

ASCO 2024:

Day 1
mNSCLC
highlights



ASCO 2024:

CROWN: lorlatinib now the preferred ALK TKI in 1L?

Unprecedented results were presented. mPFS with lorlatinib still not reached at 5-year follow up; the longest PFS reported in advanced NSCLC.

These results have created a lot of noise and set ambitions for other areas of precision medicine - **but what does it mean for future selection of ALK TKIs?**

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For the discussant, Dr. Jessica Jiyeong Lin, lorlatinib will be the preferred 1L ALK TKI for most patients. However, she also reminds us of the importance of lorlatinib's distinct toxicity profile. A sentiment echoed by others on X.

Chronic AEs including cognitive and mood issues, even at low grades, can significantly impact patient QoL. And these become particularly important when considering such a long PFS!

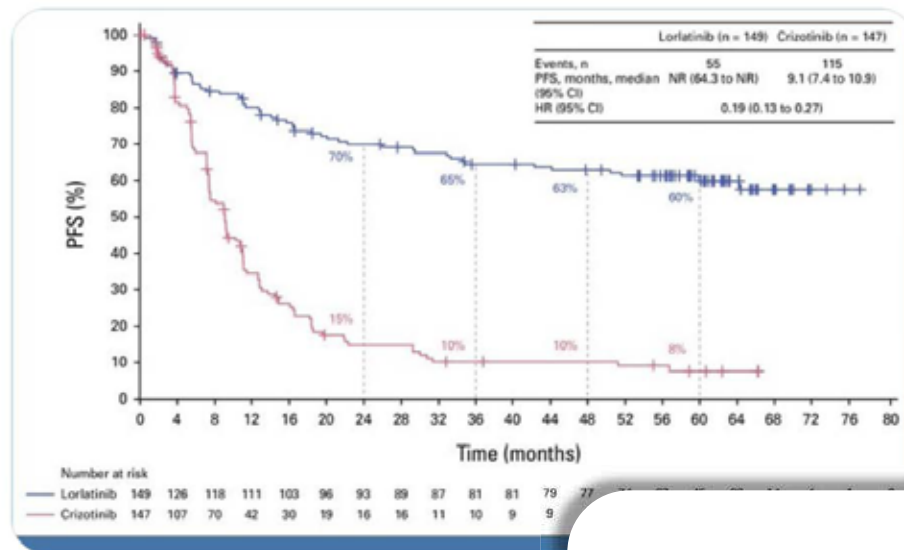
ASCO 2024:



Nathan A. Pennell MD, PhD, FAS... · 14h

Not to steal the thunder from the oral session today, but this is the **CROWN** PFS curve, more or less flat between 2-5 years and still 60% progression free at 5 years! [#ASCO24](#) [#LCSM](#)

Is it worth the side effects of lorlatinib to turn ALK+ NSCLC into CML?



Sanjay Popat @DrSanjayPopat · 11h

.@JessicaLinMD discusses **CROWN** and summarizes 1st line lorli is now the preferred option. Have to say I agree.

Great if @pfizer and @NICEComms can agree to allow UK patients to access lorli 1st line. [#ASCO24](#) @BTOGORG



Eric K. Singhi, MD @lungoncdoc · 11h

I really appreciate Dr. Lin's discussion re: updates from **CROWN** study, & I agree:

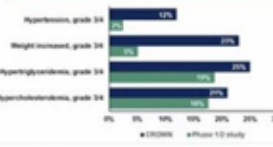
-Effective now, for most new patients with ALK+ mNSCLC, 1L lorlatinib will be my preference

-Helping my pts & team better understand & manage potential AEs is imperative [#ASCO24](#) @OncoAlert

Evaluating CROWN in the Context of ALK Treatment Landscape: Safety

- No new safety signals identified after 5 years of follow-up
- All-cause AEs and TRAEs leading to treatment discontinuation in 11% and 5% of patients, respectively
- Dose reduction in the first 16 weeks did not impact efficacy of lorlatinib

AEs and duration of lorlatinib exposure¹²



2024 ASCO ANNUAL MEETING

ASCO 2024:

More options in EGFR+ mNSCLC

In the past 12 months, the EGFR+ mNSCLC landscape has become more crowded with positive data from FLAURA2, MARIPOSA and MARIPOSA-2 – and new options continue to emerge.

How does the latest data from ASCO 2024 (PALOMA-3, MARIPOSA and HARMONi-A), shape EGFR+ NSCLC management?

ASCO 2024:

- The s.c. formulation of amivantamab strengthens the case for ami+laz (with reduced rates of IRR and VTE). However, even as we learn to improve the patient experience, there remains a lack of clarity regarding the optimal use case for the regimen.
- Positive PFS data achieved with ivonescimab when combined with chemotherapy could result in a new treatment option for patients who have progressed on EGFR TKI*. However, questions remain regarding how regulatory bodies will respond given the study was only performed in Asia and where ivonescimab would find its place in the evolving landscape.

*already approved in China

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ASCO 2024.**

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