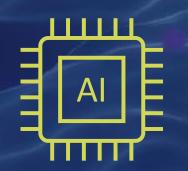
Day 2 highlights Al & KRAS G12Ci in NSCLC





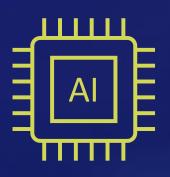
Al touching every aspect of cancer research and care

In keeping with the 'science' component of ASCO's theme this year, AI as a topic has been at the forefront. "Not a distant concept, it is a present reality"¹.

Talks have focused on the dramatic evolution underway and use cases presented have ranged from the simple (e.g. simplified and more accessible patient consent forms) through to cutting edge, multimodal modals incorporating pathology and clinical findings to predict prognosis.

1 Lynn M. Schuchter as part of President's Address





We are in a bubble. People who know this [AI] are optimistic. People who don't know, may not even know how rapidly the AI systems are getting into their clinical space.

Dr. Judy Gichoya Navigating Artificial Intelligence to bring better care to all (ASCO 2024)





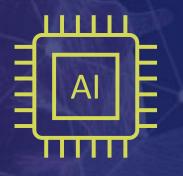
A plethora of AI use cases have been presented across day 2 - and more will be found across the program - ~60 abstracts at this year's ASCO with AI in the title. Of interest:

Predicting treatment response (e.g. radiomic biomarkers) A common topic across oncology is the need for better biomarkers. Radiometric biomarkers may provide a solution – less costly, require less diagnostic time and can predict responders independent of known criteria.

Improve patient engagement in screening (MyEleanor) An interesting concept utilising a conversational AI tool to engage directly with patients to discuss rescheduling screening appointments and explore barriers to screening.

While not the solution for all (almost 50% did not engage with the call), the screening appointments increased by 36%.





But, as with any AI discussion, words of caution were also flagged:

Using but not relying on AI: Both the science and the art (i.e. human component) are required

Governance / ethics: ASCO, as well as other authorities in the health space e.g. WHO, have published guidance and principles for the responsible use of AI in health

Bias: Models reflect the biases that exist in training data, nicely highlighted in Dr. Judy Gichoya's talk

The patient perspective: Patient opinions are diverse, and

receptivity differs across use cases. Transparency is key to patients know when AI is being used and when their data is contributing to future AI





KRAS G12Ci in NSCLC: the challenge of choice?

To date, the efficacy of KRAS G12Ci monotherapies in NSCLC have been relatively modest, spurring interest in combination approaches to achieve deeper and more durable responses.

A number of different combination approaches are being pursued i.e. combinations with ICIs, SHP2 inhibitors. EGFR inhibitors and chemo. Each

approach is routed in solid scientific rationale, and some have shown success in other cancer types (e.g. RCC, CRC).





Positive data from a series of early combination trials in NSCLC were reported at ASCO and all are proceeding to phase III.

While the advances are positive, the options don't appear to be thinning out, leading Dr Adrian Sacher to suggest we are entering the "Wild West of KRAS":

- Trials competing for patient accrual progress may be slow
- Oncologists needs to reconcile competing drugs and strategies - need for biomarkers to inform patient

selection

Some regimens diverge sharply from SoC – will this generate some hesitancy?





Wild West of KRAS

- The rapid rise of KRAS G12Ci monotherapy and combinations has created a rapidly expanding & chaotic drug development frontier
- Great opportunity is paired with great risk
 - Optimized KRAS G12Ci monotherapy and combinations will revolutionize treatment
 - Caution must be exercised in developing 1L combination strategies in unselected patients that diverge sharply from SOC
 - Oncologists and regulators may quickly find themselves struggling to reconcile multiple competing drugs & strategies; <u>thoughtful</u> <u>randomized studies and biomarkers are</u> <u>desperately needed in this space</u>



"The Cowboy", John C. Grabill, Library of Congress



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Dr. Adrian Sacher Conscious Coupling – Selecting Rational Partners for KRAS Inhibitors (ASCO 2024)



Keep following us for more from ASCO 2024.

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