



Insights Into the Treatment of *EGFR*-Positive Non-Small Cell Lung Cancer (NSCLC)

May 16, 2026

Newport Beach, CA

How to Navigate This Report



Click to move to topic
of interest or ARS
supporting data



Click to return to
previous slide

Report Contents

CASES



Quick Links

Report Snapshot

> Session overview

> Session agenda

> Attendee overview

> Attendee demographics

Scope of the Report

Topline Takeaways

Detailed Insights and Strategic Recommendations

Attendee Key Takeaways

ARS Data



Report Snapshot

Report Snapshot: Session Overview



Disease state and data presentations were led by **Edward Kim, MD, MBA, FACP, FASCO**, from City of Hope, and moderation was led by **Sushil Bhardwaj, MD, FACP**, on **May 16, 2026**, with content developed in conjunction with the Aptitude Health scientific team



The objectives of the meeting were to gain attendees' perspectives on current treatment practices and recent updates in

- > ***EGFR*-positive NSCLC first-line treatment**
- > **Post-progression and second-line-and-beyond sequencing strategies**
- > **Emerging regimens, clinical trial data, and real-world adoption considerations**



Data collection was accomplished through use of **audience response system (ARS)** questioning and **moderated discussion**



Insights on the management of *EGFR*-positive NSCLC were obtained from **12 community oncologists** from the Western United States

Report Snapshot: Session Agenda



Time (PT)	Topic
1.00 PM – 1.15 PM	Introduction and Baseline ARS Questions
1.15 PM – 2.00 PM	First-Line Therapy for <i>EGFR</i> -Positive NSCLC
2.00 PM – 2.10 PM	Break
2.10 PM – 2.20 PM	ARS Questions
2.20 PM – 3.45 PM	Treatment of <i>EGFR</i> -Positive NSCLC Upon Disease Progression
3.45 PM – 4.00 PM	Key Takeaways and Meeting Evaluation

Report Snapshot: Attendee Overview



Report Snapshot: Attendee Demographics

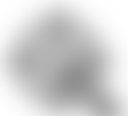
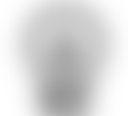


Scope of the Report



Topline Takeaways



 Agreement	 Topline Takeaways
 There is a strong consensus that the current market is overvalued and that a correction is likely in the near future. This is based on the current market conditions and the high levels of debt in the economy.	 There is a strong consensus that the current market is overvalued and that a correction is likely in the near future. This is based on the current market conditions and the high levels of debt in the economy.
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**Detailed Insights and
Strategic Recommendations**

Objective 1: Detailed Insights (1/2)

Figure 1 *Continuum of support* – from no support to full support – across the range of support. The continuum is a horizontal line with 'no support' at the left end and 'full support' at the right end. The line is divided into three sections: 'no support' (left), 'partial support' (middle), and 'full support' (right). The 'no support' section is labeled 'no support' and the 'full support' section is labeled 'full support'. The 'partial support' section is labeled 'partial support' and is further divided into three sub-sections: 'partial support (low)', 'partial support (medium)', and 'partial support (high)'. The 'partial support (low)' sub-section is labeled 'partial support (low)' and the 'partial support (medium)' sub-section is labeled 'partial support (medium)'. The 'partial support (high)' sub-section is labeled 'partial support (high)'. The 'no support' section is labeled 'no support' and the 'full support' section is labeled 'full support'.

Keywords: political capital, social capital, trust, organizational citizenship, organizational commitment

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- With a **custom** website, you agree directly with the publisher, and the publisher agrees to the terms of service following the publisher's needs, with the publisher itself agreeing to adapt.

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1. The company's sales have increased by 10% over the last year. This is due to the fact that the company has been able to attract new customers and retain existing ones. The company's sales are expected to continue to grow in the coming years.

Images are not intended to constitute drugs, or anything similar, or to be an all-inclusive summary of the literature on any one topic.

- The majority of people who appear to be obese are actually normal weight people who are carrying a lot of visceral fat.
- It is important to note that people who are obese are at a higher risk of developing heart disease than people who are not obese.

Objective 1: Detailed Insights (2/2)



Case Study: Managing the impact of a new product launch on the existing product line.

The company is launching a new product line, which is expected to have a significant impact on the existing product line. The company is concerned about the potential for cannibalization of sales and the impact on the existing product line. The company is looking for ways to manage the impact of the new product launch on the existing product line.

The company is considering several options for managing the impact of the new product launch on the existing product line. The company is looking for ways to manage the impact of the new product launch on the existing product line.

The company is looking for ways to manage the impact of the new product launch on the existing product line. The company is looking for ways to manage the impact of the new product launch on the existing product line.

Objective 1: Supportive Quotes From Discussion (1/3)



Topic	Supportive Quotes
Community as a whole	"The community as a whole is very supportive of the program and the staff." - [Name]
	"The community as a whole is very supportive of the program and the staff." - [Name]
	"The community as a whole is very supportive of the program and the staff." - [Name]
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	"The community as a whole is very supportive of the program and the staff." - [Name]
	"The community as a whole is very supportive of the program and the staff." - [Name]

Objective 1: Supportive Quotes From Discussion (2/3)



Supportive Quotes From Discussion (2/3)	
Topic	Supportive Quotes
Topic 1: Supportive Quotes	“The results of the study suggest that the use of the proposed intervention is effective in improving the health of the community.” “The study also found that the use of the proposed intervention is effective in improving the health of the community.”
Topic 2: Supportive Quotes	“The study also found that the use of the proposed intervention is effective in improving the health of the community.” “The study also found that the use of the proposed intervention is effective in improving the health of the community.”

Objective 1: Supportive Quotes From Discussion (3/3)



Supportive Quotes From Discussion (3/3)	
Topic	Supportive Quotes
Topic 1: [illegible]	[illegible]
	[illegible]
	[illegible]
Topic 2: [illegible]	[illegible]
	[illegible]
	[illegible]

Objective 1: Strategic Recommendations



Strategic Recommendations

The following recommendations are based on the findings of the assessment and are intended to provide a clear path forward for the organization. These recommendations are organized into three main areas: Leadership, Culture, and Operations.

- Leadership:** The assessment found that leadership is a key area for improvement. Recommendations include:
 - Establish a clear vision and mission statement.
 - Improve communication between leadership and staff.
 - Develop a succession plan for key leadership roles.
 - Encourage a culture of transparency and accountability.
- Culture:** The assessment found that the organizational culture is a mix of strengths and weaknesses. Recommendations include:
 - Strengthen the core values and mission statement.
 - Encourage a culture of innovation and risk-taking.
 - Improve employee engagement and morale.
 - Develop a culture of continuous learning and development.
- Operations:** The assessment found that the operational processes are inefficient and need to be streamlined. Recommendations include:
 - Streamline the operational processes.
 - Improve the quality of service delivery.
 - Develop a system for monitoring and evaluating performance.
 - Invest in technology to improve efficiency.

Objective 2: Detailed Insights (1/2)



Case Study: Improving Patient Engagement Through Digital Health Solutions

Background: The organization is a healthcare provider, serving a diverse population in a competitive market. The current state of patient engagement is low, with many patients not taking their medications or attending appointments. The organization is looking for ways to improve patient engagement and reduce healthcare costs.

Key Findings:

- Patients are not taking their medications as prescribed.
- Patients are not attending appointments.
- Patients are not understanding their healthcare providers' instructions.
- Patients are not using digital health tools.

Recommendations:

- Implement a patient engagement program that includes digital health tools, such as mobile apps and text messaging.
- Provide patient education on the importance of taking medications and attending appointments.
- Use digital health tools to monitor patient adherence and provide reminders.
- Engage patients in their healthcare decisions.

Conclusion: The organization can improve patient engagement and reduce healthcare costs by implementing a patient engagement program that includes digital health tools, patient education, and digital health monitoring.

Objective 2: Detailed Insights (2/2)



Summary: The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care.

Key Findings: The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care.

Recommendations: The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care. The organization is committed to providing high-quality, patient-centered care.

Objective 2: Supportive Quotes From Discussion (1/5)



Supportive Quotes From Discussion (1/5)	
Topic	Supportive Quotes
Topic 1	Quote 1: "The first step in the process of change is to identify the problem and the need for change. This is often the most difficult step, as it requires a clear understanding of the current situation and the ability to see the need for change." (Smith, 2010, p. 12)
	Quote 2: "The second step is to develop a plan of action. This involves setting specific goals and objectives, and determining the resources and strategies needed to achieve them." (Smith, 2010, p. 13)
	Quote 3: "The third step is to implement the plan. This involves putting the plan into action and monitoring progress. It is important to be flexible and adjust the plan as needed, as the situation may change over time." (Smith, 2010, p. 14)
Topic 2	Quote 4: "The fourth step is to evaluate the results. This involves assessing the impact of the change and determining whether the goals have been achieved. This step is often overlooked, but it is essential for understanding the effectiveness of the change." (Smith, 2010, p. 15)
	Quote 5: "The fifth step is to sustain the change. This involves ensuring that the change is maintained over time and that the organization is prepared to handle any challenges that may arise. This step is often the most difficult, as it requires a commitment to the change and the ability to adapt to changing circumstances." (Smith, 2010, p. 16)
	Quote 6: "The final step is to share the results. This involves communicating the outcomes of the change to the relevant stakeholders and sharing the lessons learned. This step is important for ensuring that the change is successful and for preventing future problems." (Smith, 2010, p. 17)

Objective 2: Supportive Quotes From Discussion (2/5)



Supportive Quotes From Discussion (2/5)	
Topic	Supportive Quotes
Supportive Quotes From Discussion (2/5)	The author is convincing and persuasive because... (quote)
Supportive Quotes	... (quote) ... (quote) ... (quote)
Supportive Quotes	... (quote) ... (quote) ... (quote)
Supportive Quotes	... (quote) ... (quote) ... (quote)

Objective 2: Supportive Quotes From Discussion (3/5)

Topic	Answer Statement
1. What is the purpose of the contract?	The purpose of the contract is to define the relationship between the parties and to set out the terms and conditions of the agreement. It is a legal document that binds the parties to the terms and conditions of the agreement.
2. What are the key elements of a contract?	The key elements of a contract are: offer, acceptance, consideration, and intention to create legal relations. These elements are essential for a contract to be valid and enforceable.
3. What is the difference between a contract and a promise?	A contract is a legally binding agreement between two or more parties, while a promise is a statement of intent to do or not do something. A promise is not legally enforceable, whereas a contract is.
4. What are the types of contracts?	There are several types of contracts, including express, implied, and quasi-contracts. Express contracts are those that are explicitly stated, while implied contracts are those that are inferred from the conduct of the parties. Quasi-contracts are those that are imposed by law.
5. What are the consequences of breach of contract?	The consequences of breach of contract depend on the type of breach and the terms of the contract. In general, the innocent party may be entitled to damages, specific performance, or rescission of the contract.

Objective 2: Supportive Quotes From Discussion (4/5)



Supportive Quotes From Discussion (4/5)	
Topic	Supportive Quotes
Topic 1: [Illegible]	[Illegible]
	[Illegible]
	[Illegible]
Topic 2: [Illegible]	[Illegible]
	[Illegible]

Objective 2: Supportive Quotes From Discussion (5/5)



Supportive Quotes From Discussion (5/5)	
Topic	Supportive Quotes
The role of the nurse in the management of the patient with a mental health problem	“The role of the nurse is to provide a safe and supportive environment for the patient to express their feelings and thoughts.”
	“The nurse should be able to identify the patient's needs and provide appropriate interventions to meet those needs.”
	“The nurse should be able to provide emotional support to the patient and help them to cope with their problems.”
	“The nurse should be able to provide information and education to the patient and their family about the patient's condition and treatment.”
	“The nurse should be able to provide a safe and supportive environment for the patient to express their feelings and thoughts.”
	“The nurse should be able to identify the patient's needs and provide appropriate interventions to meet those needs.”
	“The nurse should be able to provide emotional support to the patient and help them to cope with their problems.”

Objective 2: Strategic Recommendations



Strategic Recommendations

With the information gathered from the previous sections, the following strategic recommendations are proposed to address the identified issues and achieve the organization's goals.

Recommendation 1: Enhance Operational Efficiency

Implement process automation to reduce manual errors and increase productivity. Streamline communication channels to ensure timely information flow. Conduct regular audits to identify and eliminate inefficiencies.

Recommendation 2: Strengthen Financial Management

Improve budgeting and forecasting accuracy. Optimize resource allocation to maximize ROI. Establish a robust risk management framework to mitigate financial uncertainties.

Recommendation 3: Foster Innovation and Growth

Invest in research and development to explore new market opportunities. Encourage a culture of innovation by rewarding creative ideas. Expand the organization's reach through strategic partnerships and acquisitions.

Objective 3: Detailed Insights (1/2)



Summary: This slide provides a detailed overview of the findings from the analysis, highlighting key insights and recommendations. The findings are organized into three main sections: Overall Findings, Detailed Findings, and Recommendations.

Overall Findings: The analysis reveals that the majority of respondents (85%) are satisfied with the current state of affairs, while 15% are dissatisfied. The primary reasons for dissatisfaction are related to the quality of service and the speed of response.

Detailed Findings: The analysis further breaks down the findings by demographic group. For example, younger respondents (18-34) are more likely to be dissatisfied with the quality of service, while older respondents (55+) are more likely to be dissatisfied with the speed of response.

Recommendations: Based on the findings, several recommendations are provided to improve the overall experience. These include implementing a new quality control process, improving the speed of response, and providing additional training for staff.

Objective 3: Detailed Insights (2/2)



Summary: The following table provides a detailed overview of the findings from the analysis, highlighting the key insights and the impact of the intervention on the target population.

Key Findings:

- The intervention significantly improved the health outcomes of the target population, with a statistically significant reduction in the incidence of the disease.
- The intervention was well-received by the target population, with high levels of adherence and satisfaction.
- The intervention was cost-effective, with a favorable cost-benefit ratio.

Conclusion: The findings of this study suggest that the intervention is a promising approach to improving the health outcomes of the target population. Further research is needed to confirm these findings and to explore the long-term impact of the intervention.

Objective 3: Supportive Quotes From Discussion (1/2)



Supportive Quotes From Discussion (1/2)	
Type	Supportive Quote
Thesis and Introduction	The author's main argument is that the government should... (quote text)
	The author's main argument is that the government should... (quote text)
	The author's main argument is that the government should... (quote text)
	The author's main argument is that the government should... (quote text)
	The author's main argument is that the government should... (quote text)

Objective 3: Supportive Quotes From Discussion (2/2)



Supportive Quotes From Discussion (2/2)	
Topic	Supportive Quotes
Topic 1: [illegible]	[illegible]
	[illegible]
	[illegible]
Topic 2: [illegible]	[illegible]
	[illegible]
	[illegible]

Objective 3: Strategic Recommendations



Strategic Recommendations

The following recommendations are based on the findings of the assessment and are intended to provide a clear path forward for the organization. These recommendations are organized into three main areas: Organizational Structure, Talent Management, and Technology & Innovation.

- Organizational Structure:** The current organizational structure is outdated and does not reflect the needs of the organization. It is recommended that the organization adopt a more agile, flat structure that encourages collaboration and communication. This will involve redefining roles and responsibilities, eliminating unnecessary layers of management, and creating cross-functional teams to drive innovation and efficiency.
- Talent Management:** The organization's talent management practices are outdated and do not attract or retain top talent. It is recommended that the organization implement a comprehensive talent management strategy that includes recruitment, training, development, and retention. This will involve identifying key talent gaps, developing targeted recruitment campaigns, providing ongoing training and development opportunities, and implementing competitive compensation and benefits packages.
- Technology & Innovation:** The organization's technology infrastructure is outdated and does not support its strategic goals. It is recommended that the organization invest in modern technology solutions that enhance productivity, improve customer experience, and drive innovation. This will involve conducting a thorough assessment of the current technology stack, identifying areas for improvement, and implementing a robust cybersecurity program to protect sensitive data.



Attendee Key Takeaways

Attendee Key Takeaways (1/4)



1	1. [Illegible text]
	2. [Illegible text]
2	3. [Illegible text]
	4. [Illegible text]
	5. [Illegible text]
3	6. [Illegible text]
	7. [Illegible text]

Attendee Key Takeaways (2/4)



	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
2.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
3.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
4.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
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6.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
7.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
8.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
9.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.
10.	1. Review the literature, which will include support writing studies as well as the role of the patient in the treatment process.

Attendee Key Takeaways (3/4)



1	  	1. The overall goal is really good
		2. The goal is really good - the overall goal is really good, so we need to do the things
		3. The overall goal is really good - we need to do the things, so we need to do the things
2	  	1. Making about the overall goal, then we need something - we need to do the things
		2. The overall goal, then we need something - we need to do the things, so we need to do the things
		3. Making the overall goal, then we need something - we need to do the things, so we need to do the things
3	  	1. Making the overall goal, then we need something - we need to do the things, so we need to do the things
		2. The overall goal, then we need something - we need to do the things, so we need to do the things
		3. Making the overall goal, then we need something - we need to do the things, so we need to do the things

Attendee Key Takeaways (4/4)



- 1. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.
 - 2. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.
 - 3. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.
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- 1. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.
 - 2. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.
 - 3. I think you're not the only one who's struggling with this. It's something that we all struggle with. It's something that we all struggle with.

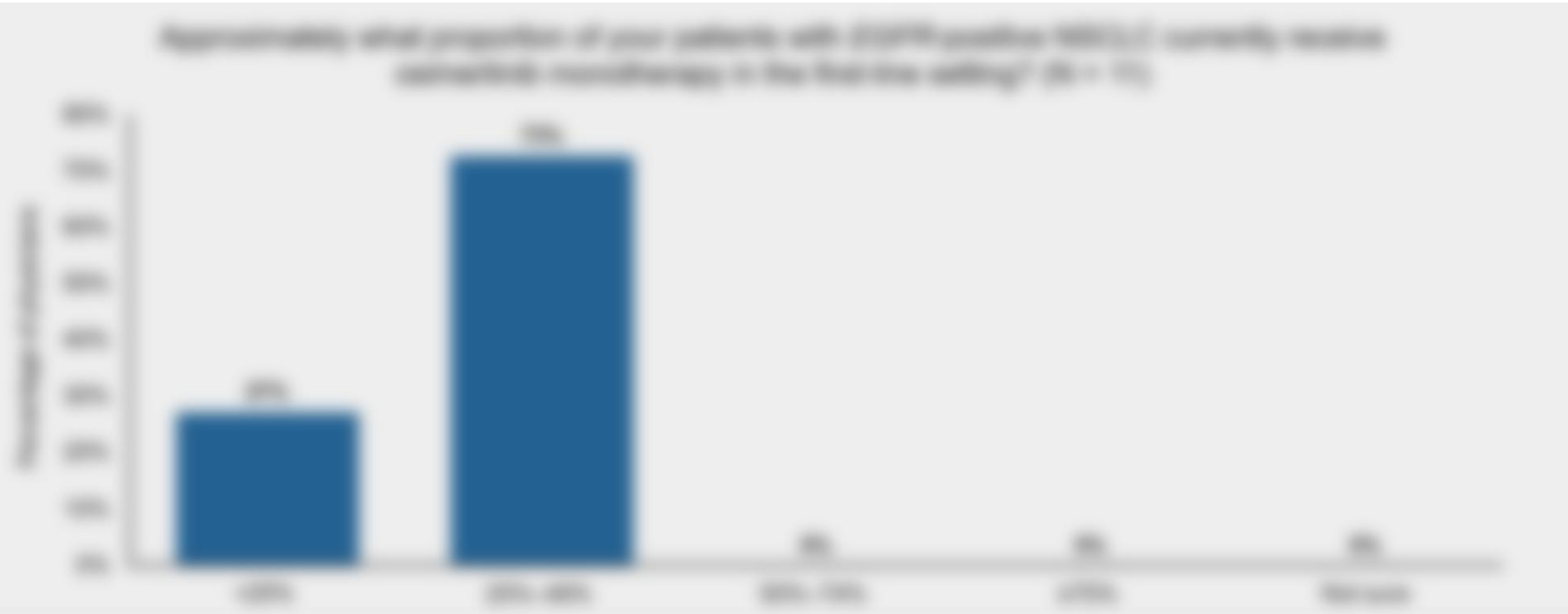


ARS Data

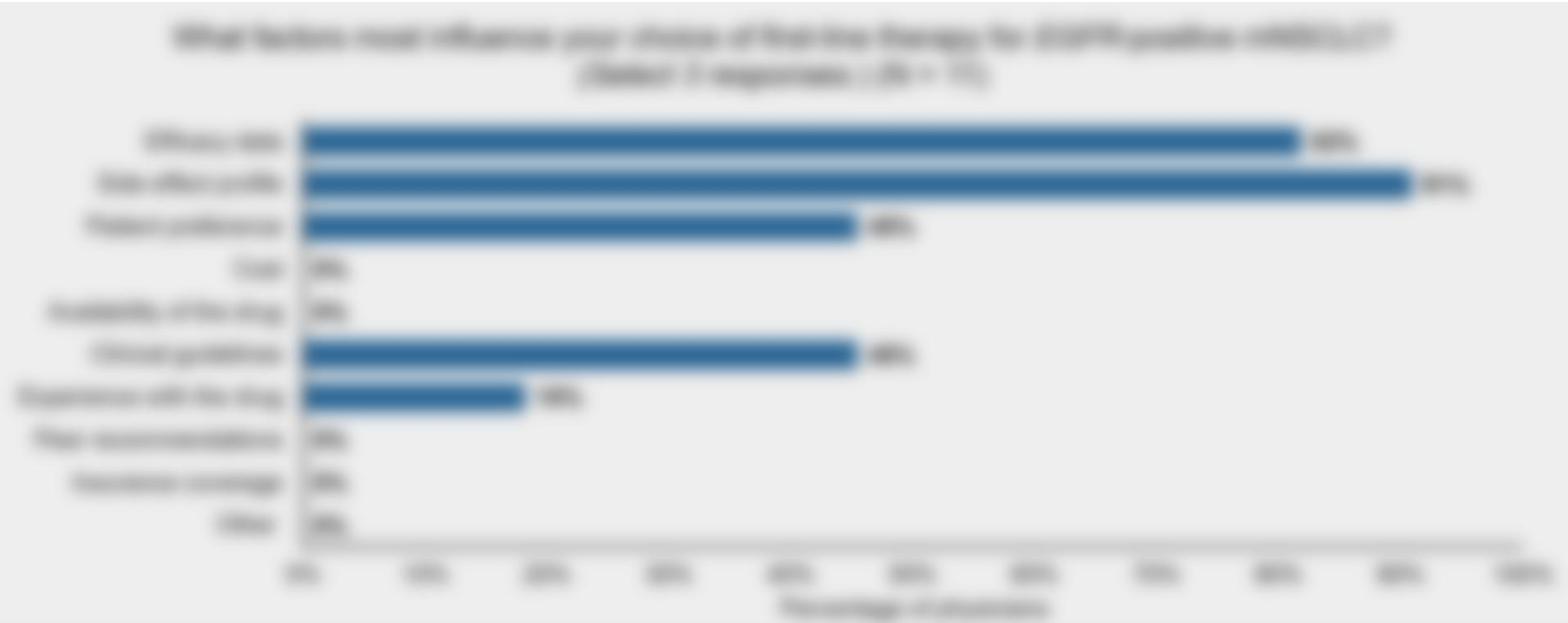
CASES



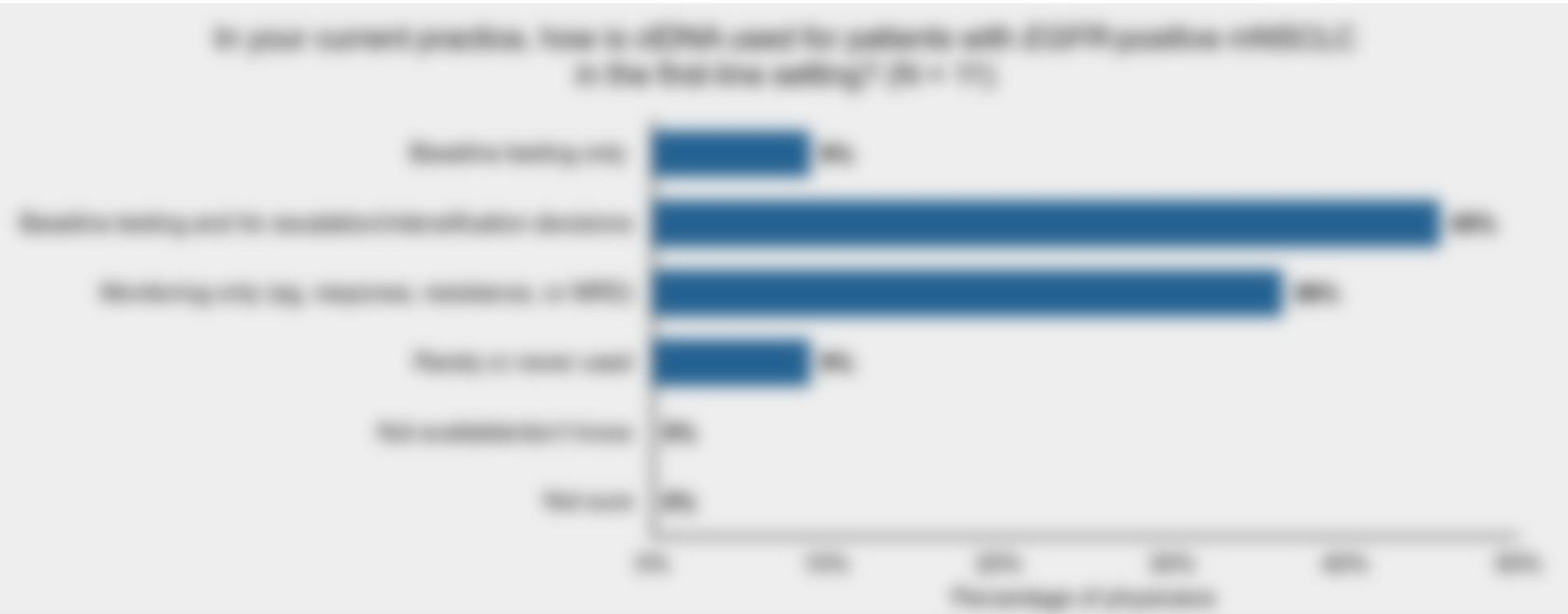
The Majority of HCPs (73%) Reported That 25%–49% of Their *EGFR*-Positive Patients Currently Receive Osimertinib Monotherapy in the First Line



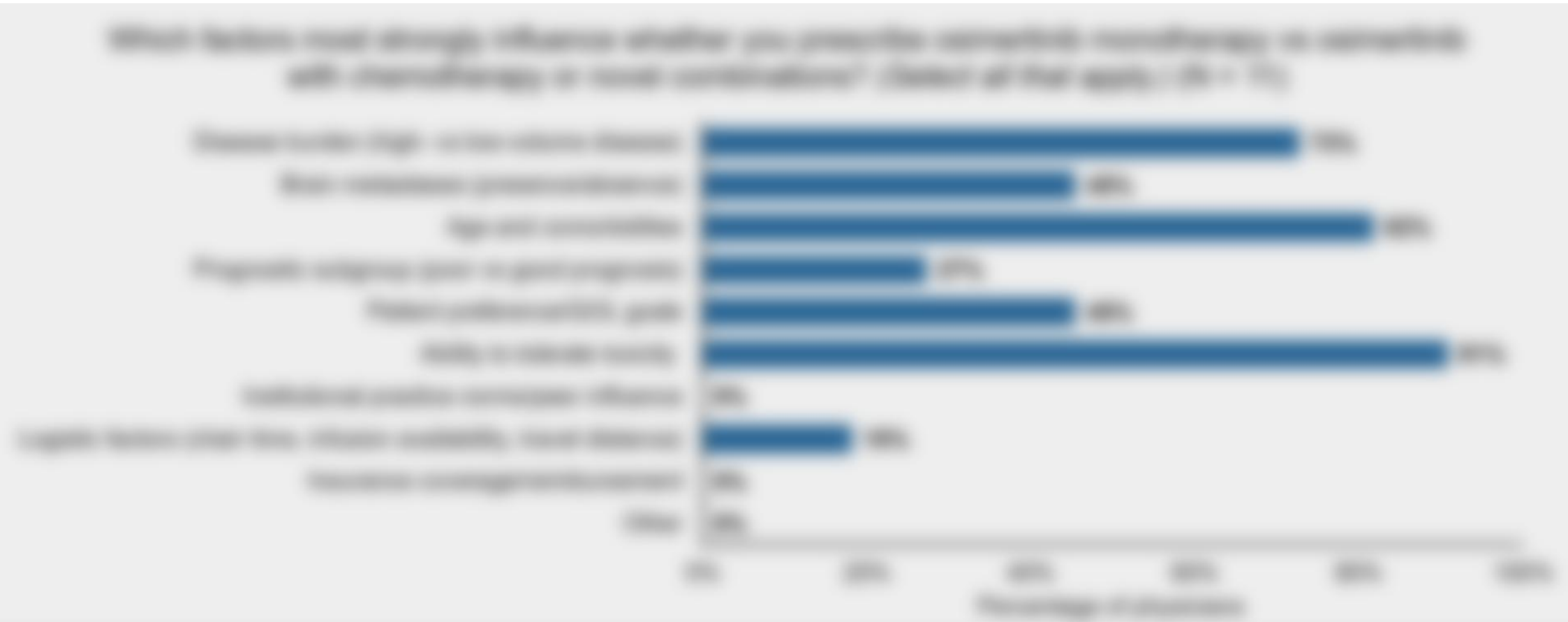
The Most Influential Factors for First-Line Therapy Selection Are Side Effect Profile (91%) and Efficacy Data (82%), Followed by Patient Preference (45%) and Clinical Guidelines (45%)



ctDNA Is Most Commonly Used for Both Baseline Testing and Escalation/Intensification Decisions (45%), Followed by Monitoring Only for Response, Resistance, or MRD (36%)



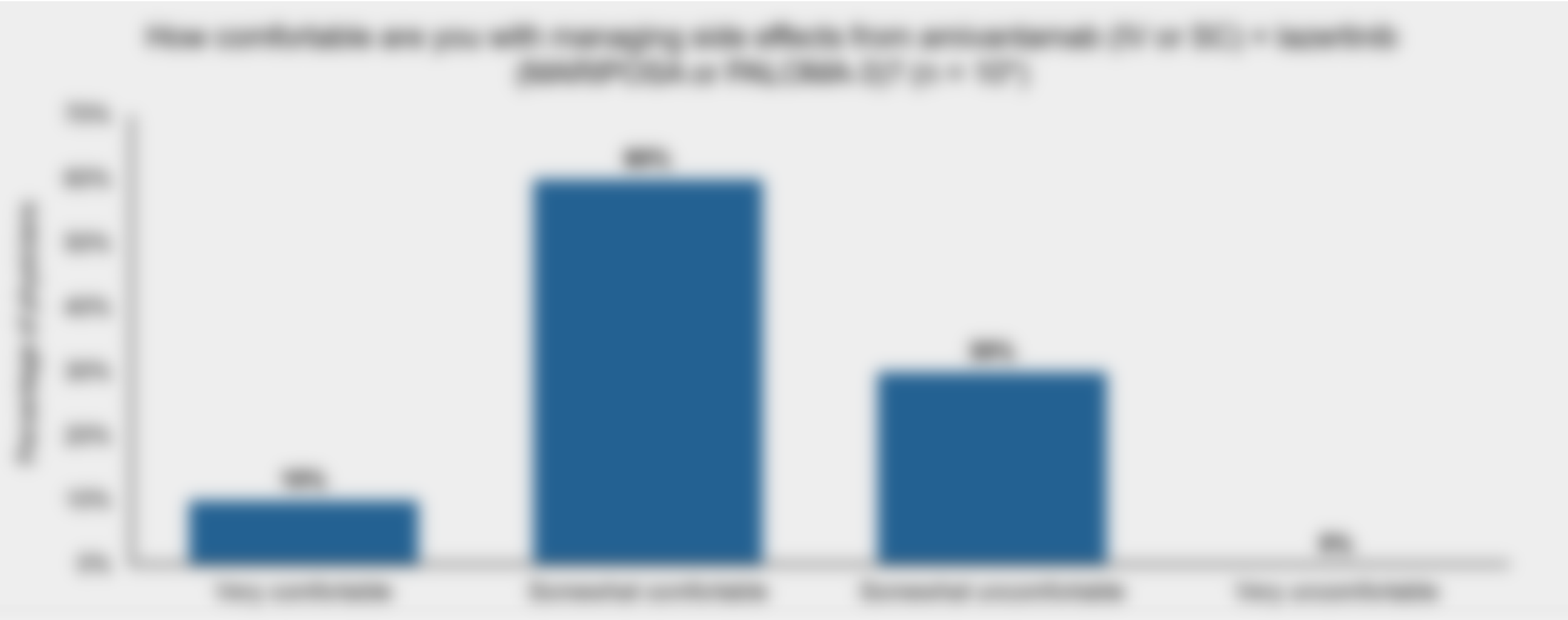
The Dominant Factors Influencing the Decision Between Osimertinib Monotherapy and Combination Are the Ability to Tolerate Toxicity (91%), Age and Comorbidities (82%), and Disease Burden (73%)



All HCPs Are Very Comfortable Managing Side Effects From Osimertinib + Chemotherapy (FLAURA2)



Only 10% of HCPs Are Very Comfortable Managing Toxicities From Amivantamab (IV or SC) + Lazertinib (MARIPOSA or PALOMA-3); 60% Are Somewhat Comfortable



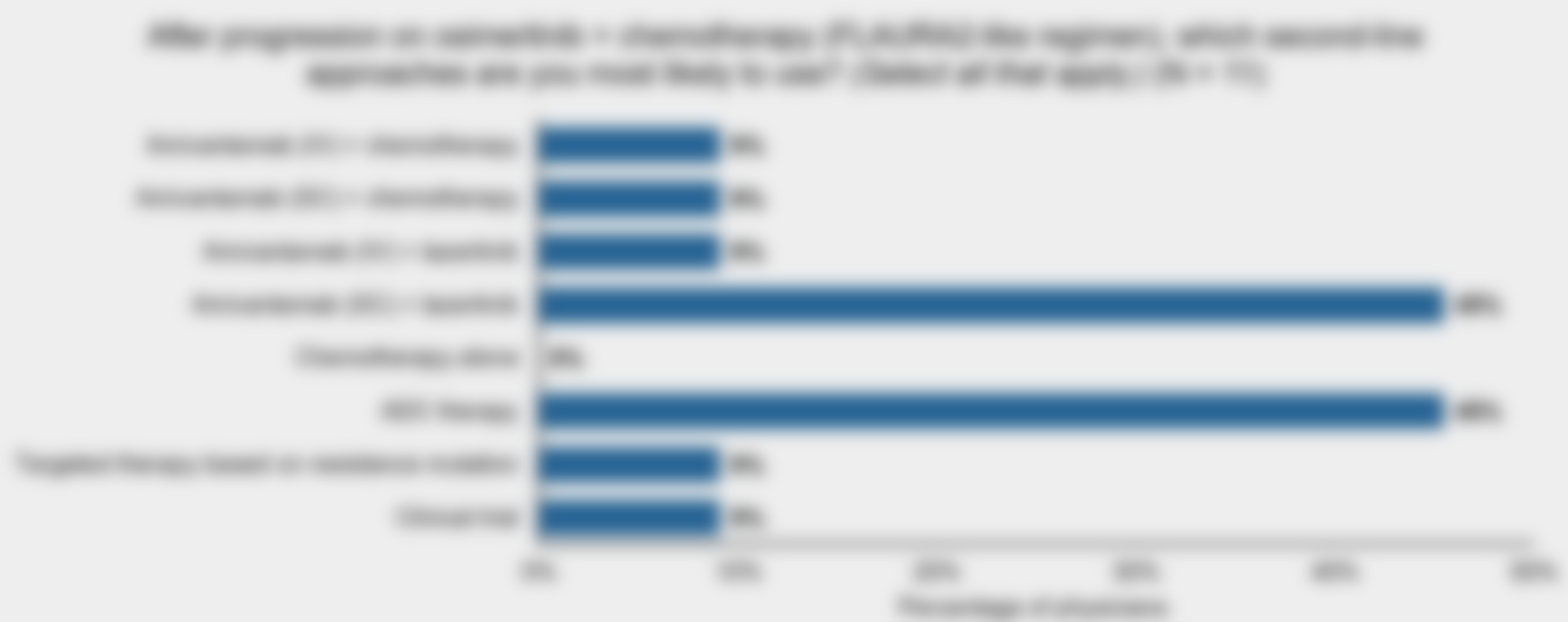
The Majority of HCPs (82%) Apply a COMPEL-Like Approach After Progression on First-Line Osimertinib Monotherapy; Only 9% Would Use an Amivantamab (IV) Approach or Clinical Trial



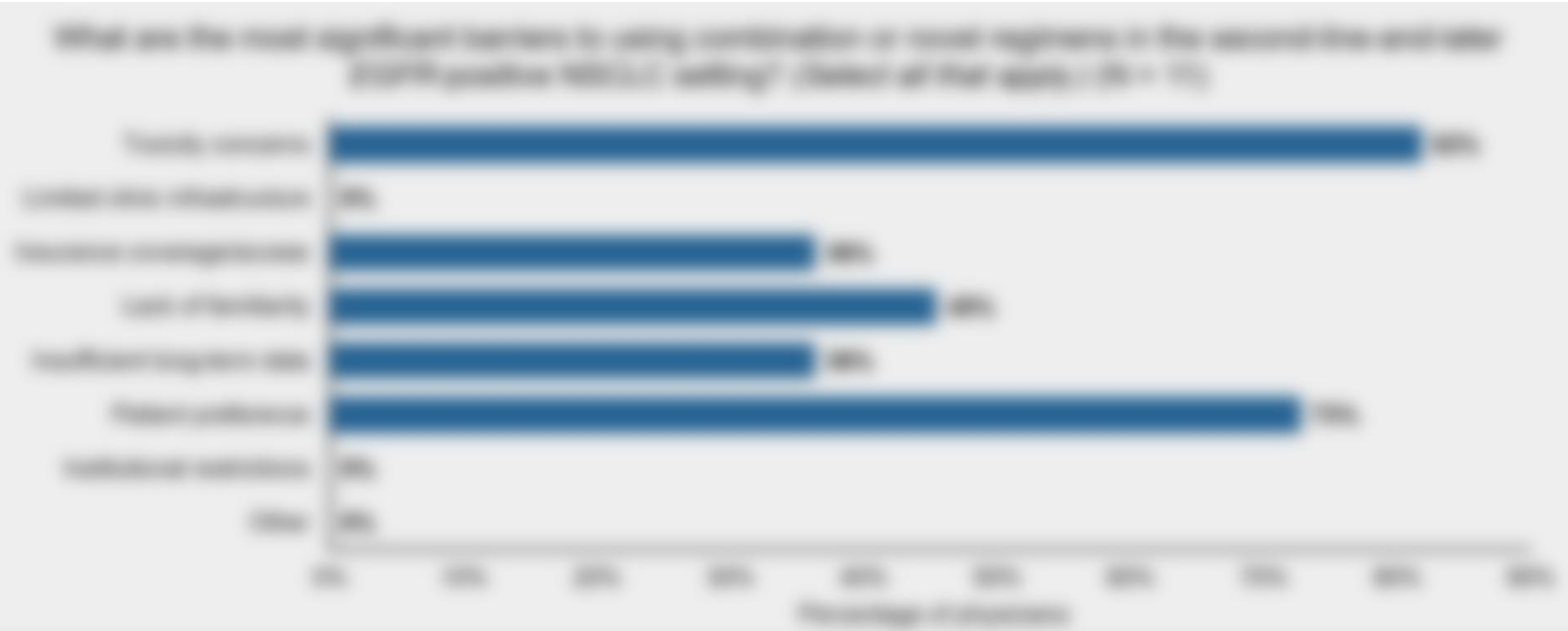
After progression on first-line osimertinib monotherapy, which of the following approaches do you most commonly use with next-line therapy?



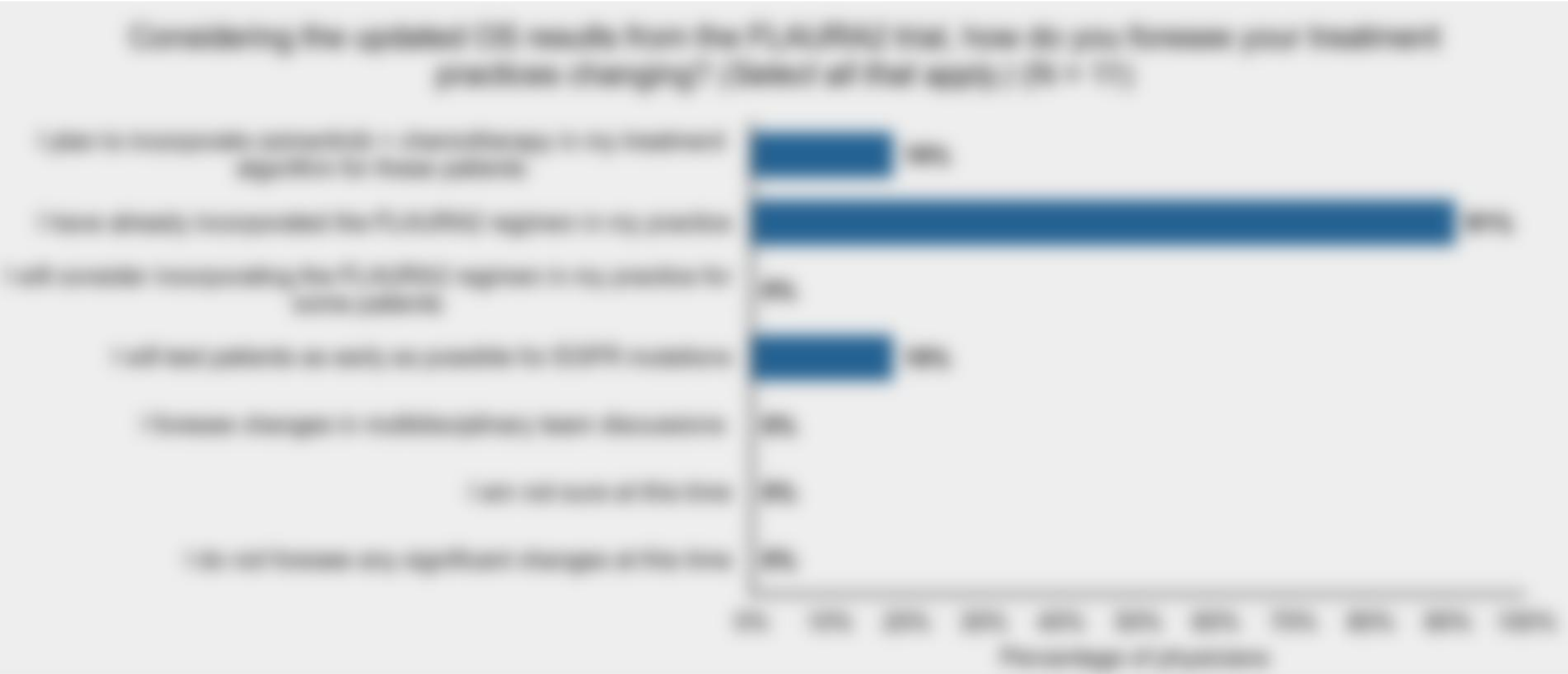
After Progression on the FLAURA2 Regimen, HCPs Were Equally Split Between Amivantamab SC + Lazertinib (45%) and ADC Therapy (45%)



The Most Significant Barriers to Novel Combination Regimens in the Second-Line-and-Later Setting Are Toxicity Concerns (82%), Patient Preference (73%), and Lack of Familiarity (45%)



Nearly All HCPs (91%) Have Already Incorporated the FLAURA2 Regimen



QOL Alongside Survival Benefit Has Some Influence on Treatment Intensity Decisions for 82% of HCPs, While 18% Reported That QOL Is Strongly Influential and Often Leads to Selection of Monotherapy



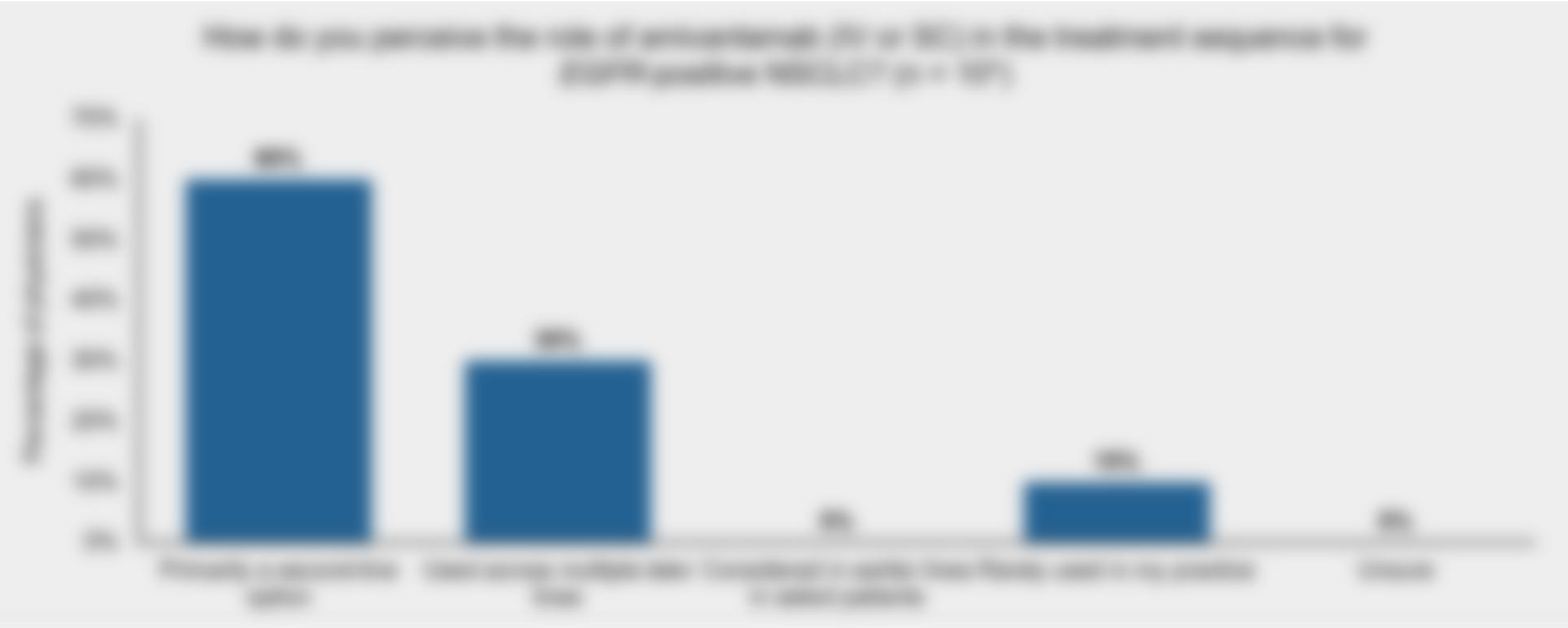
Real-World Logistic Issues Affect Treatment Decisions at Least Occasionally for 80% of HCPs



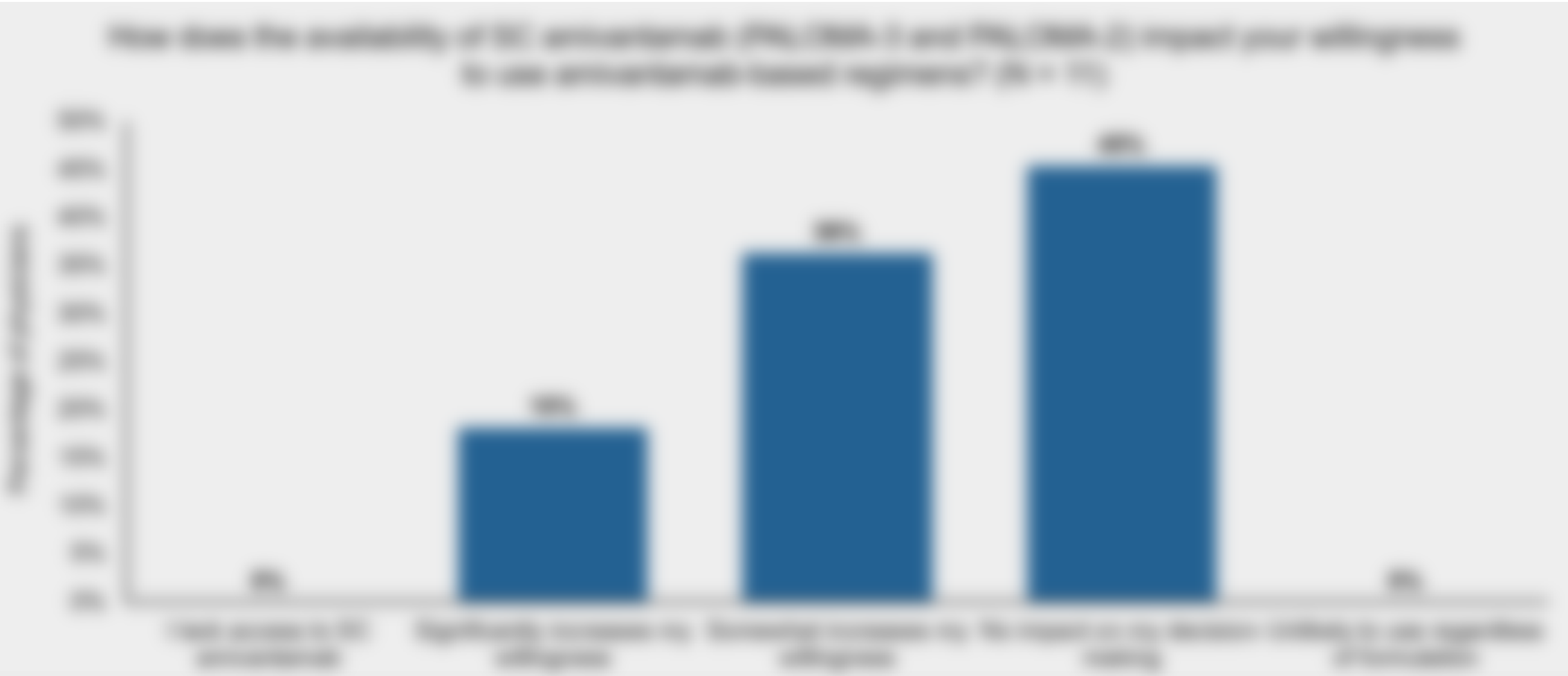
How often do real-world logistic issues affect your treatment decisions? (n = 107)



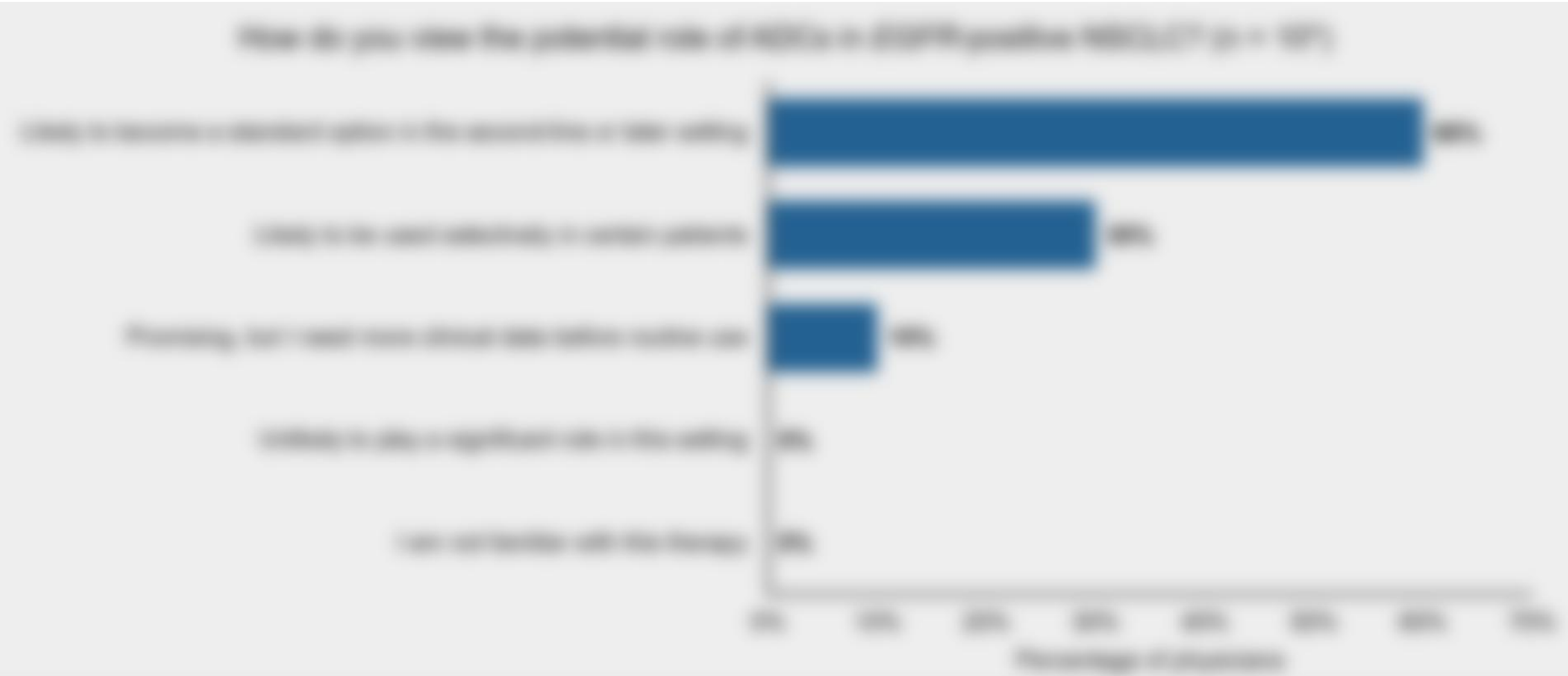
60% of HCPs Perceive Amivantamab Primarily as a Second-Line Option, While 30% View It as Appropriate Across Multiple Later Lines



SC Amivantamab Availability Has No Impact on Decision-Making for Nearly Half of HCPs (45%)



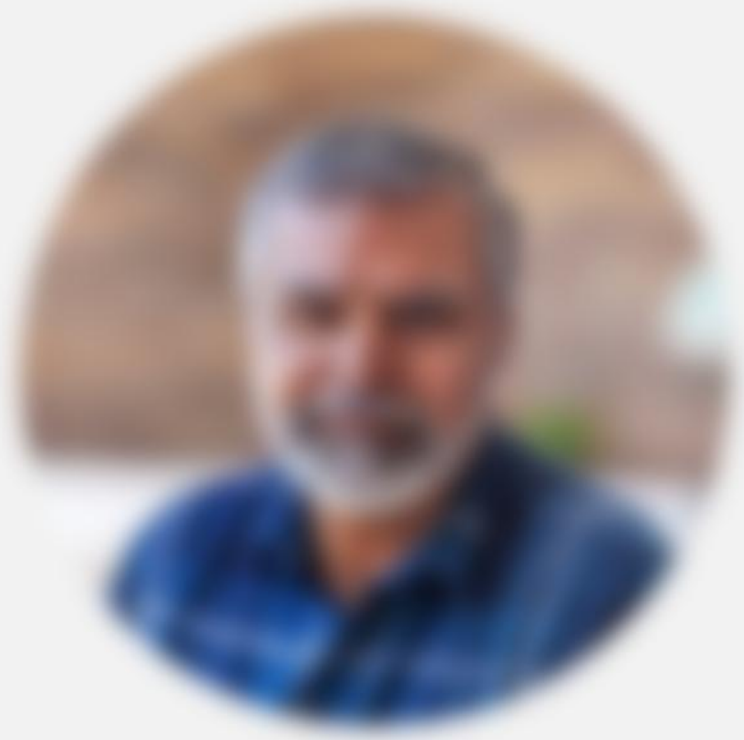
60% View ADCs as Likely to Become a Standard Option in the Second Line or Later





Patient Cases

Patient Case 1



A 55-year-old man with a 40-pack-year history, who quit smoking 10 years ago, presents with persistent cough, shortness of breath, and significant unintentional weight loss over the past 3 months. Chest CT reveals a 4-cm mass in the upper right lobe with mediastinal lymphadenopathy. Biopsy confirms adenocarcinoma, and molecular testing reveals EGFR exon 19 deletion.

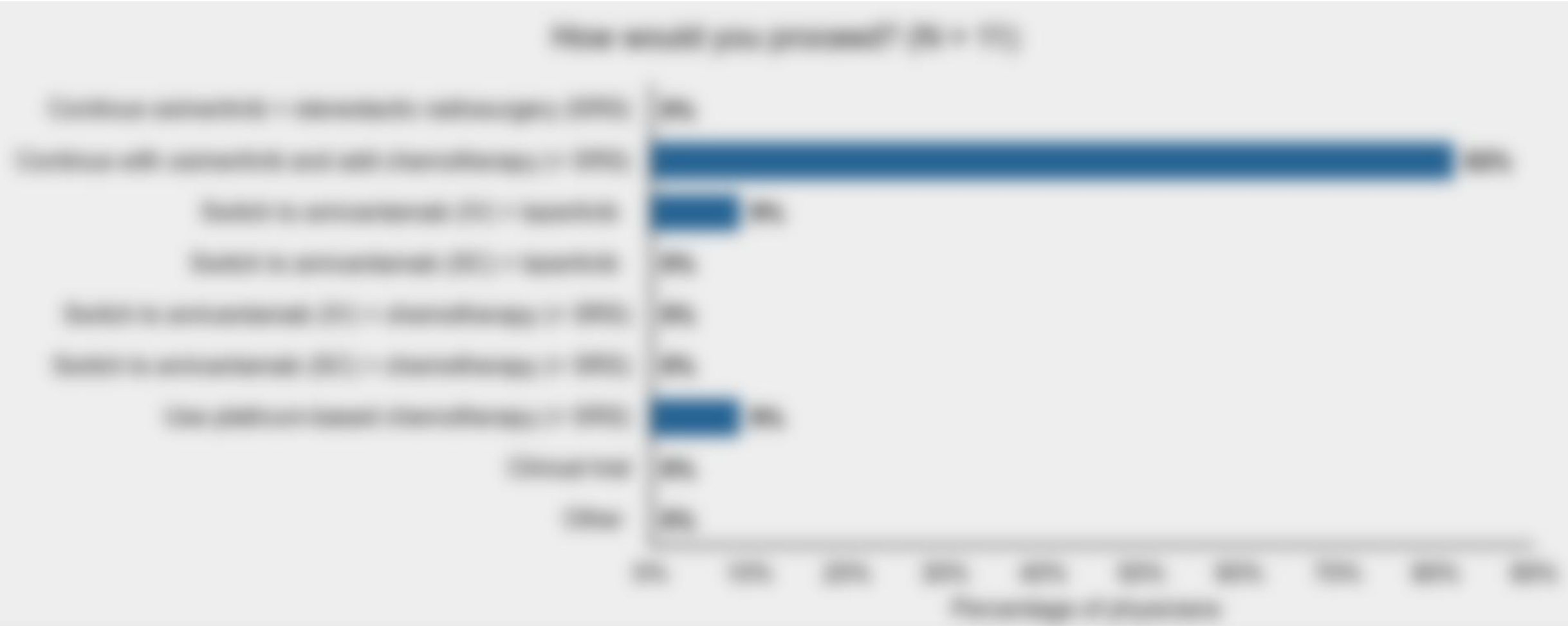
91% of HCPs Would Select Osimertinib + Chemotherapy for a 65-Year-Old Man With *EGFR* Exon 19 Deletion, Mediastinal Lymphadenopathy, a Single Hypermetabolic Adrenal Lesion, and No Brain Metastases

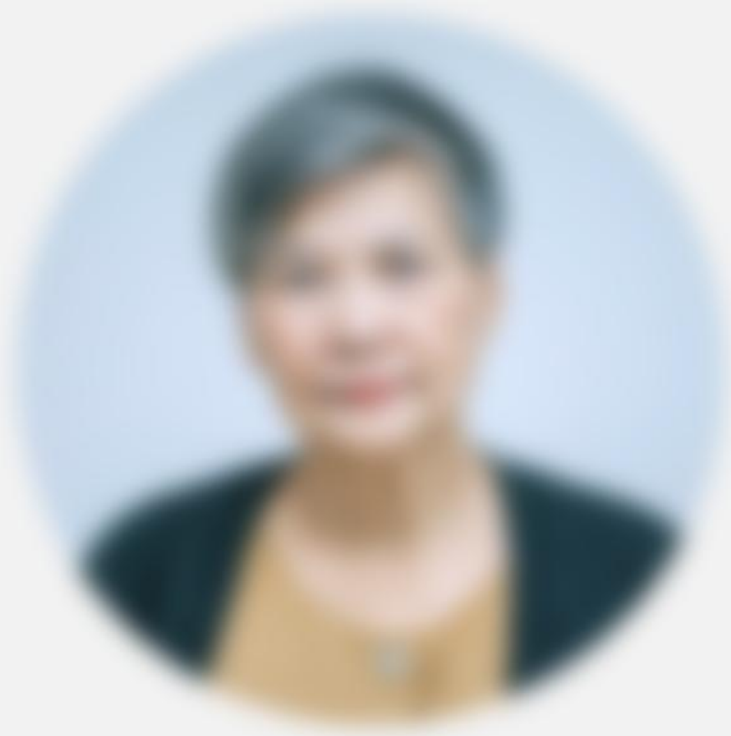


Patient Case 1 (cont.)

The previous 40-year-old patient with a 40-year smoking history who quit smoking 10 years ago, presents with persistent cough, shortness of breath, and significant unintentional weight loss over the past 3 months. Chest CT reveals a 4-cm nodule in the upper right lobe with mediastinal lymphadenopathy. Biopsy confirms adenocarcinoma, and molecular testing reveals EGFR exon 19 deletion. Patient receives conventional chemotherapy with regular imaging and clinical assessments every 3 months. After 18 months, he develops new brain metastases (3 detected) and new hepatic lesions. EGFR demonstrates persistent EGFR exon 19 deletion and an acquired T790M mutation. He is started on 1.

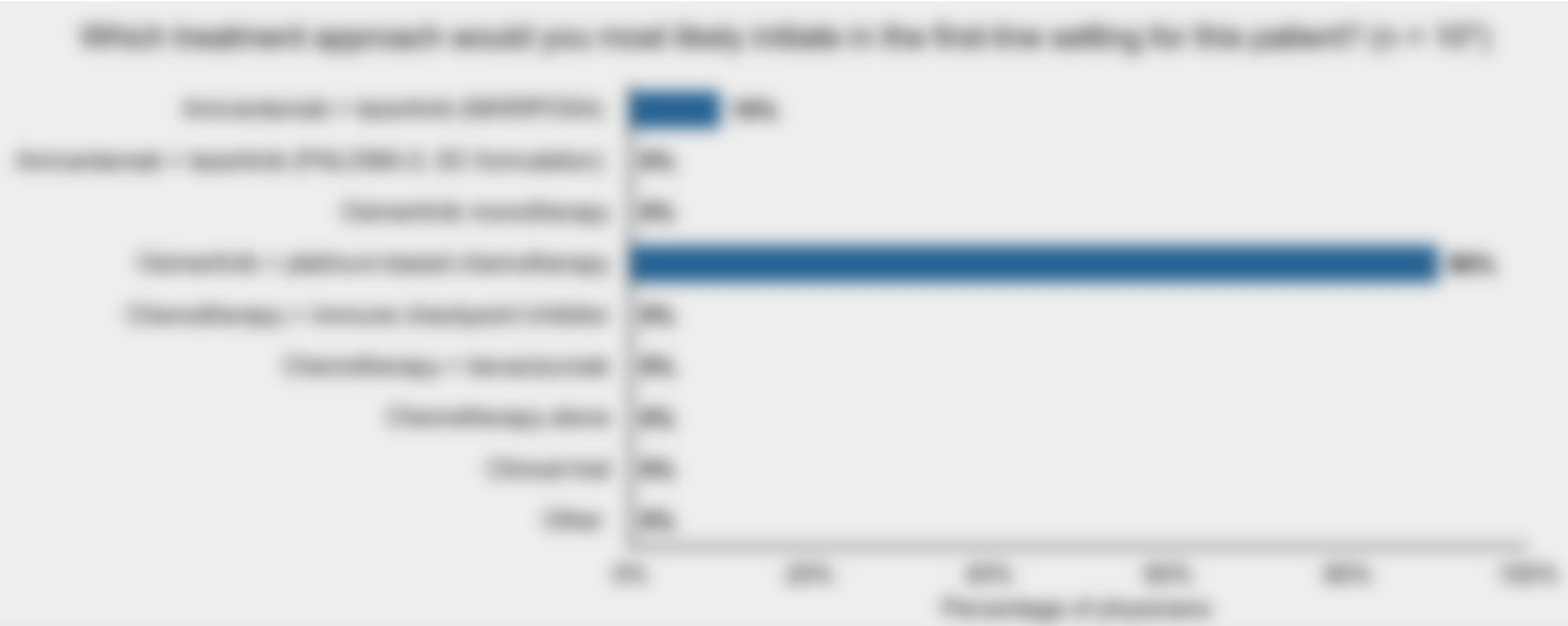
82% Selected Continuing Osimertinib + Adding Chemotherapy With SRS for a 65-Year-Old Man With Progression on Osimertinib Monotherapy With New Brain and Hepatic Lesions, ECOG PS 1

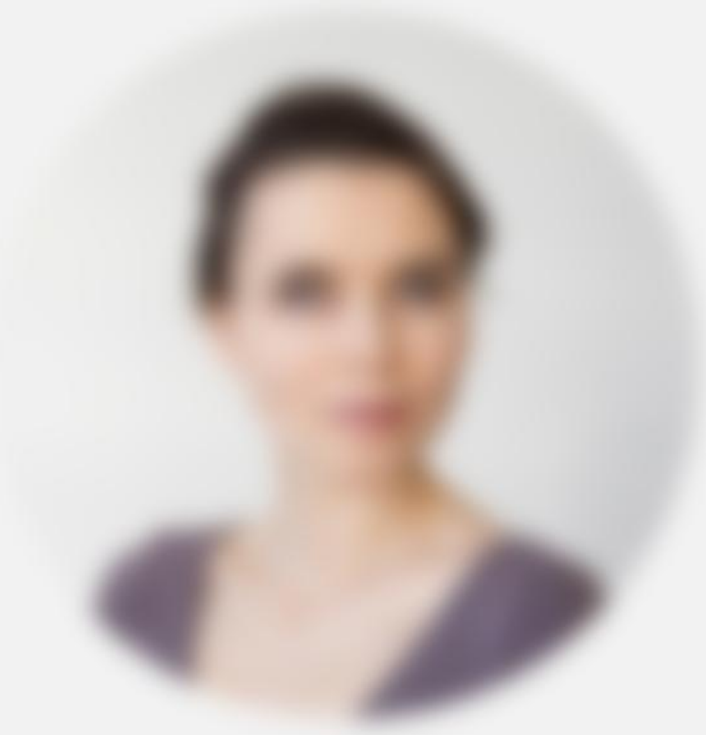




A 55-year-old woman presents with a 2-month history of persistent cough, mild dyspnea, fatigue, and unintended 4 kg weight loss. Her medical history is notable for well-controlled hypertension and type 2 diabetes managed with oral agents; she remains functionally independent. Recent PET-CT imaging reveals a 1.5 cm right lower lobe mass with bilateral pulmonary metastatic nodules, consistent with high disease burden. Brain MRI identifies multiple isodense brain metastases. Biopsy confirms lung adenocarcinoma harboring an EGFR exon 21 (L858R) mutation.

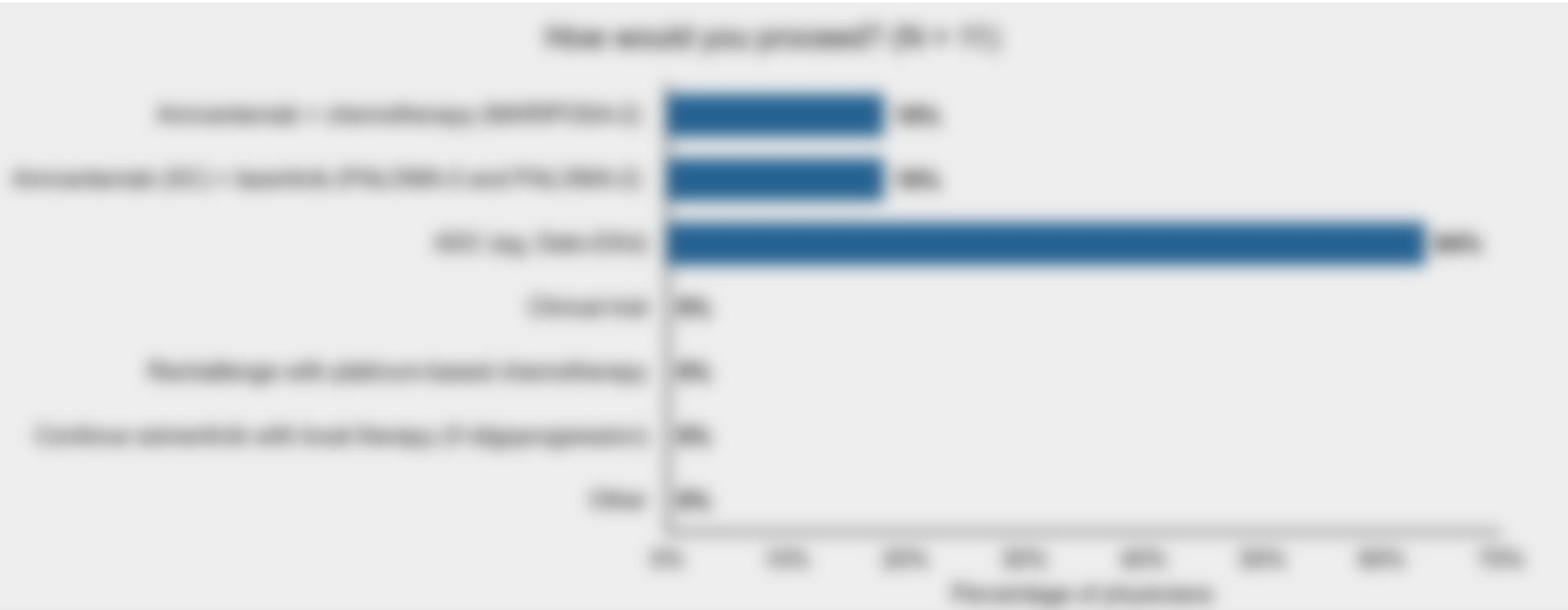
For a Patient With *EGFR* L858R Mutation, High Disease Burden, and Multiple Asymptomatic Brain Metastases, 90% Selected Osimertinib + Platinum-Based Chemotherapy





A 55-year-old woman with EGFR exon 19 deletion received osimertinib + platinum-permethane (PLA/PMA) as first-line therapy for high-burden advanced metastatic disease, demonstrating a partial response. After 12 months, she developed systemic progression with new hepatic lesions and worsening bone pain. Upon MRI confirmatory scans, the EGFR T790M is 1. She has 90 minutes from the infusion center, has limited caregiver support, and previously experienced grade 3 neutropenia on chemotherapy. APTA shows persistent EGFR exon 19 deletion without a targetable resistance alteration. Disease testing is pending to evaluate MSI/T overexpression.

The Majority of HCPs (64%) Chose ADC Therapy for a 59-Year-Old Woman With Progression After FLAURA2 and Hepatic Lesions, Worsening Bone Pain, Prior Grade 3 Neutropenia, and 90-Minute Travel Distance





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