A lung cancer precision medicine trial

**S1900G Is Open and Enrolling: MET-amplified, EGFR-mutant NSCLC**

*Lung-MAP's newest sub-study* is enrolling patients with an EGFR mutation whose disease has progressed on osimertinib because of MET gene amplification.

Patients with advanced EGFR-mutant non-small cell lung cancer often do well on an EGFR inhibitor such as osimertinib, but their disease eventually becomes resistant. If this resistance is caused by MET amplification, the patient may be a candidate for S1900G. Patients are randomized to capmatinib and osimertinib with or without ramucirumab.

If your patient’s NSCLC has progressed on osimertinib, consider screening them for Lung-MAP and S1900G.

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**Patient with NSCLC with EGFR-sensitizing mutation treated with osimertinib**

↓

**PROGRESSION**

↓

3 options for testing for MET amplification

↓

LUNGMAP screening or Local tissue NGS or ctDNA by liquid biopsy

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**Sneak Peek: S1900K Is Just Around the Corner**

Lung-MAP’s newest biomarker sub-study, expected to activate later this summer, is S1900K. It is being designed for patients with MET exon 14 skipping-positive non-small cell lung cancer and will randomize them to a MET inhibitor alone or in combination with a VEGFR2 inhibitor. Watch your protocol broadcasts to learn when this sub-study will launch.

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[LEARN MORE AT WWW.LUNG-MAP.ORG](http://WWW.LUNG-MAP.ORG)
S1900E: All Cohorts Still Enrolling

**Lung-MAP S1900E** enrolls patients with previously treated NSCLC with a KRAS\(^{G12C}\) gene mutation and treats them with sotorasib. Sotorasib has accelerated approval from the FDA for this use, but this prospective study asks how co-mutations in tumor-suppressor genes, such as TP53 or STK11, affect the efficacy of sotorasib. Key features and updates:

- **Sotorasib is provided by the trial at no cost.**
- **Currently, all 3 cohorts remain open.** While the TP53 mutation cohort is nearing accrual completion, the STK11 cohort and “All-Comer” cohort have multiple available slots.
- **The “All Comer” cohort is for any patient with a tumor that doesn’t meet biomarker criteria for the TP53 and STK11 cohorts.**
  - This includes KEAP1, NFE2L2, CUL3 mutations, dual TP53/STK11 co-mutations, other co-mutations, and even tumors with no co-mutations.

For Your Non-Match Patients, Consider S2302 Pragmatica-Lung

**S1800D** closed in March, leaving Lung-MAP without an open non-match sub-study.

- **For your Lung-MAP patients** who do not match a current sub-study, consider enrolling them to the S2302 Pragmatica-Lung study, which is available via CTSU.org.
- **S2302** is open to patients with stage IV or recurrent NSCLC that has been treated with immunotherapy and chemotherapy.

**S2302** is a phase III pragmatic trial testing the same pembrolizumab plus ramucirumab combination used in the phase II S1800A, an earlier Lung-MAP non-match sub-study. S1800A found the combination resulted in better OS than standard treatments.

**The Pragmatica-Lung trial** has been streamlined to be easy for sites to open, conduct, and enroll to, with a bare-bones set of eligibility criteria and greatly reduced requirements for data collection and adverse event reporting.


**LUNGMAP Screening for Sub-Study Assignment: Pre-screen to Avoid Delays**

**Patients enrolling to LUNGMAP** can be 1) pre-screened during prior therapy or 2) screened when their disease progresses.* Screening can be done using tissue sent for Foundation Medicine next-generation sequencing or by reanalysis of earlier commercial FoundationOne CDx results.

Pre-screening your patients during prior therapy means that if their disease progresses, their sub-study assignment can happen right away and they can enroll to it with no delay.

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**Clinical trial summary (S1900F)**

**Adding The Drug Selpercatinib To Usual Treatment For RET-positive, Advanced Non-small Cell Lung Cancer**

**Why is this trial important?**

This trial is part of a larger study called Lung-MAP. In Lung-MAP, researchers seek to find better treatments for people with advanced non-small cell lung cancer whose disease has progressed despite multiple treatments. The Lung-MAP group in the S1900F trial is looking at how patients respond to treatment with selpercatinib in combination with the usual chemotherapy. They hope to find out if this combination can improve treatment for these people.

**Who is the trial for?**

This trial is for adults, age 18 or older, with stage 4 non-small cell lung cancer.

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**S1900F Closes Permanently**

The S1900F Lung-MAP sub-study closed permanently on June 27 because of accrual challenges. S1900F was designed for patients with RET fusion-positive non-small cell lung cancer whose disease had progressed on prior RET-directed therapy. SWOG has sent a closure memo to sites, which is also being distributed in CTSU’s bi-monthly broadcast.
Lung-MAP Resources for You and Your Patients

All Lung-MAP sub-studies have (or will soon have) resources for help with education and patient enrollment:

**PATIENT-FRIENDLY PLAIN LANGUAGE TRIAL SUMMARY**

**SOCIAL MEDIA TOOLKIT**

**_PROTOCOL CARD**

**PHYSICIAN FACT SHEET**

You can download and print these resources from CTSU.org or from SWOG.org

### TOP-ACCRUING SITES TO LUNGMAP*

<table>
<thead>
<tr>
<th>Site</th>
<th>Location</th>
<th>Total</th>
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<tr>
<td>2. Edwards Comprehensive Cancer Center</td>
<td>Huntington, WV</td>
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<td>3. UNM Comprehensive Cancer Center</td>
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<td>4. Mercy Medical Center</td>
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</tbody>
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* As of June 26, 2023

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### SCREENING PROTOCOL

#### HAS LOGGED:

- 3,084 screening registrations
- 1,666 sub-study assignments
- 453 sub-study registrations

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### CONTACT US

- **General Medical Questions**
  LUNGMAP@swog.org
- **Protocol & Regulatory Questions**
  jbeeler@swog.org
- **Eligibility & Data Submission Questions**
  LUNGMAPQuestion@crab.org
- **Central Monitoring Questions**
  centralmonitorquestion@crab.org
- **Quality Assurance Auditing Questions**
  gamail@swog.org
- **Funding Questions**
  funding@swog.org
- **S1900E Study Chairs**
  S1900EMedicalQuery@swog.org
- **S1900F Study Chairs**
  S1900FMedicalQuery@swog.org
- **S1900G Study Chairs**
  S1900GMedicalQuery@swog.org