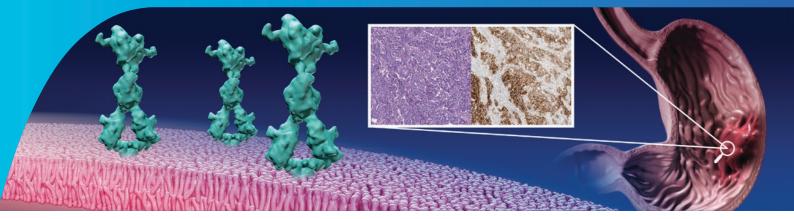
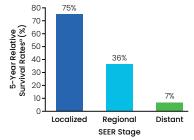
FGFR2b—An Emerging Biomarker and Investigational Target in Gastric Cancer



5-Year Relative US Survival Rates by Stage of Diagnosis from 2014-20201



^aAssessed between 2014 and 2020 in the US.¹

GASTRIC CANCER IS THE FIFTH MOST COMMON CANCER AND THE FIFTH LEADING CAUSE OF CANCER-RELATED DEATH WORLDWIDE²

61% of patients with gastric cancer have advanced disease* at the time of diagnosis.¹

The 5-year relative survival rate for patients with distantly metastatic gastric cancer at diagnosis is only 7% in the US.¹

*This includes patients with regional disease, or those whose cancer have spread to regional lymph nodes, and metastatic disease at the time of diagnosis. There are 26,890 estimated new cases.¹





Tumor cell proliferation

OVEREXPRESSION OF FGFR2b PROTEIN DRIVES TUMORIGENESIS

FGFR2b is a **receptor tyrosine kinase** primarily expressed on epithelial cells and involved in numerous cellular functions.³

FGFR2b protein overexpression is prevalent in 20%–30% of patients with advanced G/GEJ cancer.^{4,†}

In addition to gastric cancer, FGFR2b is overexpressed in other cancers including esophageal, lung, breast, pancreatic, colorectal, and gynecological cancers.³⁵

[†]Approximate range based on the 910 pre-screened patients for a phase 2 trial in locally advanced or metastatic G/GEJ cancer, of which 274 patients (30%) were pre-screened positive for FGFR2b any 2+/3+ tumor cell staining by IHC, and on the 155 enrolled patients, of which 96 patients (62%) exhibited FGFR2b \ge 10% 2+/3+ tumor cell staining by IHC.⁴

THE BIOMARKER LANDSCAPE CONTINUES TO EVOLVE, HELPING TO INFORM ADVANCEMENTS IN PRECISION MEDICINE[‡]



[‡]Timeline reflects the first appearance of G/GEJ biomarkers in peer-reviewed literature.





No Staining (0)



Moderate-Strong (2+)



Strong (3+)

FGFR2b PROTEIN OVEREXPRESSION CAN BE DETECTED BY IHC **IN G/GEJ CANCER***

Protein overexpression is defined as the presence of moderate (2+) to strong (3+) membranous staining of tumor cells.^{4,19}

FGFR2b protein overexpression may be associated with poor prognosis.^{20,21}

*Currently, FGFR2b testing is in the context of investigational clinical trials with no approved test in the market.²²

FGFR2b PROTEIN OVEREXPRESSION AND FGFR2 GENE AMPLIFICATION ARE DISTINCT AND MAY DEFINE DIFFERENT POPULATIONS

The phase 2 randomized, double-blind, placebo-controlled study of patients with metastatic G/GEJ cancer, demonstrates that FGFR2b protein overexpression can be detected at a higher rate with IHC than with ctDNA; thus, FGFR2b protein overexpression evaluation by IHC is not interchangeable with FGFR2 gene amplification assessment.⁴

BIOMARKER TESTING CONSIDERATIONS IN PATIENTS WITH GASTRIC CANCER^{11,23-27}

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の一部に	Biopsy	Turnaround Time	Testing	Results	Patient Management
A CONTRACTOR OF THE OWNER	Multiple tissue biopsies (6–8) should be performed to provide adequate material for histologic and molecular interpretation. ^{11,23}	Typically 2–4 days. ²⁴	Implementation of reflex testing protocols for gastric cancer biomarkers may lead to faster informed clinical decisions for patients. ²⁵	Retaining biomarker test results in a patient's EHR may allow for easier access. ²⁶	Multidisciplinary tumor boards and other formal venues can help educate on biomarker testing strategies and evolving guidelines. ²⁷
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ABBREVIATIONS: AKT, protein kinase B; CLDNI8.2, claudin-18 isoform 2; ctDNA, circulating tumor DNA; DKK-1, Dickkopf-1; dMMR, deficient mismatch repair; EBV, Epstein-Barr virus EHR, electronic health record; FGF, fibroblast growth factor; FGFR, FGF receptor; FGFR2, FGF receptor 2; FGFR2b, FGFR2 isoform IIIb; G/GEJ, gastric/gastroesophageal junction; HER2, human epidermal growth factor receptor 2; HC, immunohistochemistry; ITIM, immunoreceptor 2; FGFR2b, FGFR2 isoform IIIb; G/GEJ, gastric/gastroesophageal junction; MSI, microsatellite instability; mTOR, mammalian target of rapamycin; NTRK, neurotrophic tyrosine receptor kinase; PD-1, programmed cell death protein h; PD-11, programmed cell death protein h; PD-11, programmed cell death protein h; NTRK, neurotrophic tyrosine receptor 1; MIRK, phosphoinositide 3-kinase; RAS, rat sarcoma; TIGIT, T-cell immunoglobulin and ITIM domain; TMB, tumor mutational burden; US, United States; VEGFR-2 vascular endothelial growth factor receptor 2.

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