

# NIEUWE DOELGERICHTE BEHANDELMOGELIJKHEDEN VOOR LONGKANKER

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Dr. Jules Derks

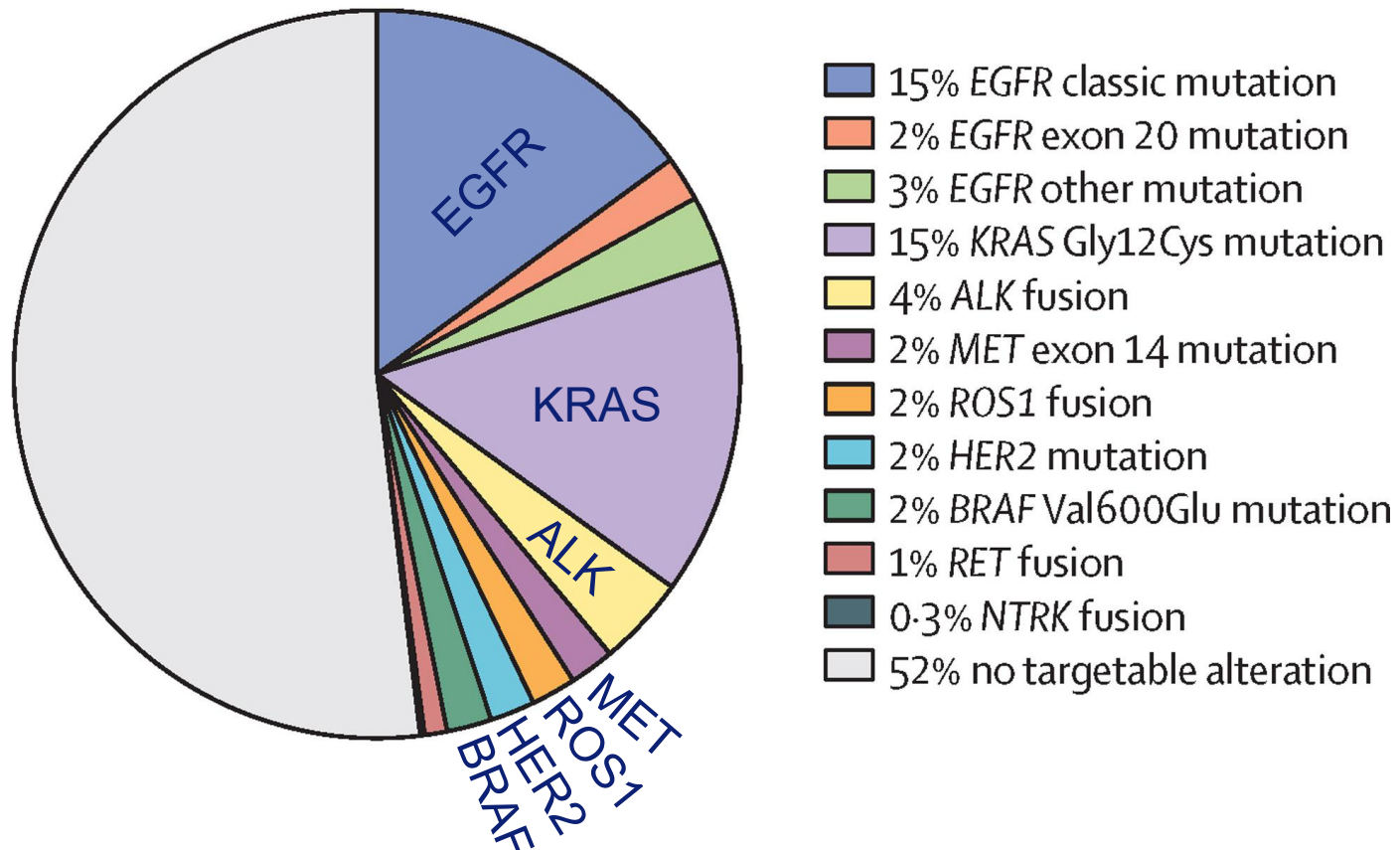
Longarts Erasmus MC



# WAT GAAN WE VANDAAG BESPREKEN?

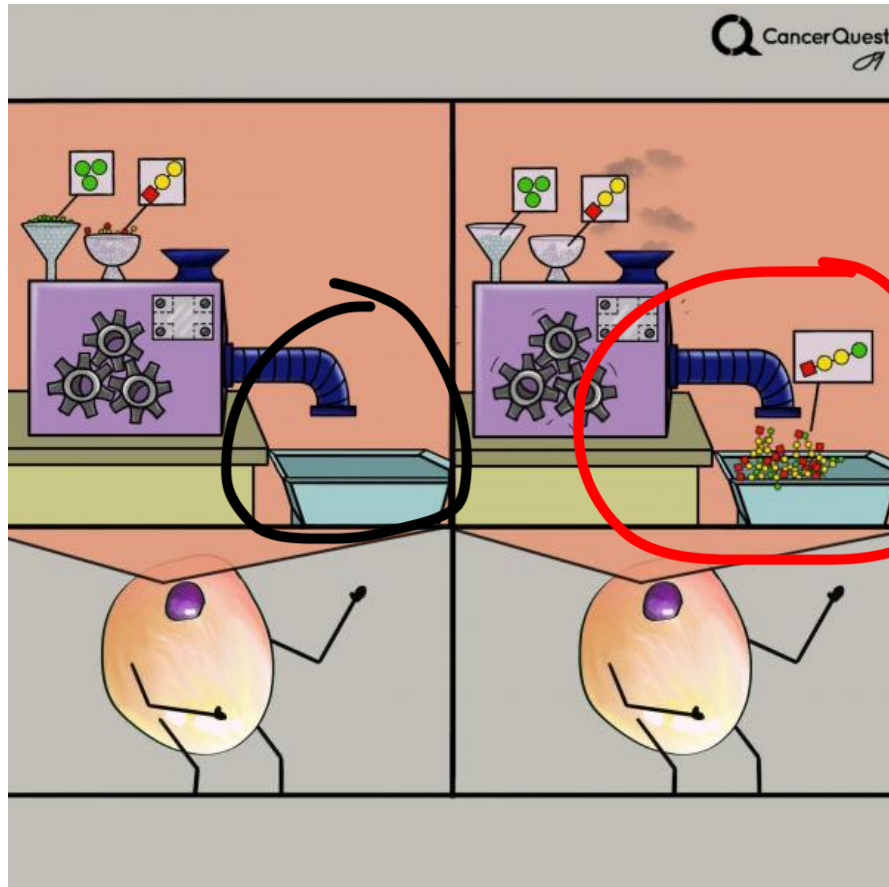
- Welke vormen van longkanker met een behandelbare mutatie zijn er?
- Wat is een mutatie – fusie eiwit?
- Overzicht van de verschillende typen van behandeling
- Enkele voorbeelden
  - EGFR
  - ALK, ROS1
  - KRAS

# WELKE VORMEN VAN LONGKANKER MET EEN BEHANDELBARE MUTATIE ZIJN ER?

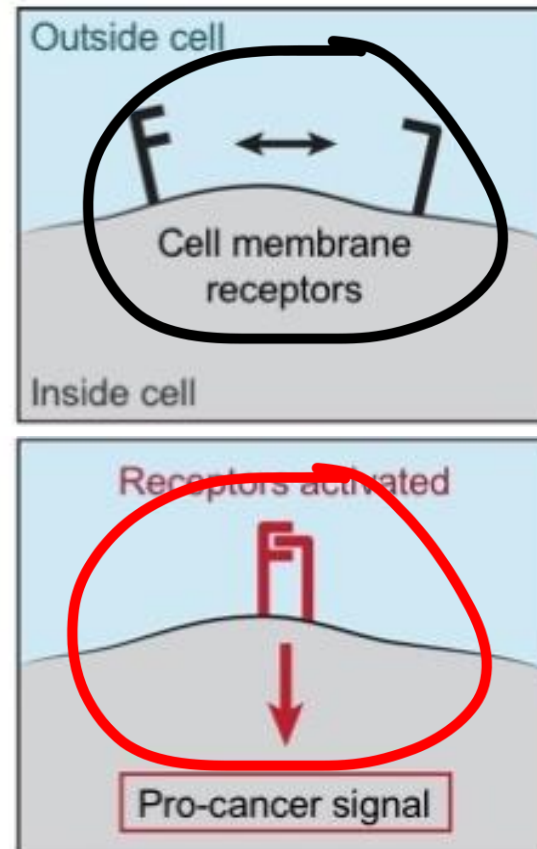


# WAT IS EEN MUTATIE EN FUSIE EIWIT?

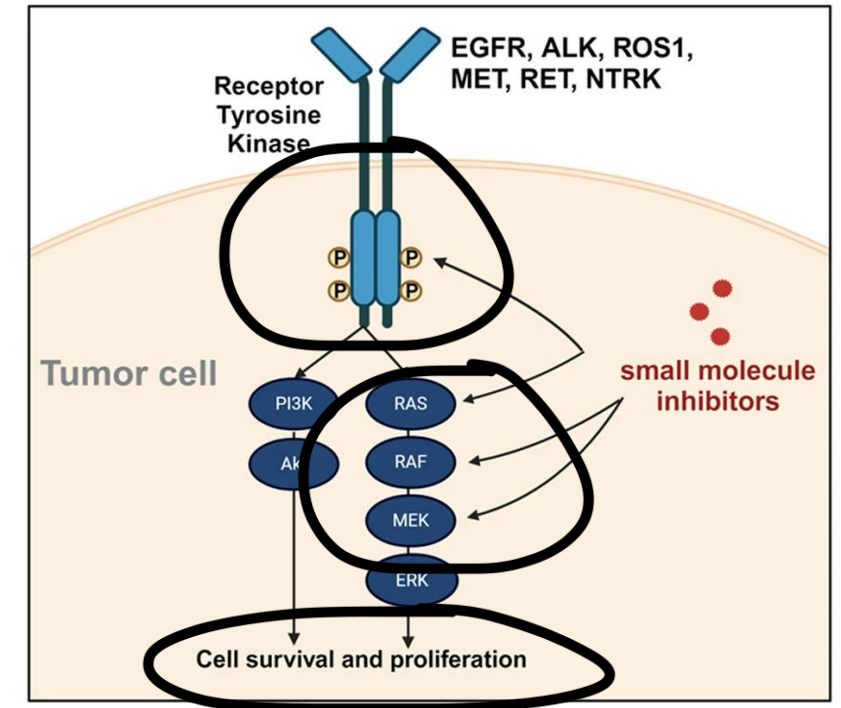
Normaal



Aan/uit

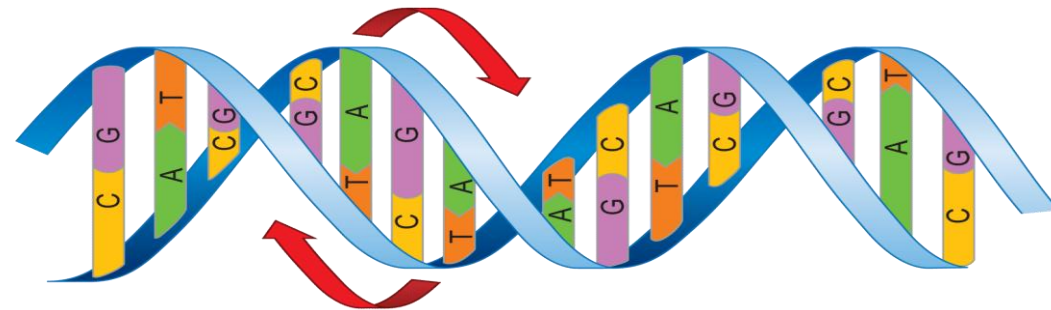


Mutaties/fusies

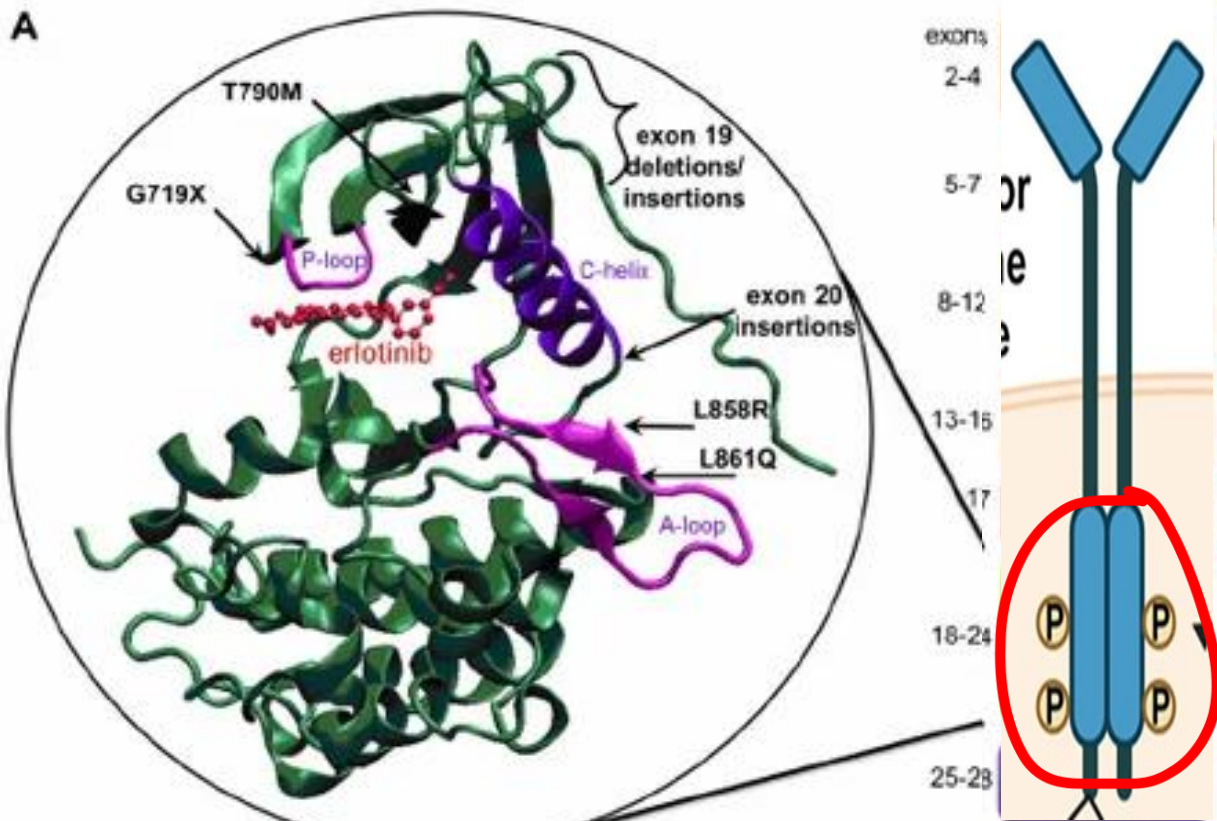


# HOE ZIET EEN RECEPTOR MUTATIE ERUIT? (EGFR-HER2)

EGFR -eiwit



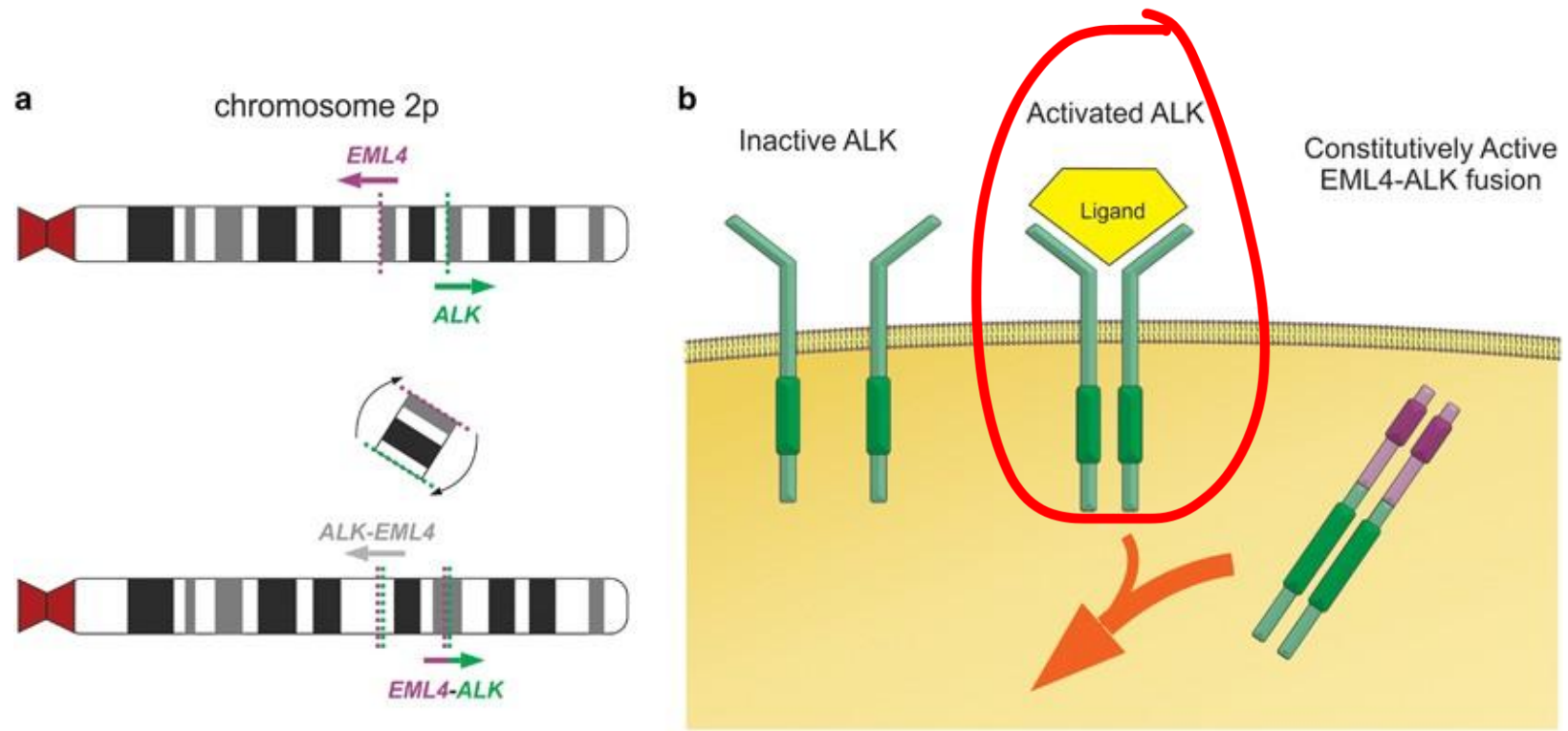
DNA code



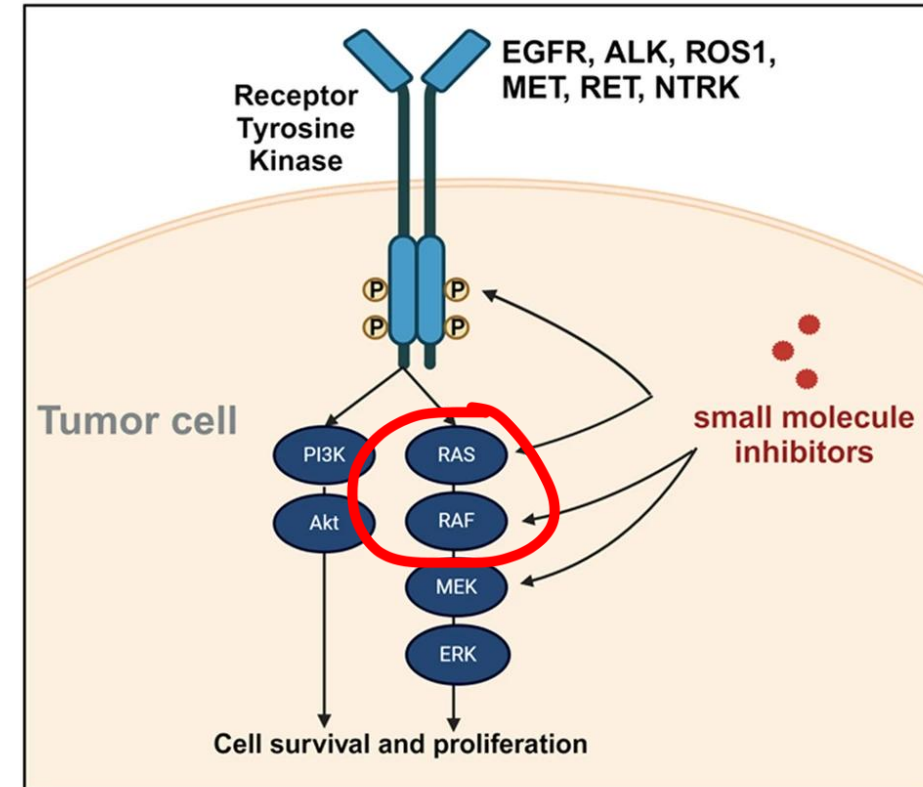
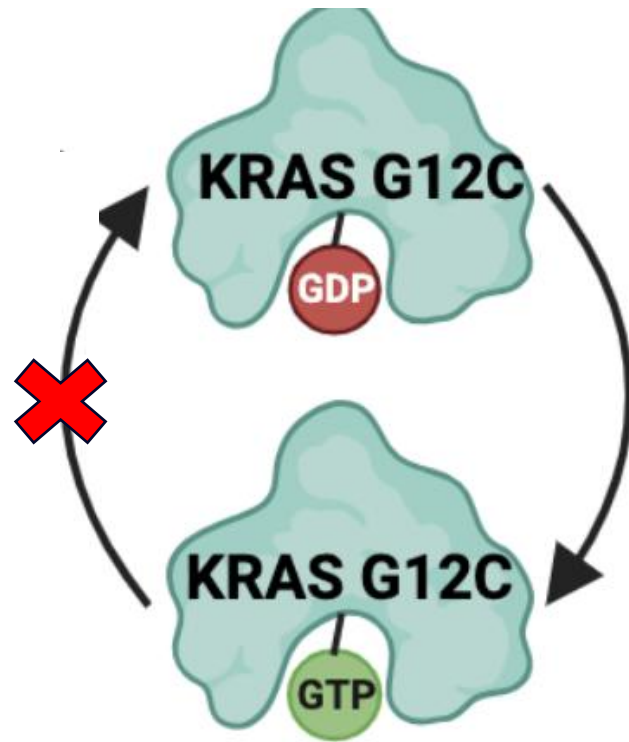
	exon 18	19	20	21
<b>EGFR mutation</b>	G719X	insertions deletions	insertions	T790M L858R L861Q
<b>frequency (%)</b>	(3%)	(1%) (45%)	(5-10%)	(40%) (2%)
<b>sensitivity to EGFR TKIs:</b>	sensitive	sensitive sensitive	resistant*	resistant sensitive sensitive
<b>gefitinib</b>				
<b>erlotinib</b>				
<b>afatinib</b>				

\*T790M, Y703H FGFR sensitive

# HOE ZIET EEN FUSIE EIWIT ERUIT? (ALK-ROS1-RET-NTRK)

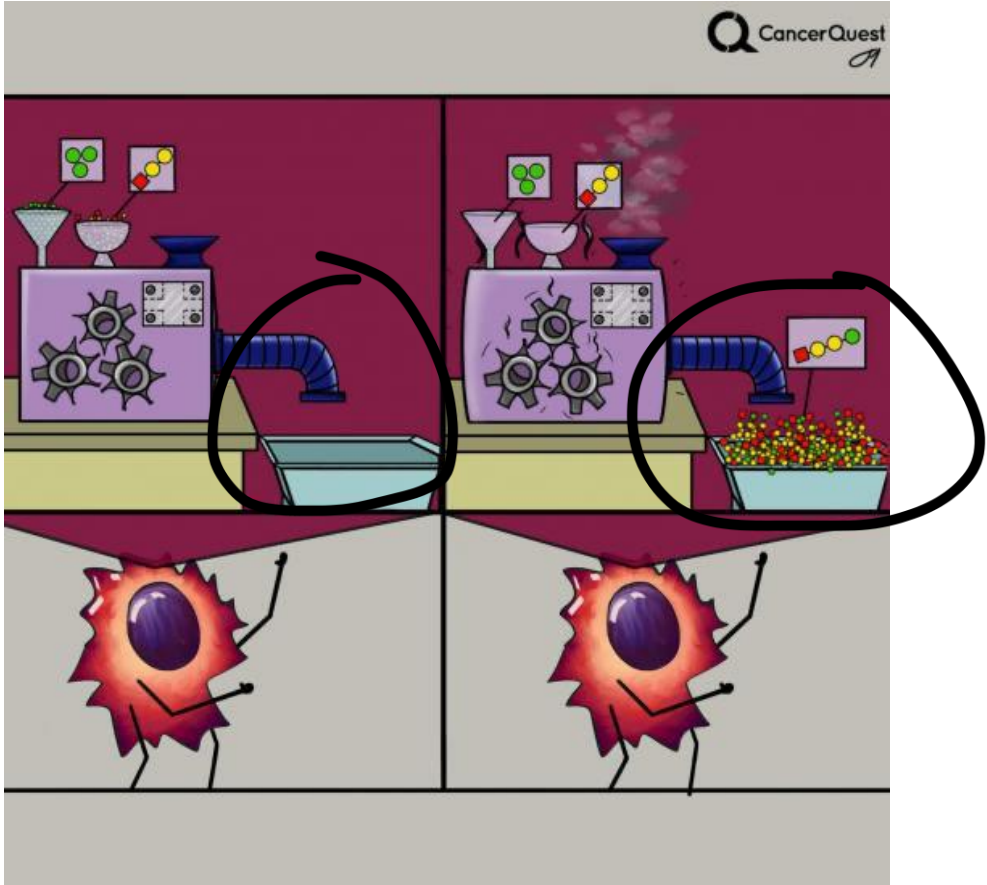


# HOE ZIET EEN SCHAKEL EIWIET ERUIT? (KRAS – BRAF)

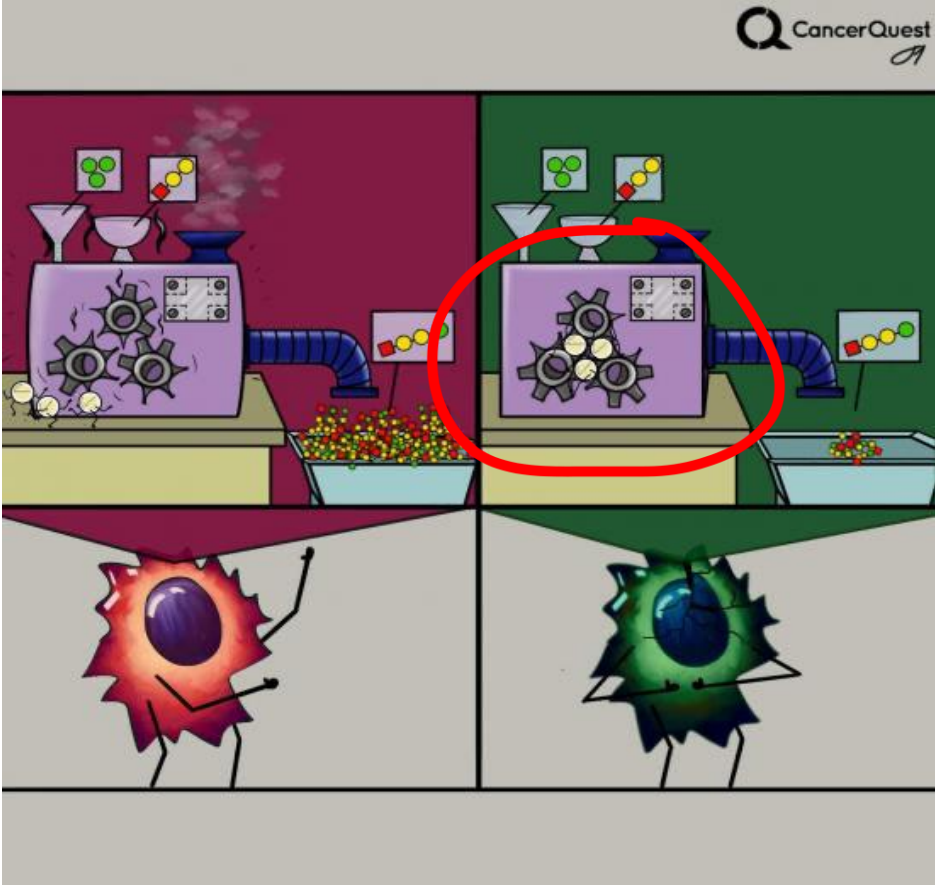


# HOE WERKT DOELGERICHTE BEHANDELING?

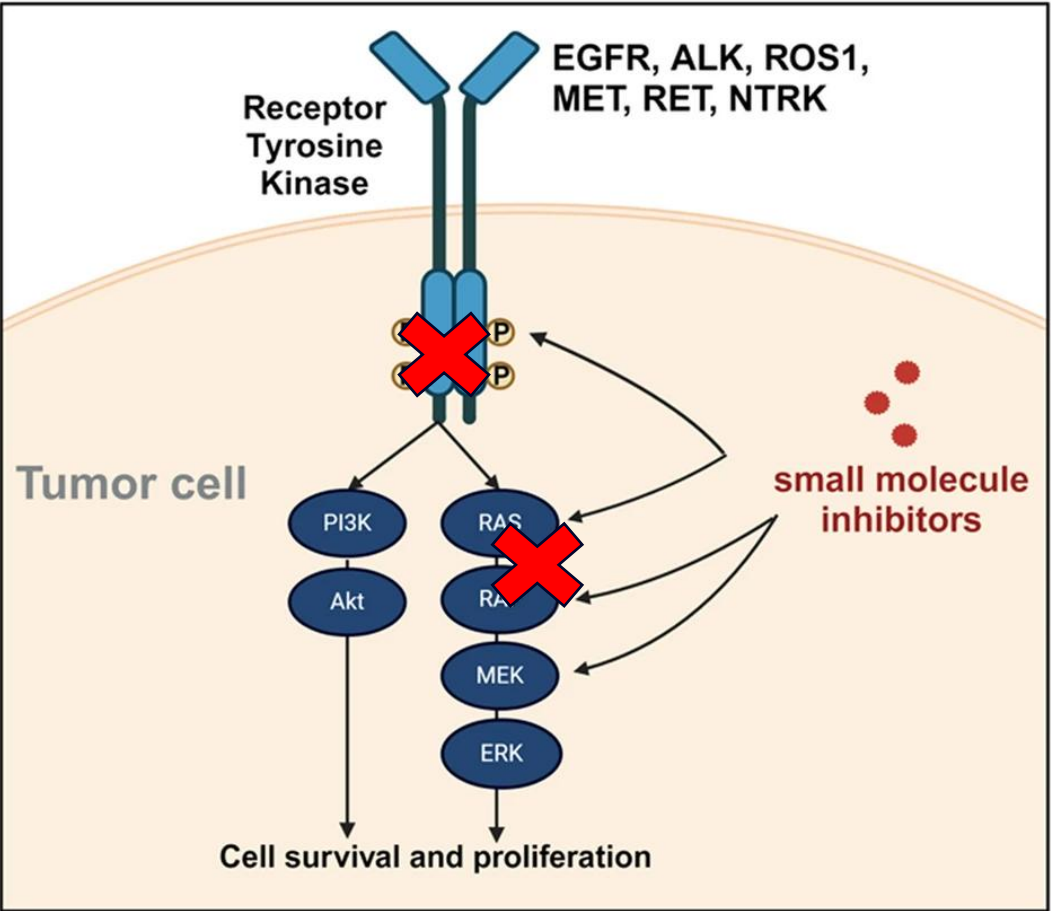
Mutatie – fusie



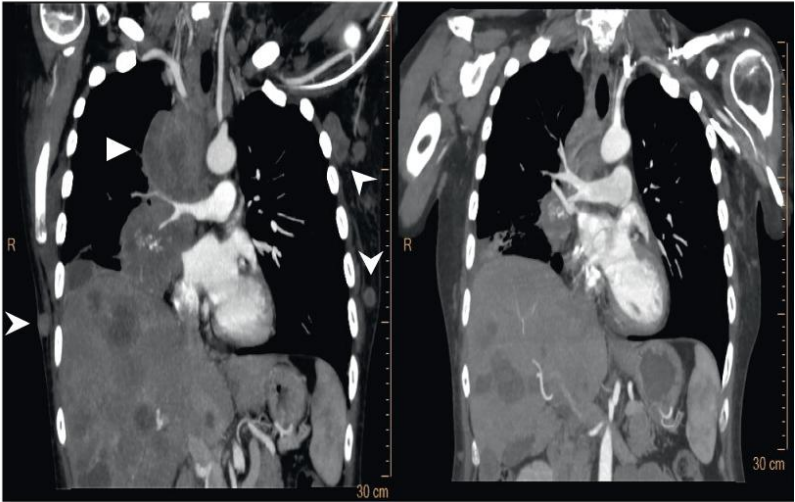
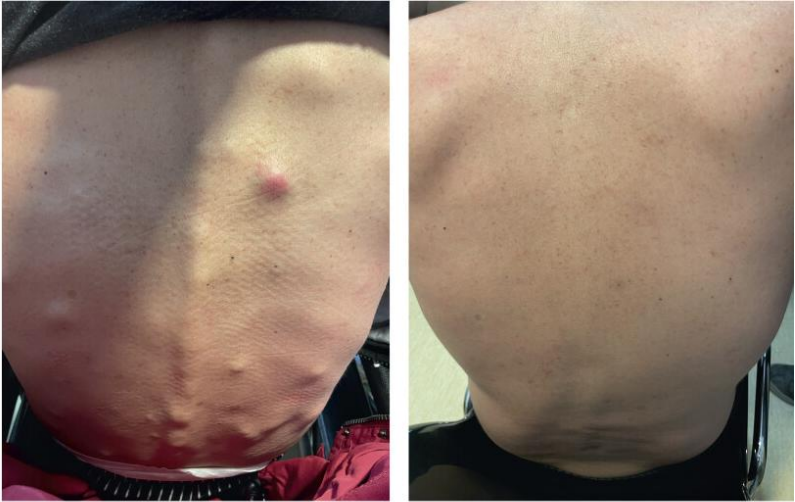
Doelgerichte behandeling



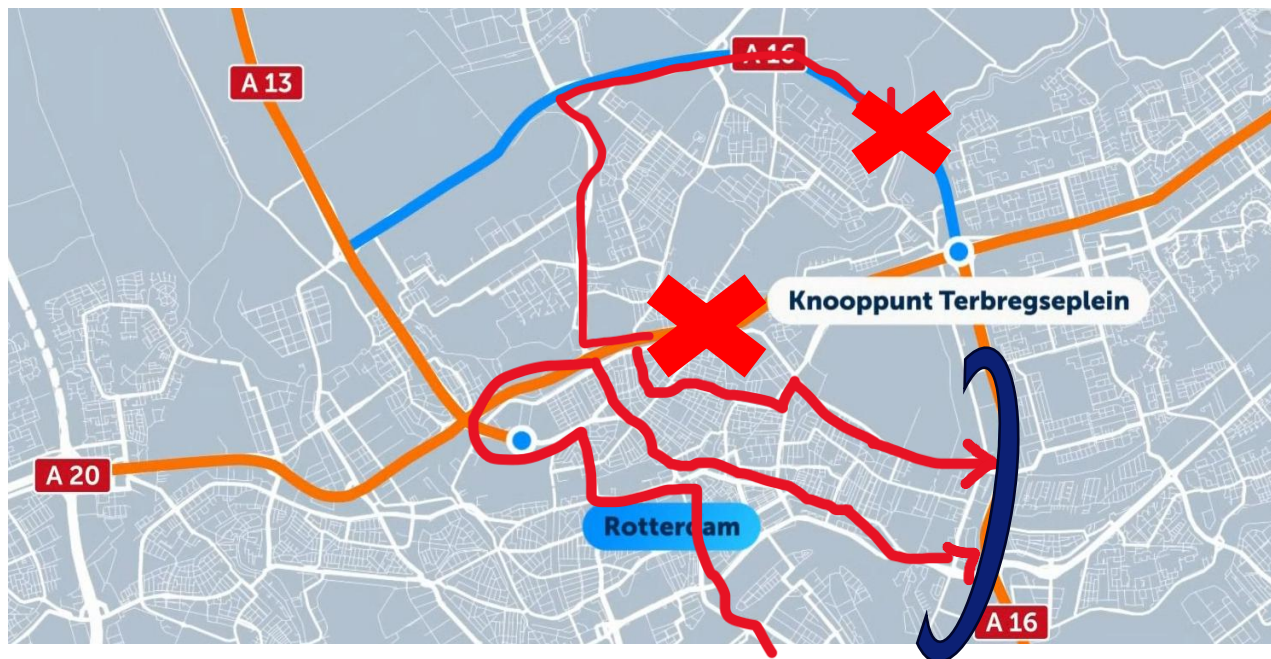
# RECEPTOR MUTATIE – FUSIE EIWIT – SCHAKEL EIWIT



# DOELGERICHTE THERAPIE: STOPPEN VAN DE SIGNAAL DOORGANG



# DE KANKER ZOEKT EEN OMWEG DE DOKTER ZOEKT EEN NIEUW 'OBSTAKEL'



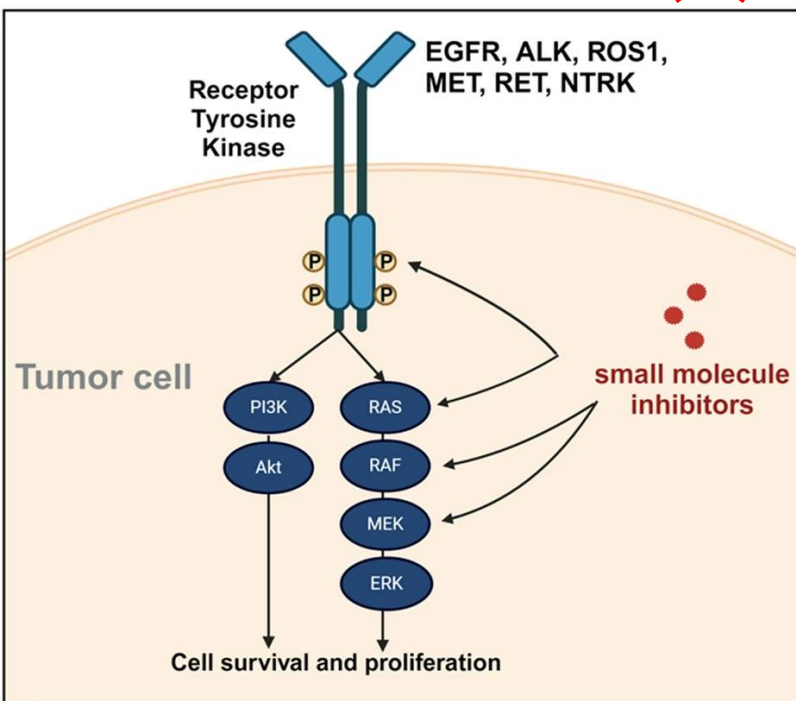
Nieuwe doelgerichte behandeling (mutatie)

Bouwen een obstakel (chemotherapie)

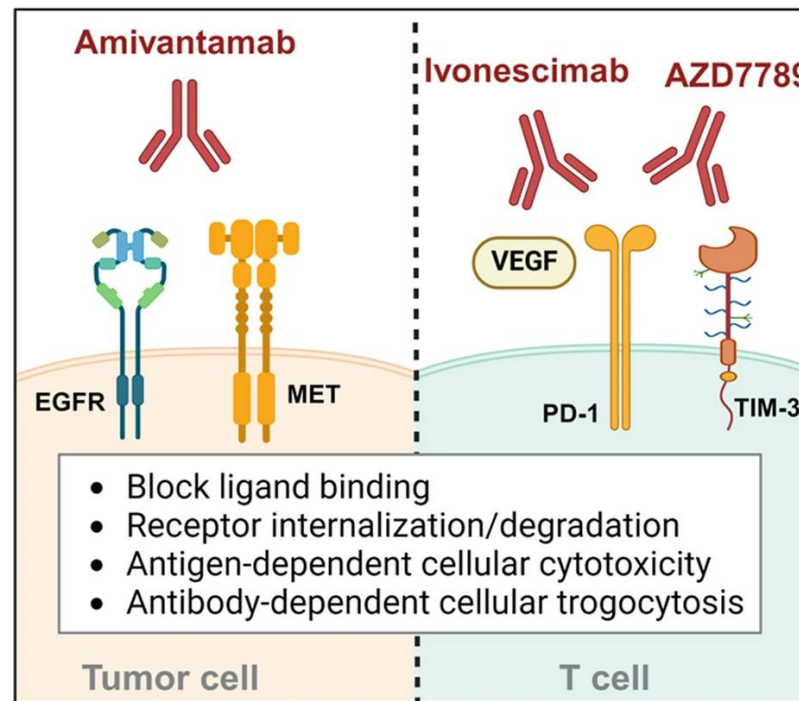
Nieuwe biopt (of bloed) kunnen inzicht geven in de omwegen die de kanker neemt

# OVERZICHT VAN DE VERSCHILLENDE TYPEN VAN BEHANDELING

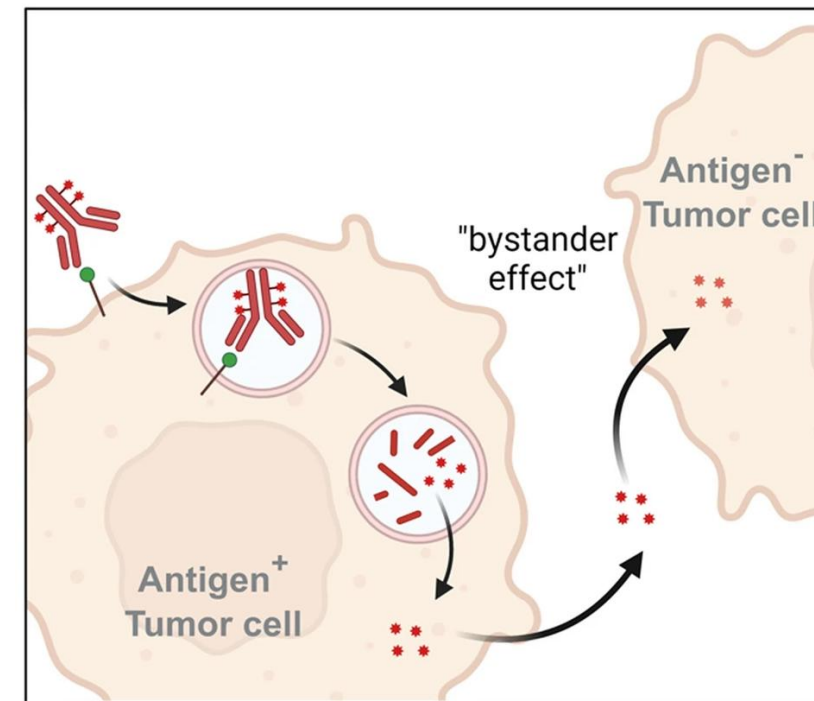
## Doelgerichte therapie ✗



## Doelgericht antilichaam ✗



## Doelgerichte chemotherapie



# ALK - EGFR DOELGERICHTE THERAPIE

2<sup>de</sup> generatie



3<sup>de</sup> generatie

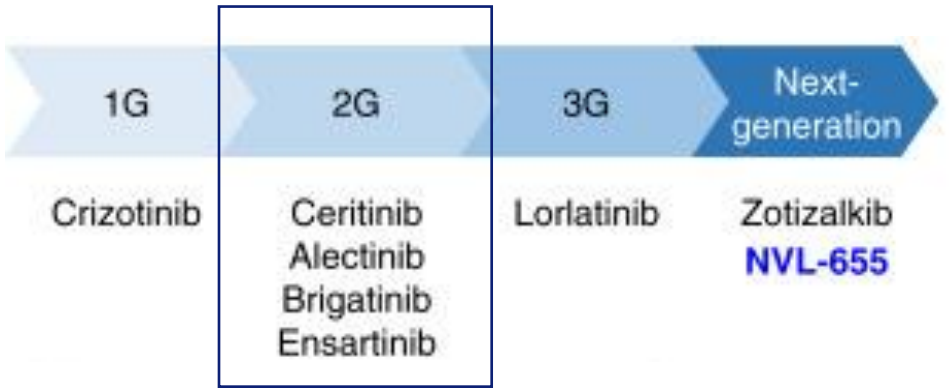


2<sup>de</sup> > 1<sup>ste</sup> (Crizotinib)

2<sup>de</sup> >? 3<sup>de</sup> (Lorlatinib)

**Per generatie doel: minder bijwerkingen, meer en langer effect**

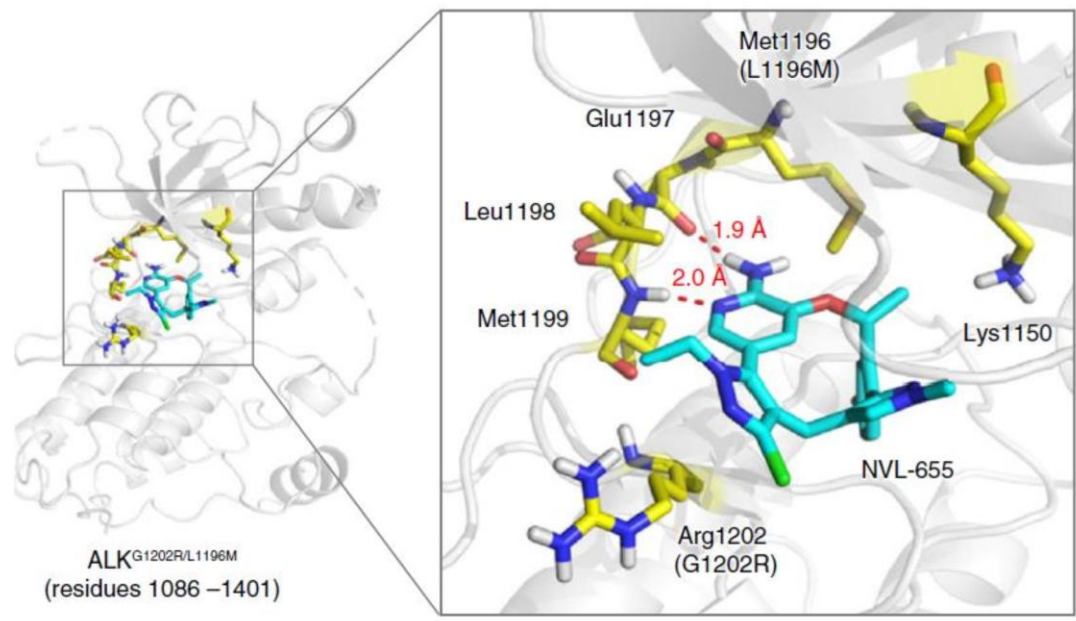
# DOELGERICHT ALK OMWEG— 3<sup>DE</sup> (LORLATINIB) EN 4<sup>DE</sup> (NELADALKIB)



2<sup>de</sup> generatie omweg: G1202R

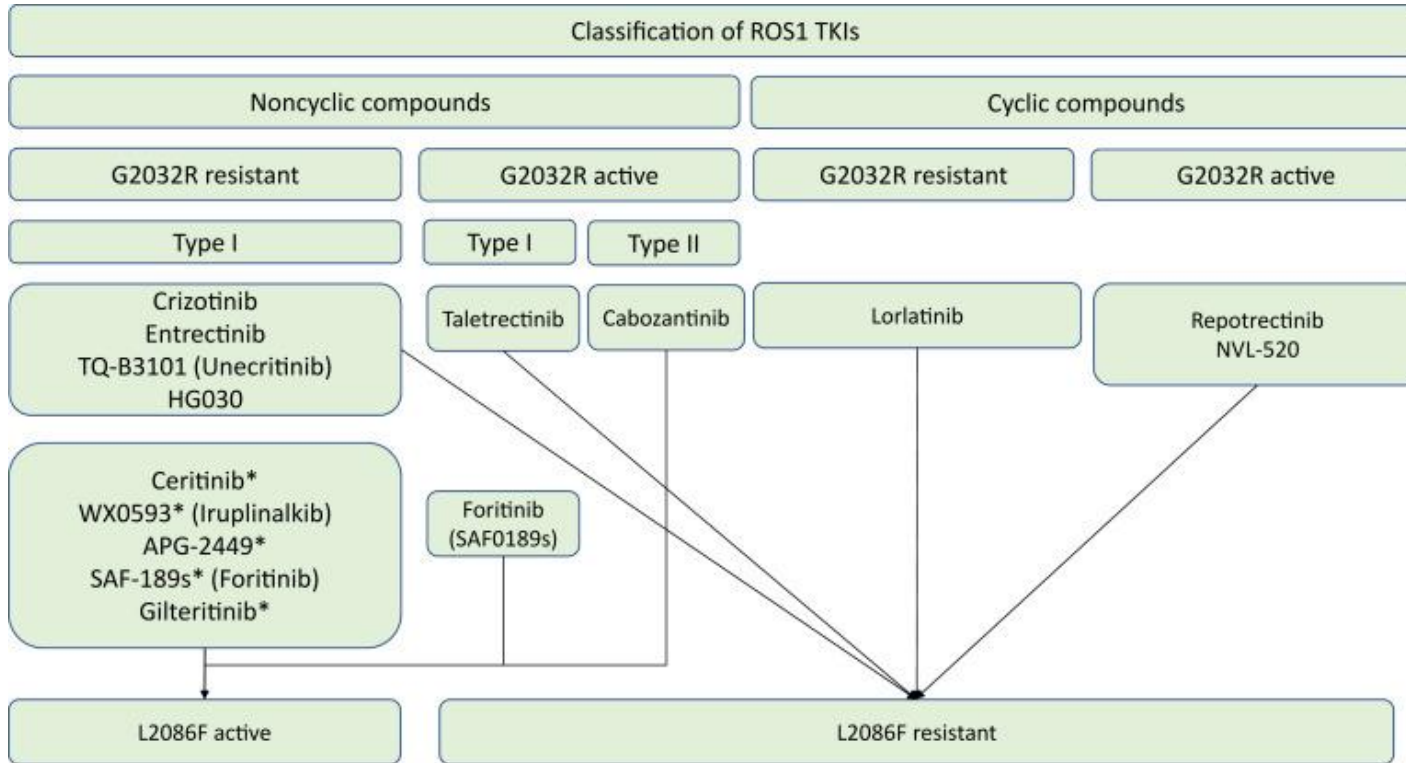


3<sup>de</sup> gen. G1202R/XXX



Neladalkib is nog niet regulier beschikbaar

# ROS1 (CRIZOTINIB)



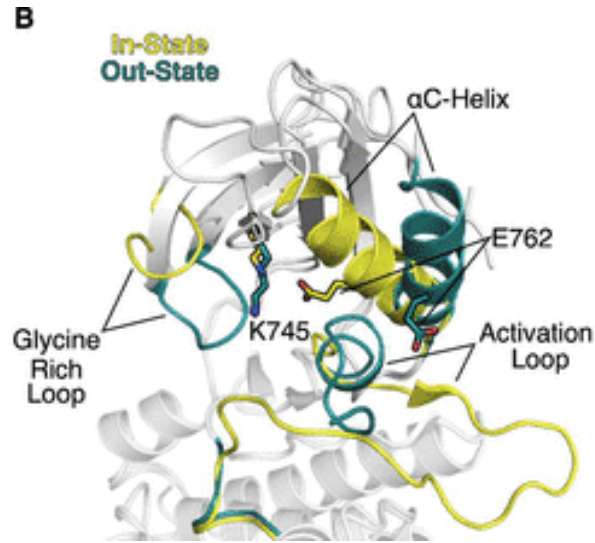
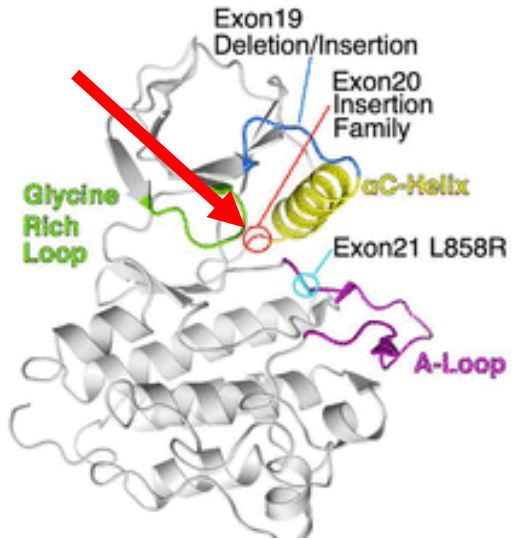
\* Projected to inhibit L2086F from structure but no pre-clinical or patient data reported

## Crizotinib omweg: G2032R

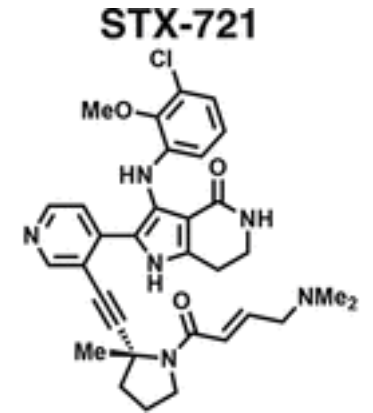
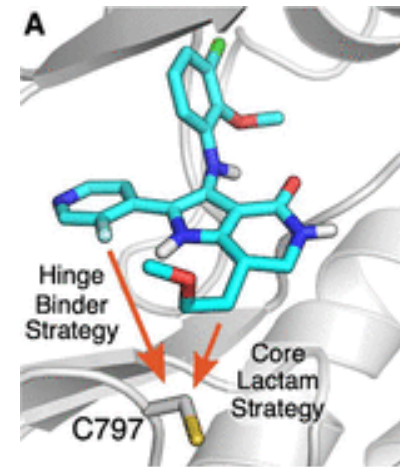


Lorlatinib - Repotrectinib – Zidesamtinib (niet regulier beschikbaar)

# OSIMERTINIB OMWEG DOOR EEN NIEUWE DNA FOUT? (4<sup>DE</sup> GENERATIE STX-721)



Nieuw 'lego' blokje dat wel past



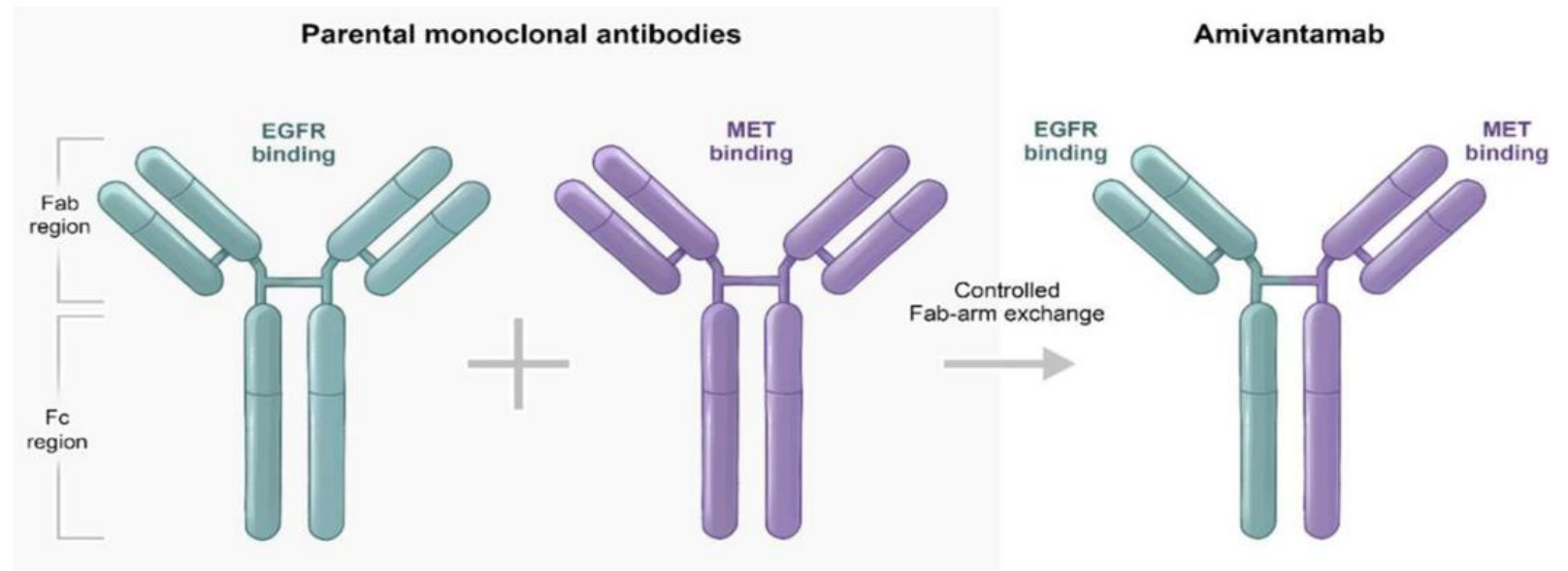
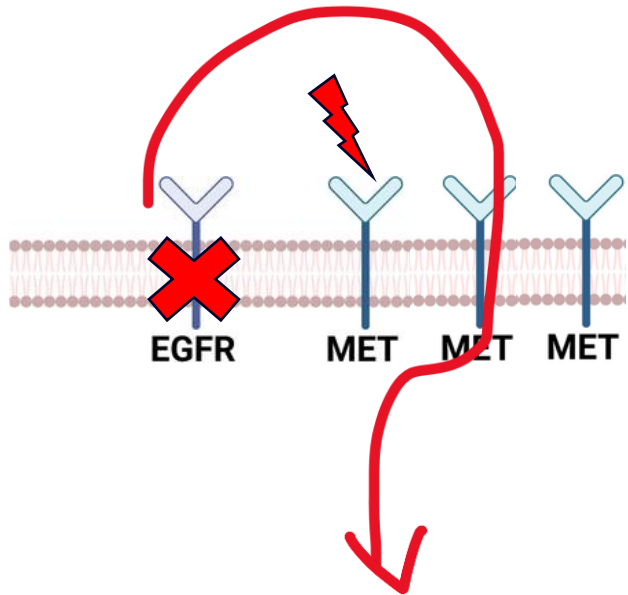
C797S mutatie



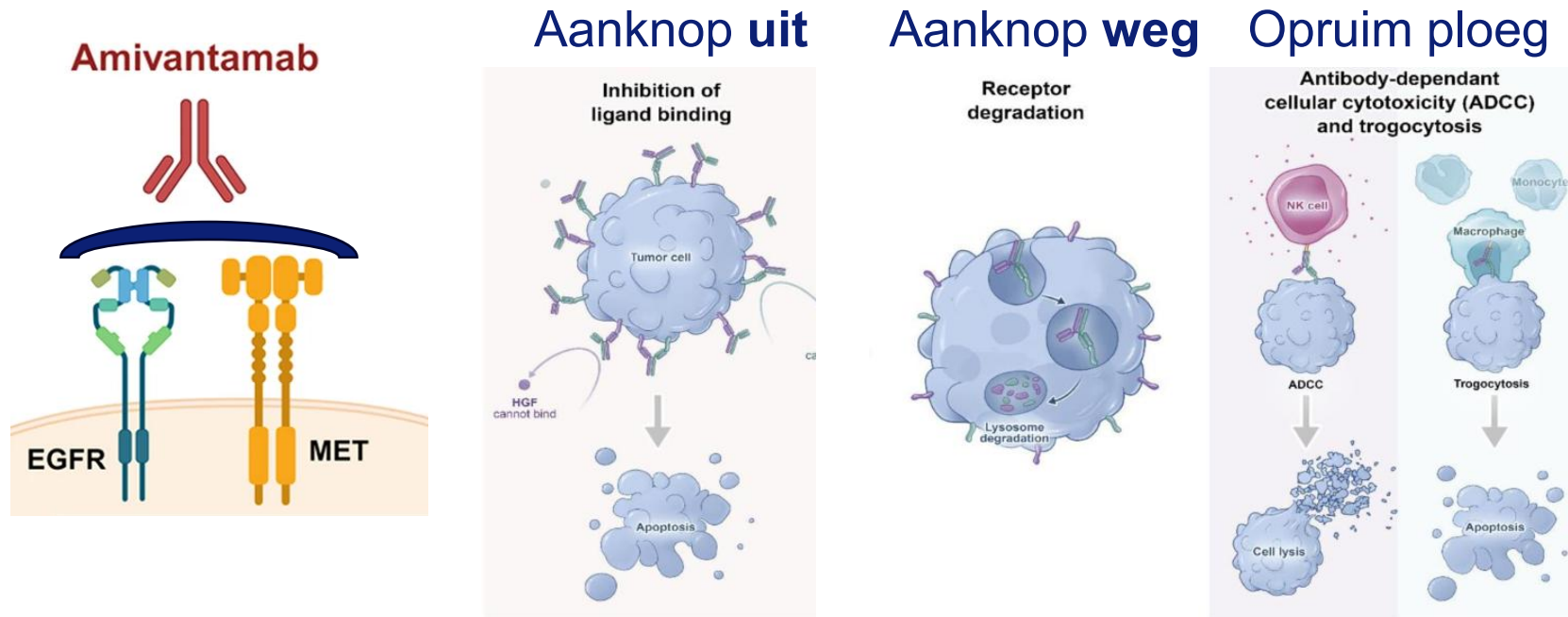
STX-721 is nog niet regulier beschikbaar

# WAT ALS OSIMERTINIB NIET MEER/VOLDOENDE WERKT DOOR HET NEMEN VAN DE (MET) OMWEG?

Bi (twee) specifiek antilichamen tegen EGFR - MET

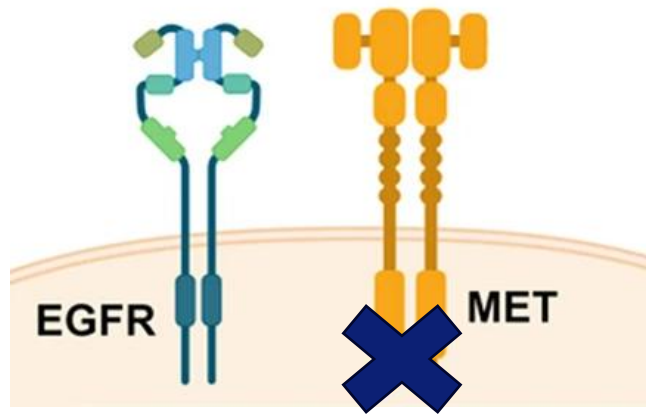


# AMIVANTAMAB VOOR EGFR GEMUTEERD NSCLC MET DE 'MET' OMWEG



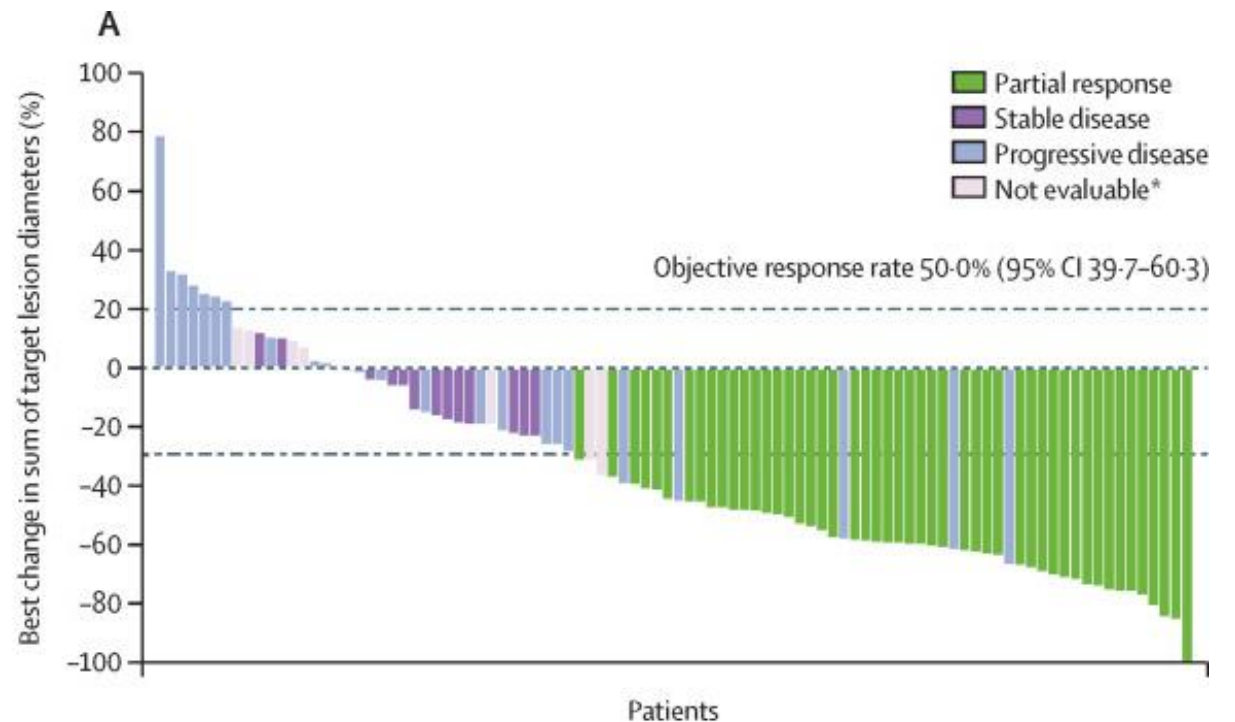
Amivantamab is nog niet regulier beschikbaar

# TEPOTINIB-CRIZOTINIB VOOR EGFR GEMUTEERD NSCLC MET DE 'MET' OMWEG

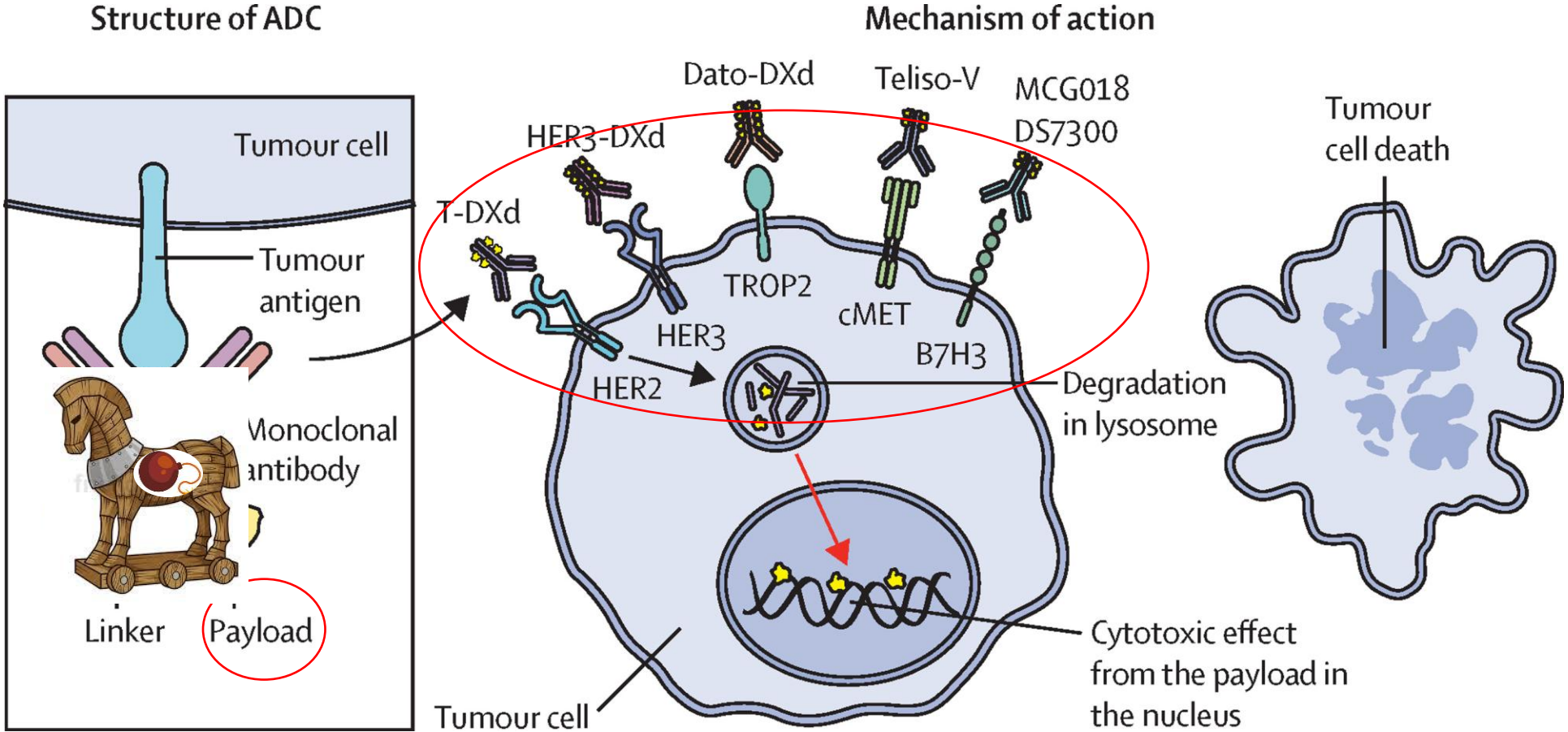


Tepotinib/Crizotinib  
(MET remmer)

Osimertinib + Tepotinib (50%)  
(Insight II)



# WAT ALS ER GEEN NIEUWE DNA FOUT OF BEHANDELBARE OMWEG IS?

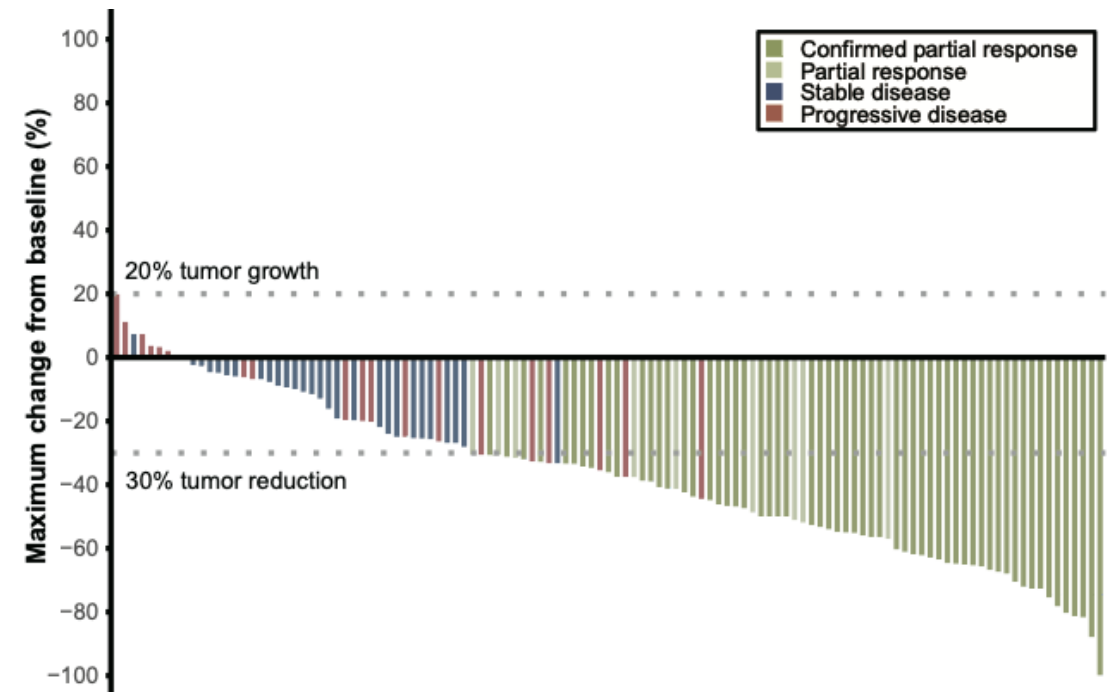
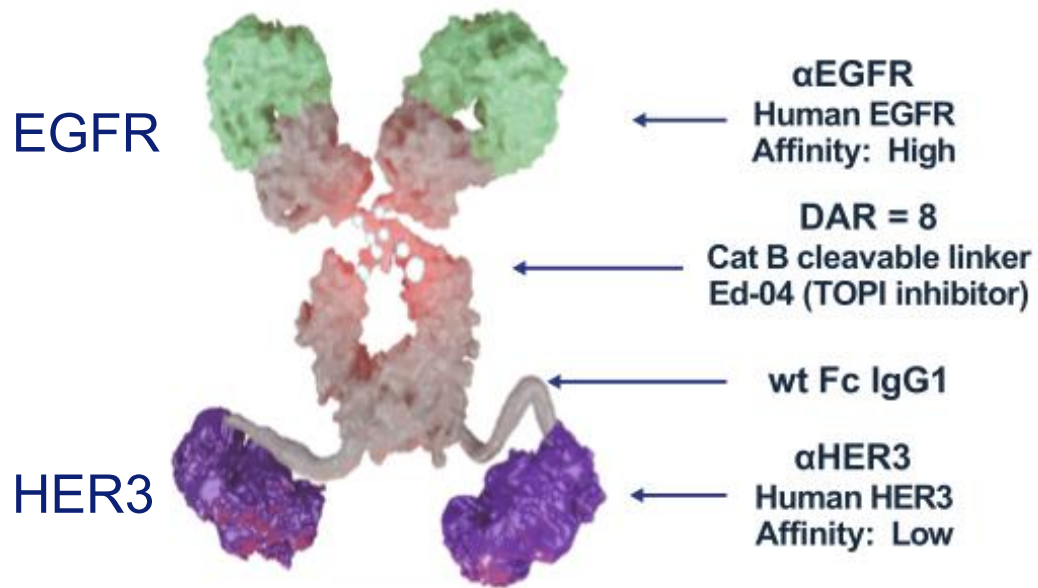


# WAT ALS DOELGERICHTE THERAPIE NIET MEER WERKT

## ANTILICHAAM CHEMOTHERAPIE (IZA-BREN – TELISO-V – T-DXD – SAC-T)

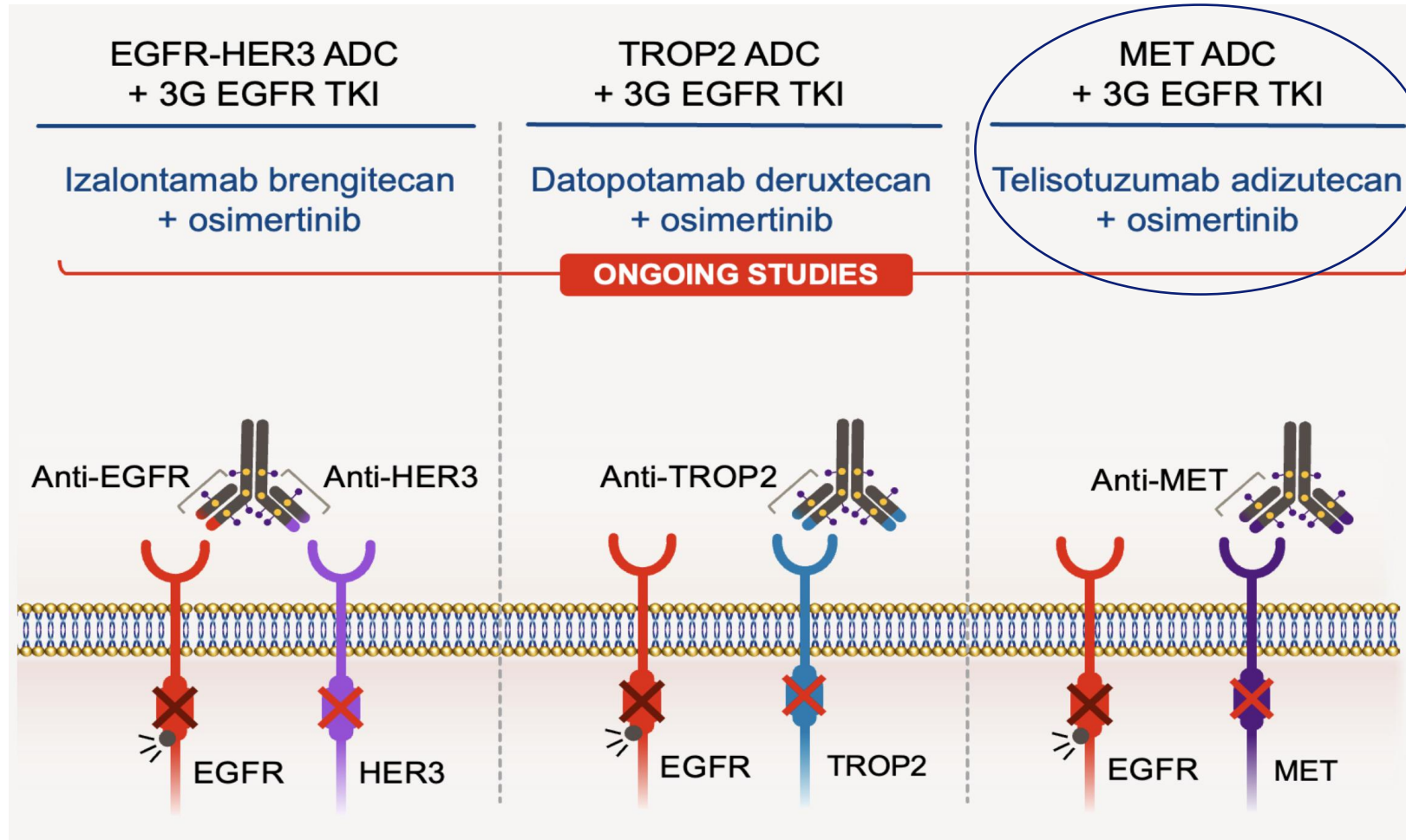
EGFR gemuteerd ORR 49-66% (na/voor chemotherapie)

Iza-bren (BL-B01D1)



MAAR: 69% graad III bijwerkingen → het geeft nagenoeg dezelfde klachten als bij chemotherapie!

# WELKE TYPEN ANTILICHAAM CHEMOTHERAPIE (ADC) WORDEN MOMENTEEL ONDERZOCHT SAMEN MET DOELGERICHT?

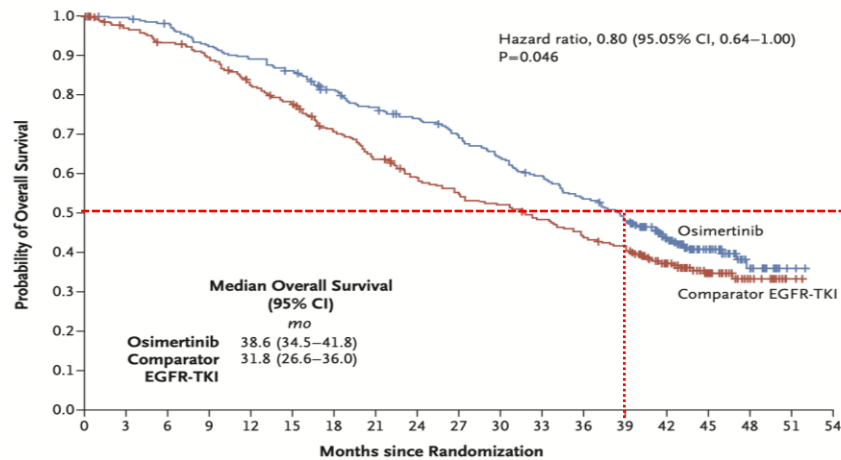


ADC's zijn nog niet regulier beschikbaar

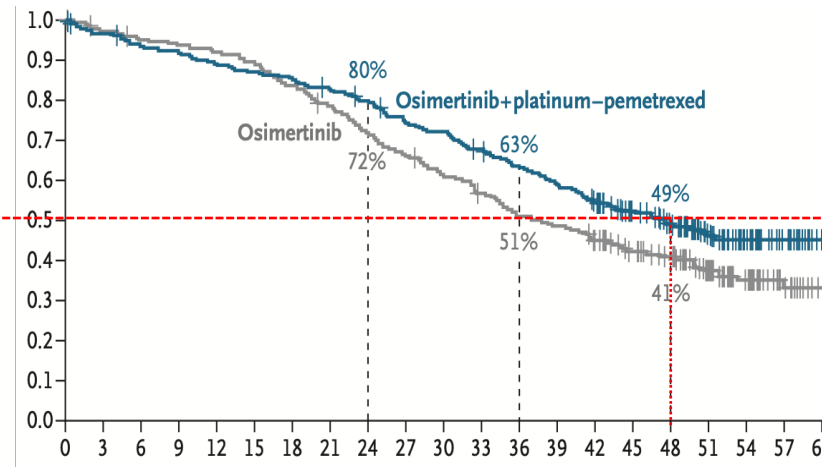
# DOELGERICHT + CHEMOTHERAPIE / ANTILICHAAM: IS DAT BETER?



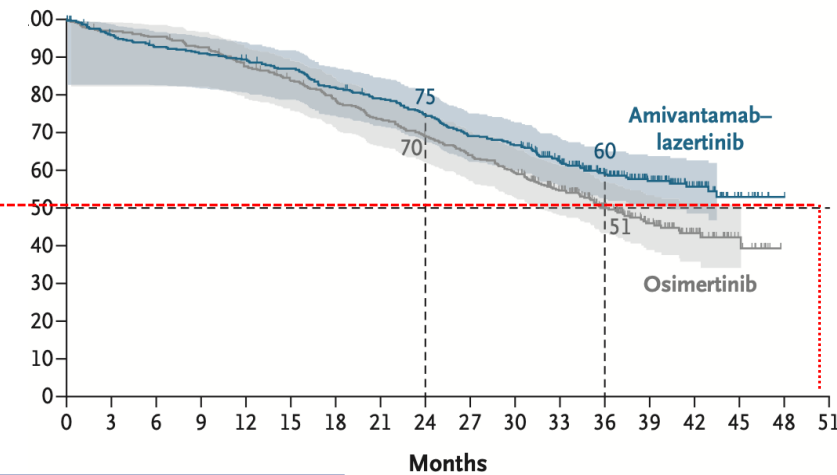
## Osimertinib



## Osimertinib + chemotherapie



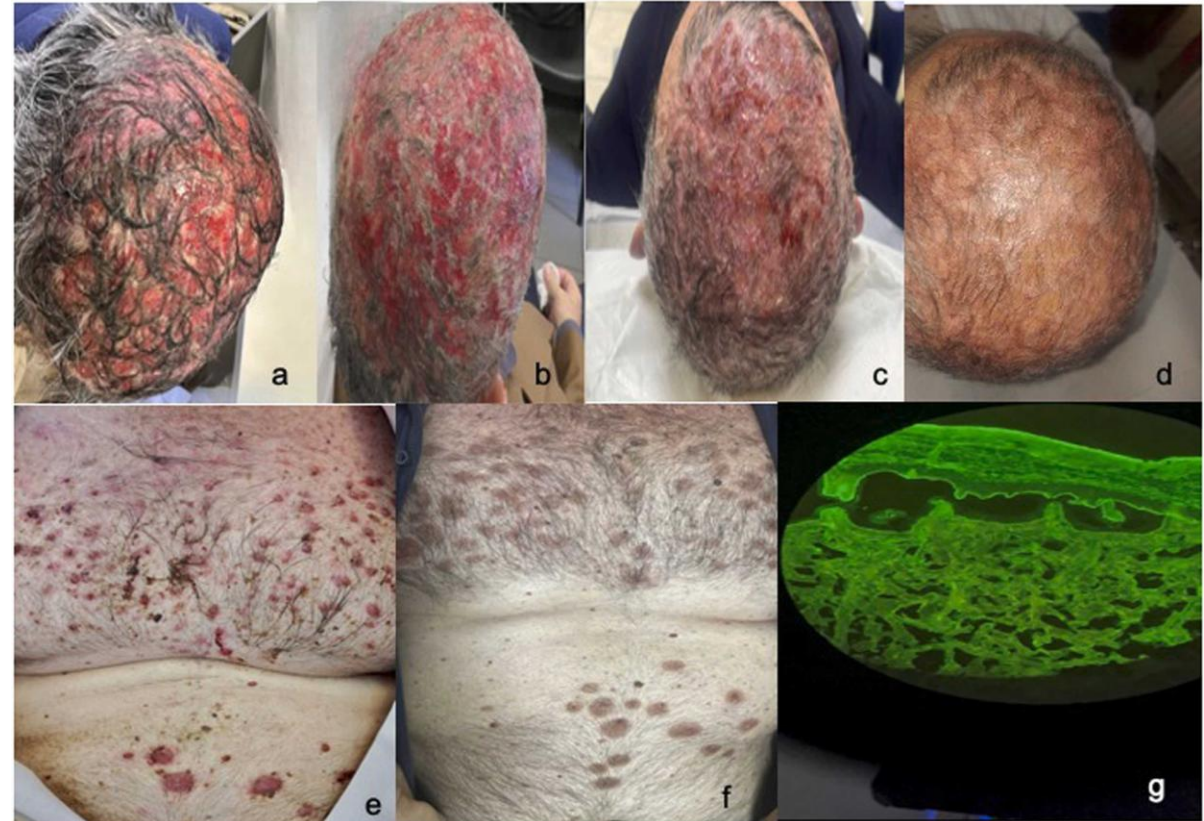
## Lazertinib - Amivantamab



Extra behandelingen geven betere langere termijn uitkomsten

# TOEVOEGEN VAN BEHANDELING HEEFT OOK NADELEN

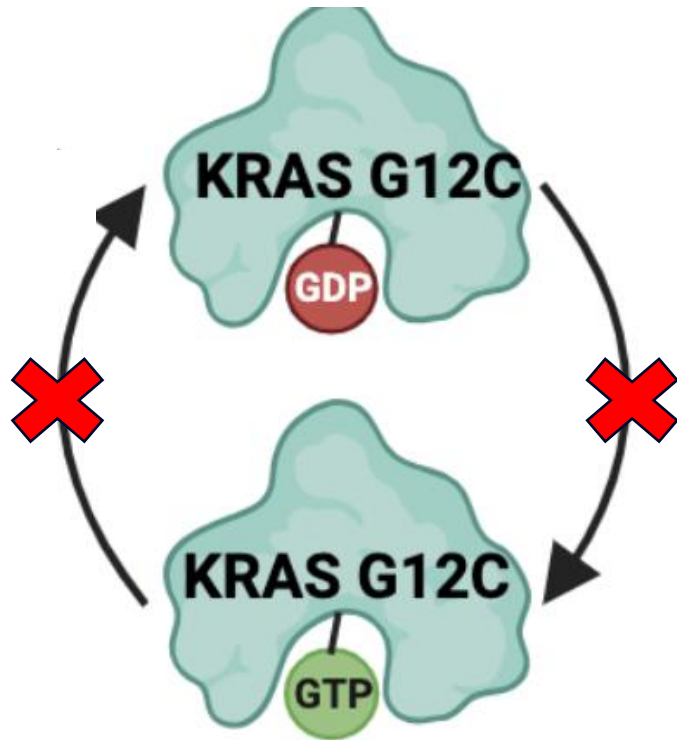
## EGFR (HUID) – MET (OEDEMEN)- CHEMOTHERAPIE (MALAISE)



# BEHANDELINGEN VOOR NSCLC BIJ DRIVER MUTATIE/FUSIE VERWACHTE EFFECT – BIJWERKINGEN - BESCHIKBAARHEID

Medicijn	Tumorrespons (ORR)	Langdurige controle (PFS)	Weinig bijwerkingen	Hersenmetastasen	Beschikbaar in NL	Gebruiks-gemak
Doelgericht (b.v. Osimertinib - Alectinib)						
Doelgericht & chemotherapie						
Doelgericht + antilichaam						
Doelgerichte chemotherapie				?		
Immuuntherapie						

# SCHAKEL EIWIT KRAS: VEEL VERSCHILLENDE VARIANTEN (G12V, G12D, G12B, G13..)



A

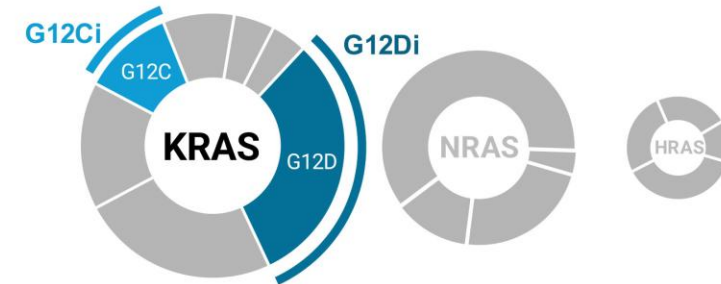
## Mutant selective KRAS inhibitors

### Hits

- only one specific KRAS mutant

### Spares

- other KRAS mutants
- wild-type KRAS, NRAS, and HRAS



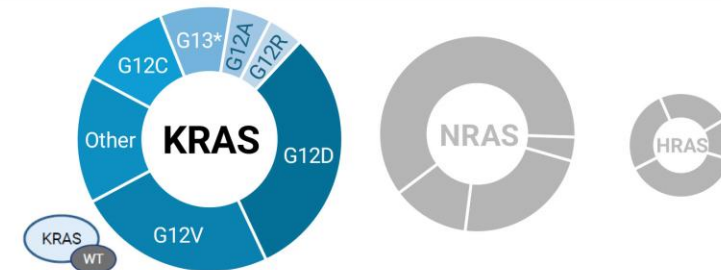
## Isoform selective KRAS inhibitors

### Hits

- wild-type and multiple KRAS mutants

### Spares

- wild-type NRAS, and HRAS



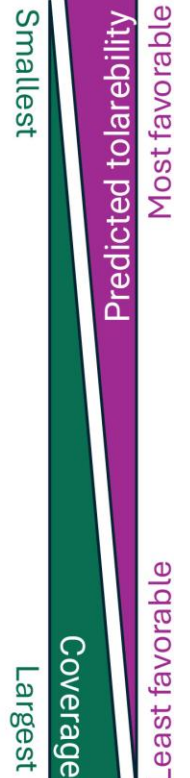
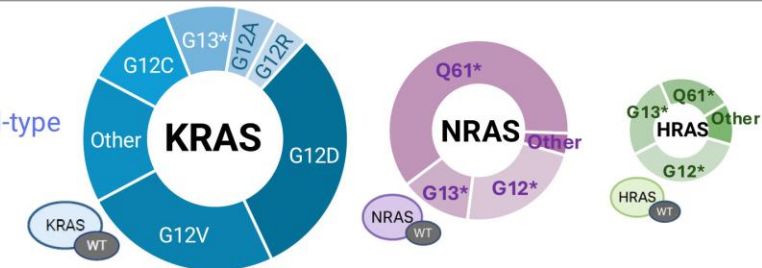
## Pan RAS inhibitors

### Hits

- all KRAS, NRAS and HRAS mutants and wild-type

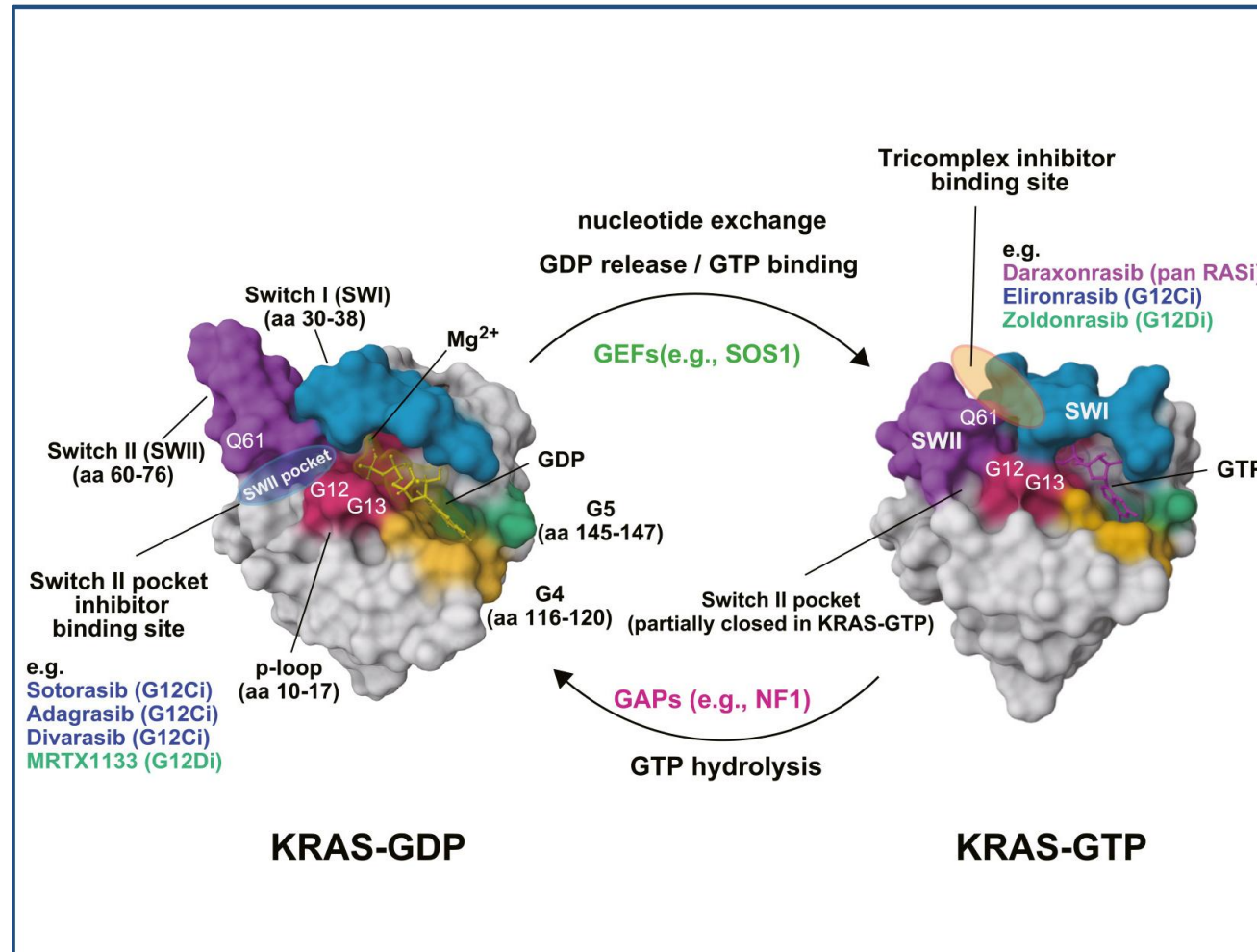
### Spares

- None

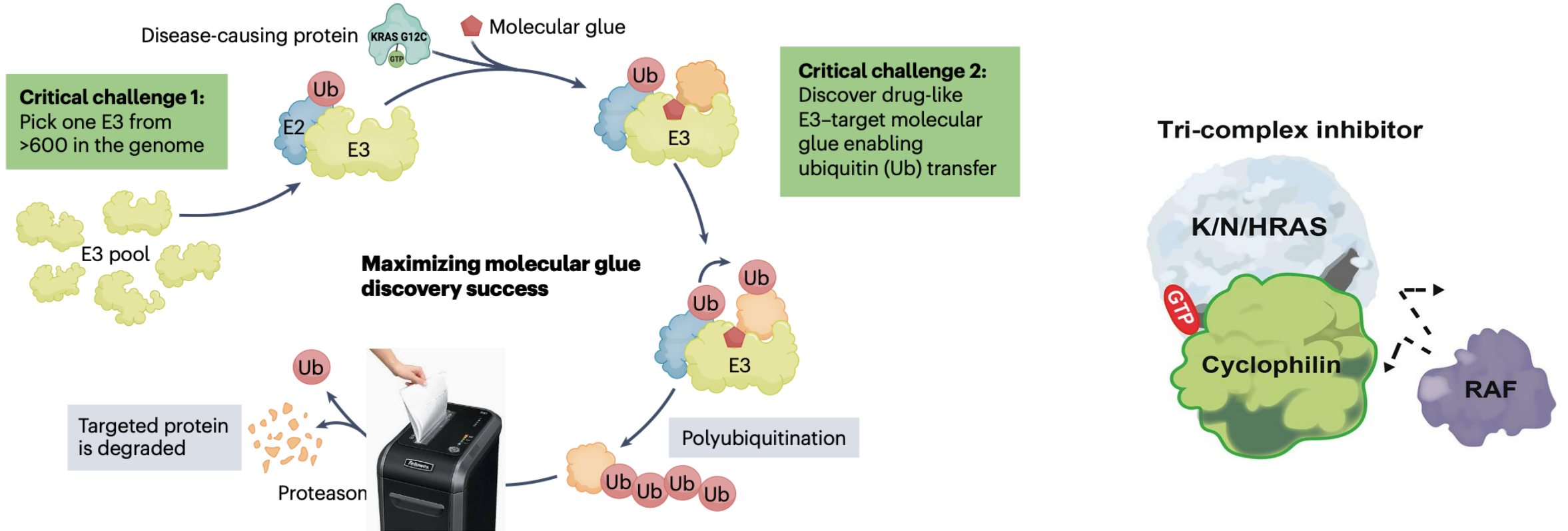


B

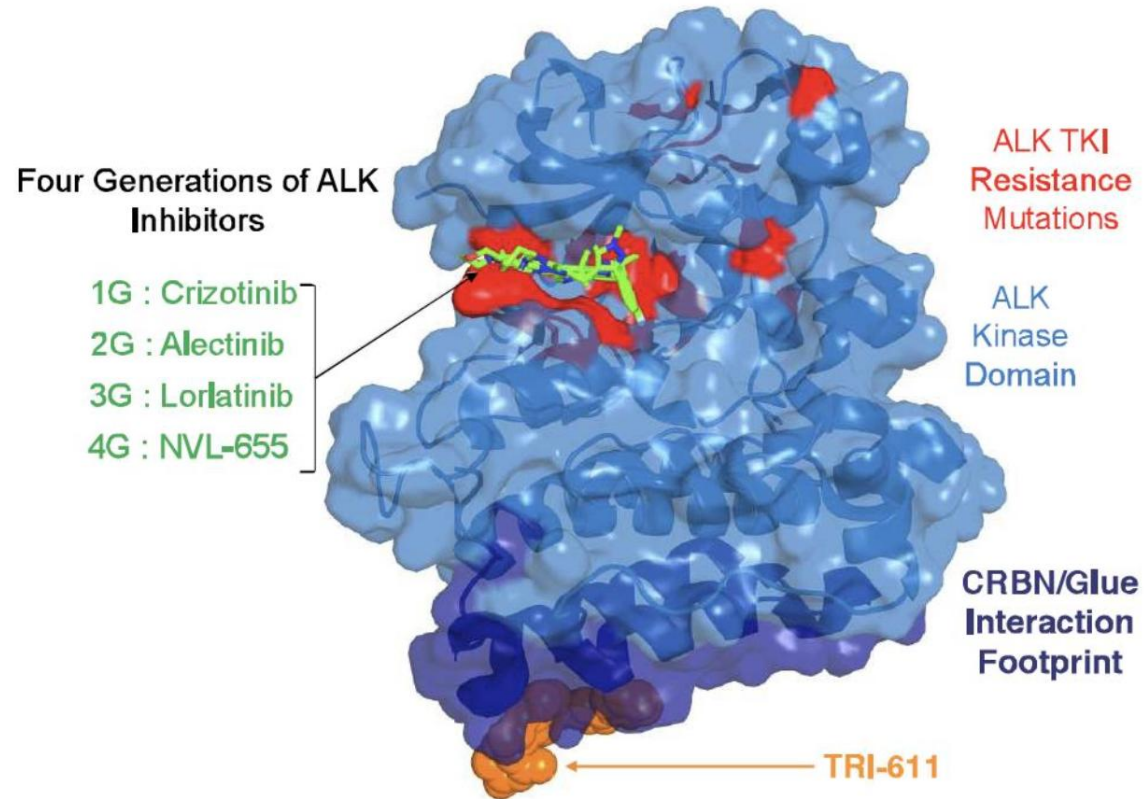
# HOE ZIET DE BEHANDELING VAN EEN SCHAKEL EIWIT ERUIT? (KRAS)



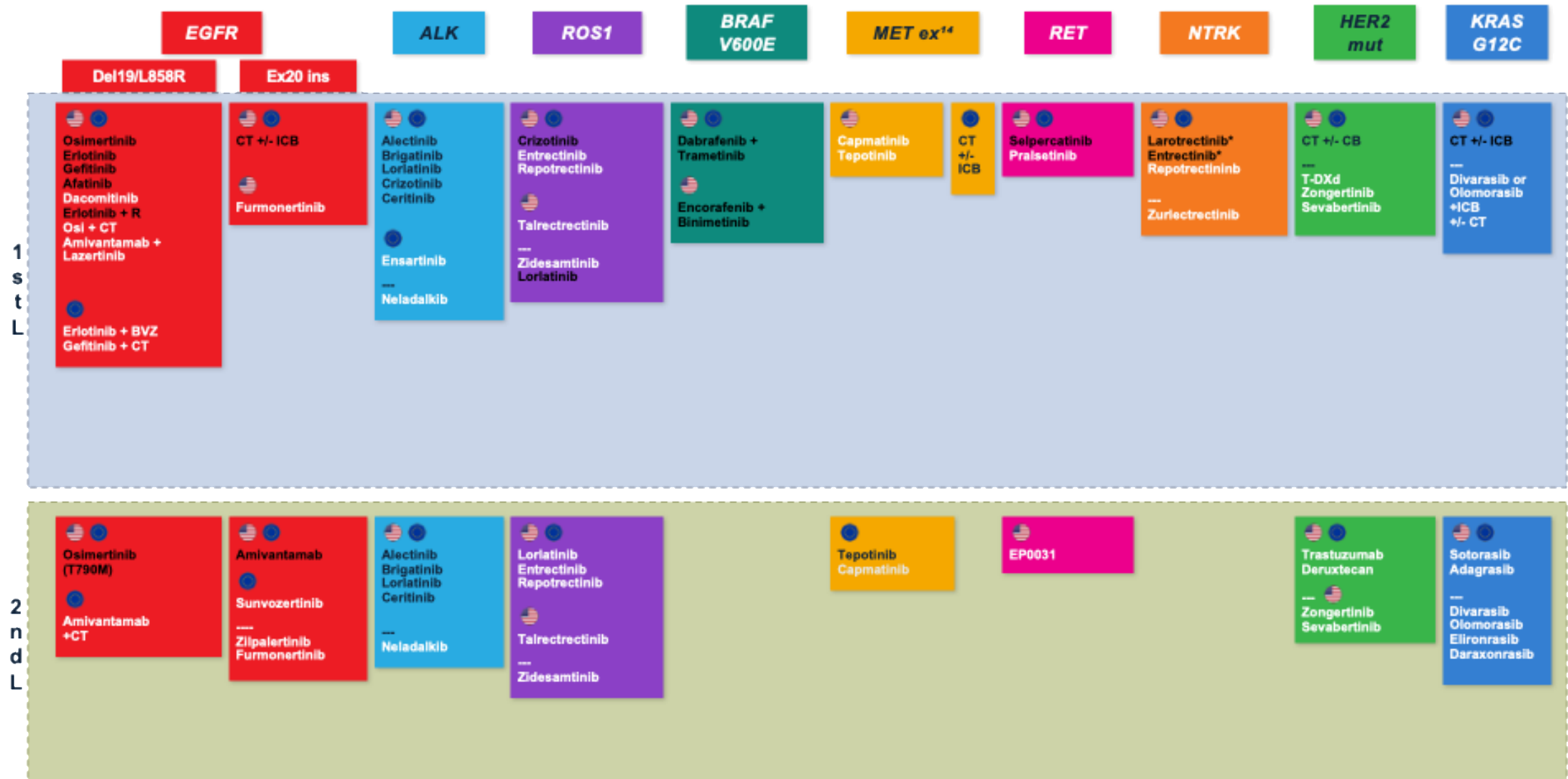
# LIJM 'AFBREKERS EN PLAKKERS'



# LIJM 'AFBREKERS' KOMEN ER OOK AAN VOOR ALK – EGFR EN MEER



# WELKE (DOELGERICHTE) BEHANDELOPTIES ZIJN ER?



= EMA / FDA goedgekeurd

Zwart = beschikbaar in Nederland; Wit = niet reguliere zorg, eventueel via farmaceut of in studieverband

# STUDIE BEHANDELINGEN (LONGKANKERONDERZOEK.NL)

## ▪ EGFR:

- Doelgerichte 4<sup>de</sup> generatie STX-721 (AvL)
- ADC: Telisotuzumab Adizutecan (o.a. Erasmus MC)
- ADC: Iza- Bren (LUMC - AvL)
- Overig: EGFRxCD28 COSTIMULATORY BISPECIFIC ANTIBODY (Erasmus MC)

## ▪ ALK:

- ALKAZAR (NVL-655 vs. alectinib) fase III

# BEHANDELING VAN DE 'ONBEHANDELBARE' MUTATIES (AACR 2026)

## BREAKING STRUCTURAL BARRIERS

### KRAS G12D: 61% ORR in NSCLC



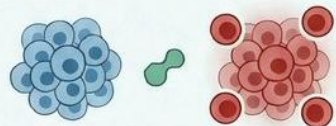
First-in-class tri-complex inhibitor Zoldonrasib (RMC-9805) demonstrates high activity in solid tumors.

### TP53 Y220C: Mutation-Specific Rescue



Small molecule PC14586 stabilizes mutant p53 into a wild-type-like conformation, restoring tumor suppression.

### WNT Inhibition: Priming Cold Tumors



Combining PORCN inhibitors with Nivolumab achieved a 28.6% response rate in MSS colorectal cancer.

## THE POWER OF NEW MODALITIES

### PROTACs: Event-Driven Elimination



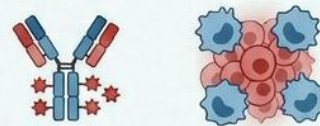
Unlike traditional inhibitors, degraders entirely eliminate targets like MYC and KRAS via the proteasome.

### Dual CAR-T: 62% Tumor Regression

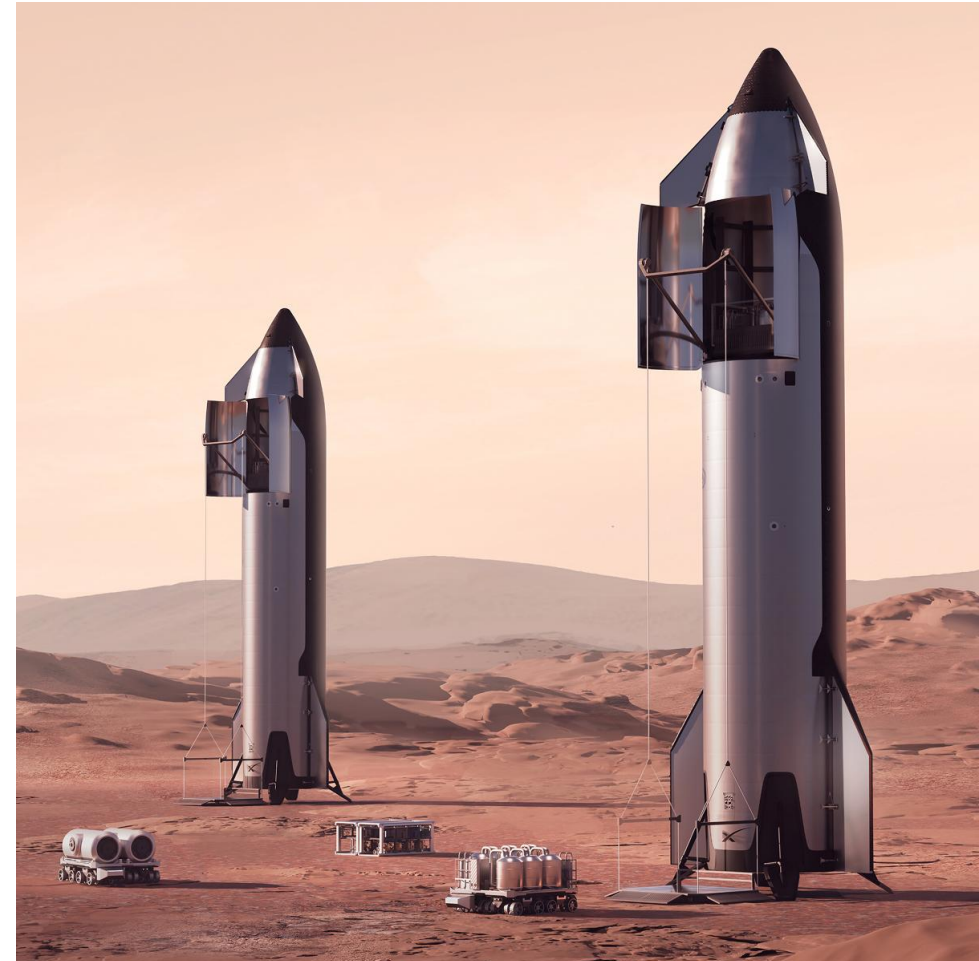


Bivalent CAR-T cells targeting EGFRvIII and IL13Ra2 show rapid radiographic responses in recurrent glioblastoma.

### Next-Gen ADCs: Beyond Cytotoxicity



Emerging "ISACs" deliver immune-stimulating payloads to activate innate immunity within the tumor microenvironment.



# DANK VOOR UW AANDACHT



## Telefoonnummer

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(Algemeen nummer)

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