Superior Outcomes Compared to Monotherapy in Refractory Cancers Timothy Crook¹, Ashok Vaid², Sewanti Limaye³, Raymond Page⁴, Darshana Patil⁵, Dadasaheb Akolkar⁵, Vineet Datta⁵, Ashwini Ghaisas⁵, Revati Patil⁵, Harjeet Singh⁵, Ajay Srinivasan⁵, Sachin Apurva⁵, Rajan Datar⁵ ¹Royal Surrey County Hospital, UK ²Medanta — The Medicity, India ³Kokilaben Dhirubhai Ambani Hospital, India ⁴Worcester Polytechnic Institute, USA ⁵Datar Cancer Genetics Limited, India

mTOR Inhibitors in Combination

Regimens Guided by Encyclopedic

Tumor Analysis (ETA) Show

Conflict of Interest: Datar Cancer Genetics Limited offers **BACKGROUND**

Though mTOR inhibition is a sound strategy for cancer management, anti-mTOR monotherapies have not shown meaningful benefits. Deep interrogation of the tumor can reveal indications for combination treatments with mTOR inhibitors in a label- and organ-agnostic manner. **RATIONALE** Encyclopedia Tumor Analysis (ETA) is an integrational multi-analyte evaluation of tumor features using DNA,

RNA, proteins and viable tumor derived cells (TDCs).

tandem-targeting of tumor vulnerabilities.

ETA identifies latent vulnerabilities of the tumor and can guide patient-specific combination regimens for

APPROACH 42 patients with advanced, refractory solid organ cancers which had progressed following ≥2 prior

- systemic lines, Patients received personalized combination regimens with mTOR inhibitor based on ETA, Treatment response was determined radiologically Response Rate, ORR and Disease Control (Objective Rate, DCR).
- **DEMOGRAPHICS** Table 1. Study Cohort Number Cancer Type 16 **Breast**

5

4

3

2

2

1

1

1

1

BM

8 (19.1%)

17

Databases, Literature:

Drug Efficacy,

Drug Interactions

Drug Safety,

Head and Neck

Ovarian

Lung

Cervical

Colorectal

Hepatobiliary

Esophageal

Gastric

Kidney

Melanoma

Pancreatic 1 **Prostate** 1 Sarcoma Testicular

16 males + 26 females. Median age: 54 years (Range 22-68) Figure 1. Extent of Disease-Metastases. Number of Patients 26 14 14 13 LN **Brain Others** Table 2. Prior Treatment Types. Number **Prior Treatments** 19 (39.6%) Radiotherapy 28 (66.7%) Surgery Systemic Therapy 42 (100.0%) Cytotoxic 14 (33.3%) **Targeted**

<u>Number</u> **Metastatic Sites Minimum** Maximum

Systemic

14

RNA – Gene Expression

Immunohistochemistry

Tumor Cells - Chemoresistance

Endocrine

Table 3. Number of Metastatic Sites.

Median

Prior Lines

Minimum

Maximum

Median

mber of Patients

33

CRP

Figure 4. ETA Guided Regimens.

■ Without E

3

8

Т

20

PIK3CA

Endocrine Antagonists.

7

ERBB2

Figure 7. Cytotoxic Agents.

17

6

PDGFR

5

AR

3

EGFR

3

ER

2

VEGF

MET

Number of Patients

PTEN

TSC2

Figure 6. Molecular Indications for Targeted Inhibitors and

mTOR

Number of Patients

targeting.

SNV

Gene Expression; IHC: Immuno histochemistry.

■ With E

4

27

CT

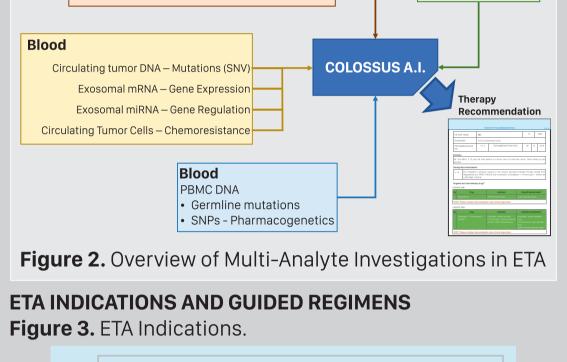
Figure 5. Molecular Indications for mTOR Inhibitor

Tumor Tissue

Table 4. Prior Treatment Lines.

ENCYCLOPEDIC TUMOR ANALYSIS

DNA -Gene Alterations (SNV, CNA, Indels, Fusions)



11

CNA

CRP: Chemoresistance Profiling; SNV: Single Nucleotide Variation; CNA: Copy Number Alteration; DGE: Differential

9

DGE

T, Targeted ;

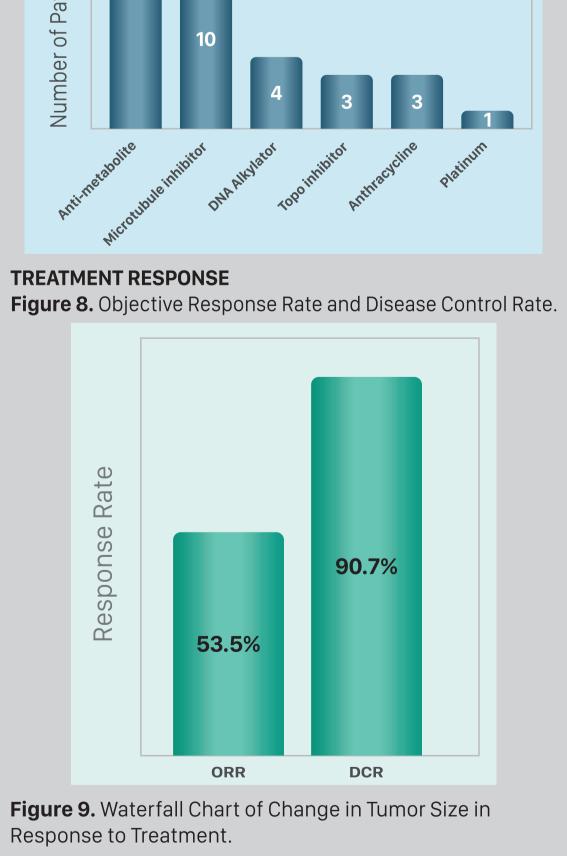
CT: Cytotoxic + Targeted;

E: Endocrine Agents.

8

IHC

Number of Patients



Patients

• 592

322 • 310

·199

152

110

64

-27

Figure 10. Progression Free Survival.

% change in SLD (RECIST 1.1)

-20

1.0 0.9 8.0 0.7 0.6 0.5 0.4 0.3 0.2 Days 90 120 150 180 210 240 270 300 330 360 At Risk 42 41 35 25 18 0.1 0.0 150 180 210 240 270 300 330 360 390 420 450 480 90 Progression Free Survival (Days) **FINDINGS** Partial response (PR) was observed in 23 patients (ORR = 56.1%),

Stable Disease (SD) was observed in 16 patients

No Grade IV therapy-related AE (AEs) or any

ETA-guided combination regimens with mTOR inhibitors offer a viable and efficient strategy in advanced refractory malignancies and outperform

(DCR = 95.1%),

CONCLUSION

Median PFS was 110 days.

treatment related deaths.

mTOR inhibitor monotherapy.

Figure 11. Kaplan Meier Curve of Progression-Free Survival.