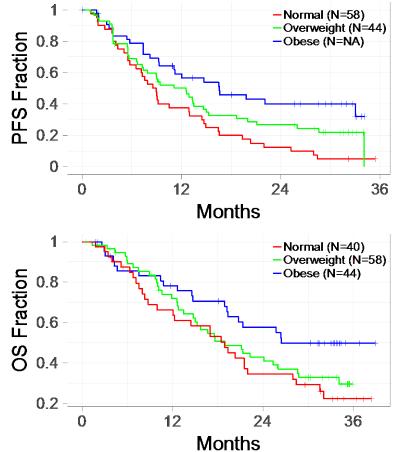
BRAF Inhibition – heterogeneity in host metabolic profiles

Influence of BMI on BRAF inhibitor sensitivity (From retrospective exploratory analysis of CoBRIM)

female





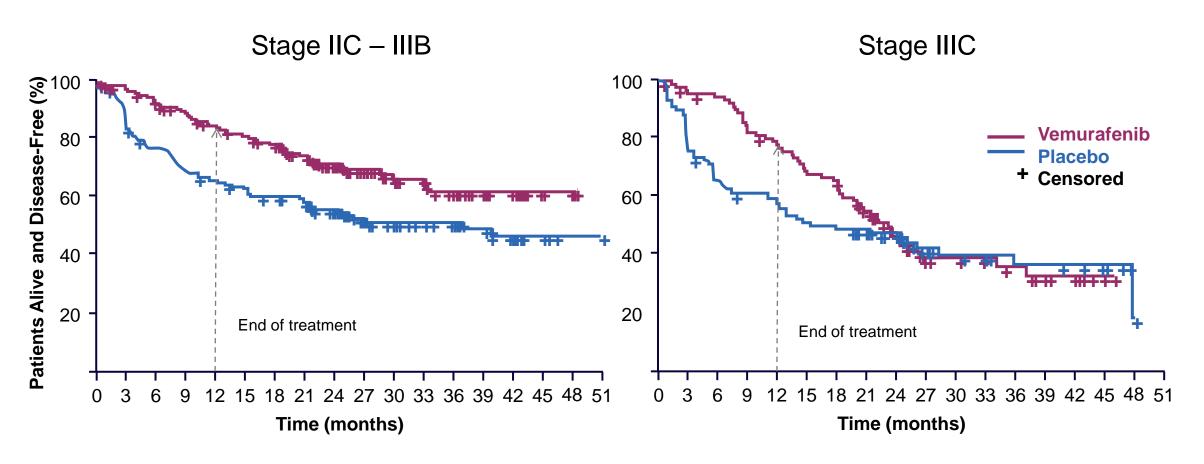




BRAF Inhibition - variability over time



Time = progressive disease stages



DFS of patients after one year adjuvant vemurafenib treatment in different disease stages
(BRIM8)

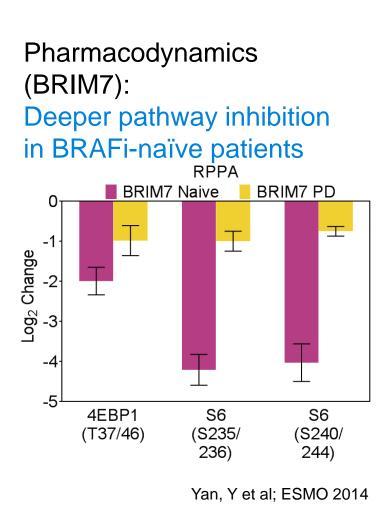
Karl Lewis et al, ESMO 2017

DFS, disease-free survival;

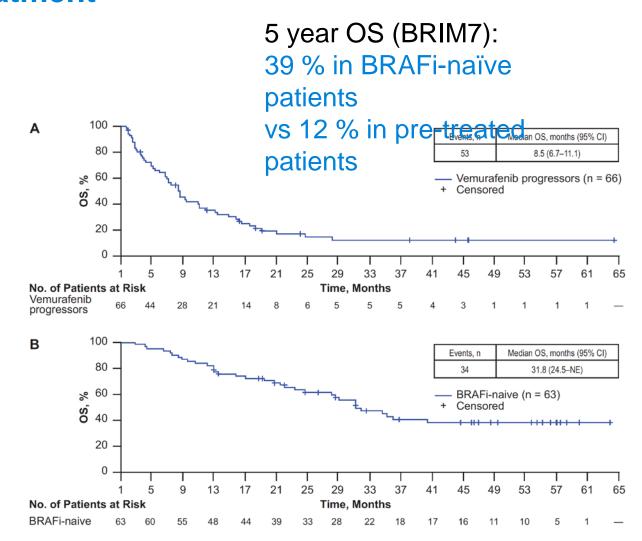
BRAF Inhibition - variability over time



Time = successive lines of treatment



PD, vemurafenib progressor



Daud, A et al; 2017 SMR congress

Parameters of tumour sensitivity (VE-BASKET)



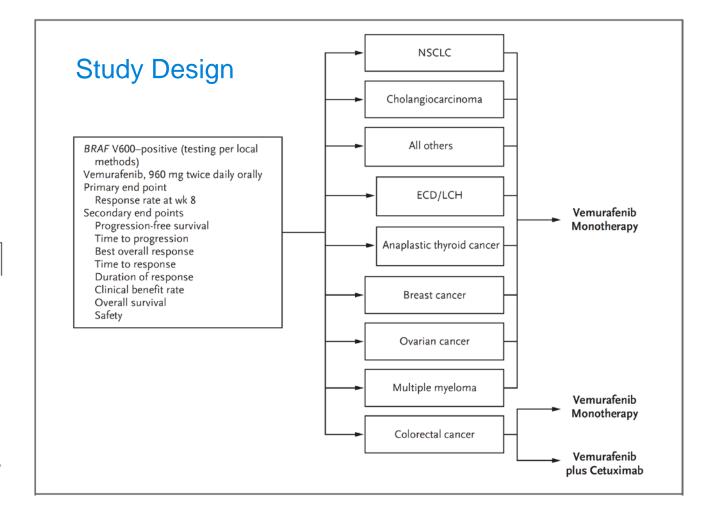
VE-BASKET: a histologyindependent, flexible, early phase 2 study of vemurafenib in patients with non-melanoma cancers harboring BRAF V600 mutations

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Vemurafenib in Multiple Nonmelanoma Cancers with BRAF V600 Mutations

David M. Hyman, M.D., Igor Puzanov, M.D., Vivek Subbiah, M.D., Jason E. Faris, M.D., Ian Chau, M.D., Jean-Yves Blay, M.D., Ph.D., Jürgen Wolf, M.D., Ph.D., Noopur S. Raje, M.D., Eli L. Diamond, M.D., Antoine Hollebecque, M.D., Radj Gervais, M.D., Maria Elena Elez-Fernandez, M.D., Antoine Italiano, M.D., Ph.D., Ralf-Dieter Hofheinz, M.D., Manuel Hidalgo, M.D., Ph.D., Emily Chan, M.D., Ph.D., Martin Schuler, M.D., Susan Frances Lasserre, M.Sc., Martina Makrutzki, M.D., Florin Sirzen, M.D., Ph.D., Maria Luisa Veronese, M.D., Josep Tabernero, M.D., Ph.D., and José Baselga, M.D., Ph.D.

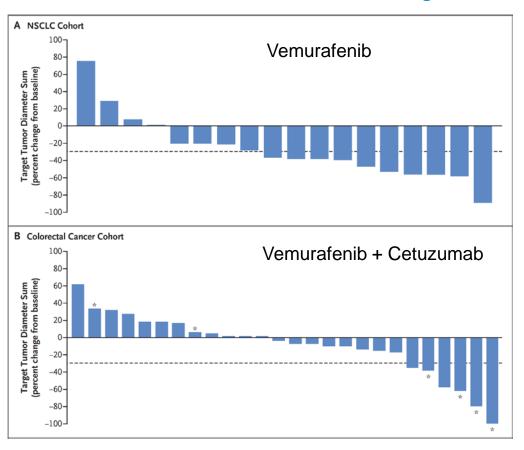


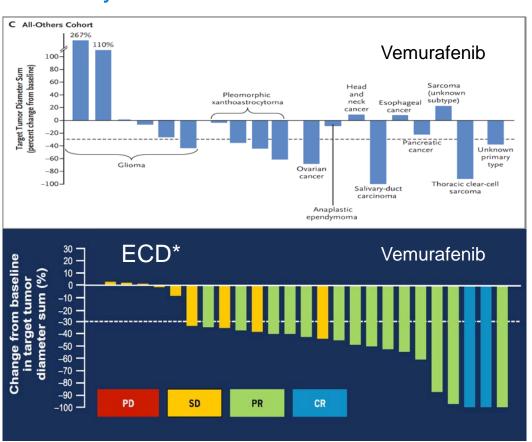


Parameters of tumour sensitivity (VE-BASKET)



Percent change from baseline by RECIST1.1





The histologic context is an important determinant of response in BRAF V600-mutated

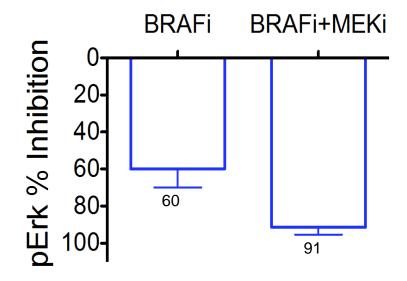
CaECE Endheim-Chester disease, approval in US was based on VE-BASKET

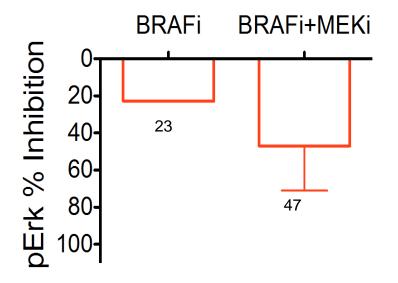
Pharmacodynamics - heterogeneity between histo/organs



BRAF V600 mutant melanoma¹

BRAF V600 mutant CRC^{2,3}





Different degrees of MAPK pathway (pErk) inhibition in melanoma and CRC

^{1.} Yan, Y et al; ESMO 2014

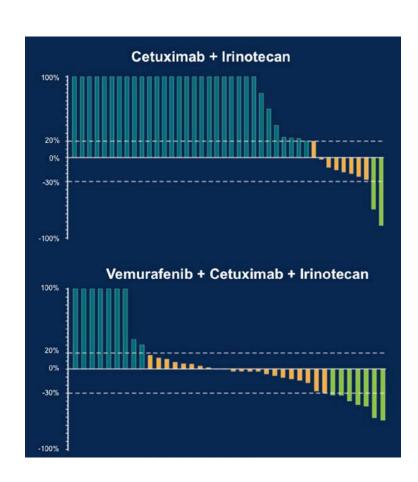
^{2.} Corcoran, RB et al; JCO 2015.63.2471

^{3.} Sanz-Garcia, E et al; Ann Onco 28: 2648–2657, 2017

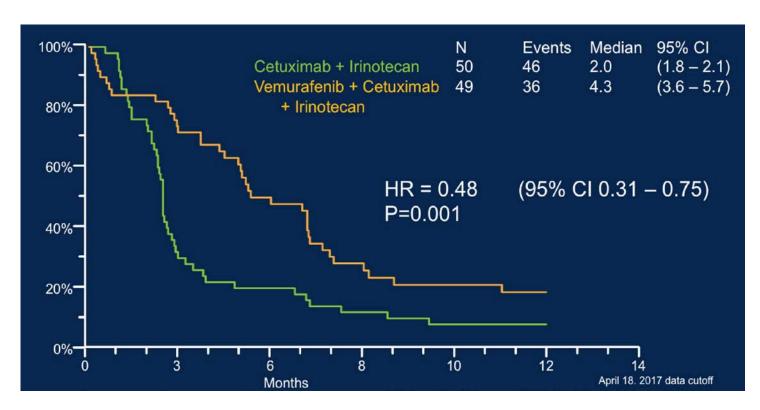


BRAF inhibition - integral part of BRAF CRC treatment?





BRAFi + EGFRi + Chemo improved PFS in BRAF CRC (SWOG140



Response and disease control rates were also higher in the vemurafenib arm (16% versus 4% and 67% versus 22%, respectively)

Summary



- BRAF V600 mutations are driver mutations in many cancers
- Effective BRAF inhibition lead to significant improvement in long term survival in some indications
 - Tumour sensitivity to BRAF inhibition in same tumour type can be influenced by
 - Tumour genetic alterations, immune contextures or host metabolic profiles
 - Disease stages and line of treatments
- The histologic context is an important determinant of response in BRAF V600 mutated cancers
 - BRAF inhibition could still be an integral part of treatment even in histo-type that itself had insufficient activity