

SUMMER 2023

M. Sitki Copur, MD FACP, Medical Director

community cancer program

MCC oncologist recognized by ASCO



A Morrison Cancer Center oncologist recently received recognition by the world's leading professional organization for cancer physicians and oncology professionals.

Dr. M. Sitki Copur, Morrison Cancer Center Medical Director and Adjunct Professor at the University of Nebraska Medical Center, was named an Advocacy Champion by the Association for Clinical Oncology (ASCO) during the 2023 Advocacy Summit in Washington, D.C.

While in Washington, D.C., Dr. Copur met with U.S. Sen. Sheldon Whitehouse, co-leader of the Senate Judiciary Committee, along with Nebraska and Iowa congressional representatives.

Advocacy Champions are ASCO volunteers who have made meaningful contributions to ASCO's advocacy activities throughout the year to ensure that every patient with cancer has access to high-quality, high-value cancer care, no matter who they are or where they live. Advocates speak with federal lawmakers and agencies, send personalized letters to members of Congress through ASCO's ACT Network, engage with state lawmakers on policy priorities at the state level, and host site visits for lawmakers in their home states and districts.

Throughout the past year, Dr. Copur has taken an active role in endorsing several important

legislative advocacy activities and urging lawmakers to take action on the Seniors' Timely Access to Care Act (HR3173/ S3018), the Telehealth Modernization Act (HR1332/S368), the CONNECT for Health Act (HR2903/S1512), the DIVERSE Trials Act (HR5030/S2706) and research funding for the NIH and NCI for fiscal year 2023.

Dr. Copur also is working with the American Cancer Society Cancer Action Network (ACS CAN) and the Nebraska Medical Association (NMA) on several other important advocacy activities including correcting Medicare Advantage Organizations' Prior Authorization requirements, and more.

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2023 ASCO Advocacy Summit

Dr. M. Sitki Copur was among attendees at the 2023 Association for Clinical Oncology (ASCO) Advocacy Summit on May 1-2 in Washington, D.C. There were 160 attendees from all 50 states and Washington, D.C.

As practicing physicians, researchers and constituents, ASCO members are well-equipped to inform policymakers about how timely health policy issues influence practicing oncologists and the communities they serve. Efforts to educate lawmakers about the challenges in the cancer care community are critical to advancing ASCO's priorities on Capitol Hill.

This year's event included reviewing legislative asks for lawmakers, advocacy training with state breakout groups, a keynote speaker and a chance to network with colleagues. Dr. Copur met with Sen. Sheldon Whitehouse (D-RI), who is the co-lead on the Senate Judiciary Committee. They discussed the pre-authorization burden that is impacting our cancer patients on Medicare Advantage Plans such as United Healthcare (UHC). Dr. Copur also attended all-day meetings with D.C. office representatives Adrian Smith (R-NE), Deb Fisher (R-NE), Don Bacon (R-NE), Joni Ernst (R-IA) and Chuck Grassley (R-IA).

MCC clinical trials becomes Alliance member

The Morrison Cancer Center, with its affiliation with the University of Nebraska Medical Center, is now an approved member of the Alliance for Clinical Trials in Oncology.

Jacquelyn Carroll, Alliance Membership Coordinator, sent the approval notice to MCC on May 11.

The Alliance for Clinical Trials in Oncology is a National Cancer Institute-funded cancer cooperative group formed in 2011. It is a merger of the American College of Surgeons Oncology Group, the Cancer and Leukemia Group B and the North Central Cancer Treatment Group.

The Alliance conducts clinical trials to validate new strategies for preventing and treating a broad range of cancers. In order to do this, the Alliance provides a scientific and operational infrastructure for innovative clinical and translational research in academic and community settings.

"This is a turning point in our clinical trials enterprise," said Dr. M. Sitki Copur of the membership. "MCC is now able to take part in NCI-designated clinical trials."

MCC is set to start 16 Alliance trials this quarter, along with two industry-sponsored trials.

Four new team members at MCC

Four new employees recently joined the Morrison Cancer Center team.

Lisa Hope became an MCC nurse in April. She received an Associate's Degree in Nursing from Central Community College in Grand Island and then graduated from the University of Nebraska Medical Center with a Bachelor's Degree in Nursing. She grew up in southeast Nebraska and lives in Aurora with her husband and three boys.

"I enjoy gardening and photography and spending time with family," Hope said. "I love working for MCC and our patients, staff and providers who are amazing to work with. I am very excited about the opportunity."

Kylene Hayes joined the team in Hastings as a Clinical Scheduler in March. She graduated from CCC in Grand Island with an Associate's Degree in Applied Science in 2022. She worked at the Children and Adolescent Clinic before joining MCC. She and her husband live in Hastings with their five children. They enjoy spending time together on and off the sports field, camping and caring for their growing farm animals.

"Healthcare has long been a passion of mine," Hayes said. "I



Норе



Hayes

wanted to switch gears from pediatric care into the adult cancer realm. One of the most rewarding aspects — from volunteering at MCC 10 years ago, being a patient and now — is being able to work alongside one of the best groups of professionals. It makes me feel truly honored."

Sonia Goines joined the MCC team in March as a senior hospital insurance specialist. She and her husband, along with their fur babies, relocated to Hastings from Georgia.

"Being part of the revenue cycle for years, graduating John C. Maxwell's 21 Irrefutable Laws of Leadership ALPtitude Class and passing AAPC's CPC exam were goals I achieved. However, the ability to inspire and make a difference in a life, whether mentoring, being a friend or a listener drives happiness within me. Plus, being a part of a professional, compassionate, highly trained team that makes a difference every day in the lives they touch, is such a blessing. MCC and

Goines



Consbruck

Hastings are my home."

Port Isabel, Texas, native Janell Consbruck graduated with a Bachelor of Science Degree in Occupational Therapy from the University of Texas Pan American in 2001. She joined MLH in August 2021, obtaining her Certified Lymphedema Therapist training through the Academy of Lymphatic Studies in September 2021. Consbruck brings a vast background in occupational therapy including her work abroad for three years in Guam. She has worked in acute care, skilled nursing and inpatient, outpatient and pediatric rehabilitation. She currently is working toward certification in hand therapy and refining her Spanish speaking skills. She and her husband, Nathan, have two children, Kendall and Jackson. She spends her free time with her family attending activities. Consbruck works in Home Health, MCC in Grand Island and at MLH Rehabilitation at Cimarron Plaza.

MCC Lung Cancer Screening update

As of June 5, the Mary Lanning Healthcare/Morrison Cancer Center Lung Cancer Screening program had enrolled 114 patients. The program, which went live earlier this year, encourages all providers to refer high-risk patients for screening. Those patients include those ages 50-80 with a 20-pack-per-year rate of smoking, and current smokers who have quit within the last 15 years.

Detecting and identifying lung cancer early not only increases survival rates but also makes treatments less invasive. Still, lung cancer accounts for nearly one-fourth of all cancer deaths.

Greater Nebraska Caucus virtual event set

The Nebraska Medical Association (NMA) virtual Greater Nebraska Caucus event will be on Thursday, July 20, at 7 p.m.

The event will take place via Zoom and is open to all Nebraska rural physicians, both NMA members and non-members.

NMA decided to re-institute these Greater Nebraska Caucus meetings under the direction of Dr. Daniel Rosenquist, NMA President. During the Zoom meeting, Dr. Rosenquist will focus on strengthening the Greater Nebraska Caucus to leverage

the voice of rural physicians and provide opportunities for membership engagement as he works to strengthen the support NMA provides in rural Nebraska.

"Supporting rural physicians is a pri-

Nebraska Medical Association

ority of the NMA, and we want you to join us in the conversation," Dr. Rosenquist said.

To register for the event, please see https://member.nebmed.org/ event-5321237.

MCC Cancer Awareness Month presentation

The Morrison Cancer Center Grand Island team brought awareness during Cancer Awareness Month with an April presentation.

The team met with the St. Paul's Lutheran Church congregation after Sunday worship to talk about cancer.

Dr. M. Sitki Copur spoke about early detection of lung cancer. He and the team shared handouts and other materials about the Lung Cancer Screening program.

The presentation was followed by a question-and-answer session.



Zac Van Diest named MLH Employee of Quarter

Radiation oncology team member Zac Van Diest received the clinical Employee of the Quarter Award on April 13.

Van Diest has worked at MCC in radiation oncology since 2005. He graduated from the University of Nebraska at Kearney in 2001, the MLH School of Radiologic Technology in 2003 and the University of Nebraska Medical Center Radiation Therapy program in 2004.

He lives in Doniphan with his wife, Trisha. They have three children, Benjamin, who will be a high school senior; Lauryn, who will be a freshman; and Olivia who will be a fifth-grader.

Van Diest is a resourceful member of the radiation oncology team. His standout abilities include multitasking, planning and tracking down various imaging studies done elsewhere.

"The best part of my job is interacting with fellow co-workers and our patients," Van Diest said.

Right: Zac Van Diest accepts the Employee of the Qquarter Award from Mark Callahan, Chief Operating Officer.



MCC Radiation Oncology team

The Morrison Cancer Center Radiation Oncology team continues to provide cutting-edge services at the Grand Island and Hastings campuses.

As part of the on-site, academic, community-based program, Dr. Randy Duckert offers high-quality radiation oncology along with a sophisticated and dedicated team of professionals. They utilize state-ofthe-art equipment and participate in multidisciplinary cancer conference discussion of cases.

"We are humbled and honored by the penchant of our beloved patients for our radiation oncology services," Dr. Duckert said.

For appointments or referrals, please call 308-384-2446 or 402-460-5899.

Right: Dr. Randy Duckert (second from right) is pictured with his Grand Island Radiation Oncology team



General surgeons join MCC team at York

Two Hastings surgeons recently began providing general surgery in York, adding to the Morrison Cancer Center clinic at York General Hospital.



Schroeder

Drs. Jared Dietze and Caleb Schroeder from Hastings General Surgery joined Dr. Ye Ye, a surgeon in York.



Dietze

The Morrison Cancer Center team has been providing hematology/ oncology clinics every other week at York General hospital. The York General Hospital Oncology Team includes five chemotherapy-certified



Dr. M. Sitki Copur is pictured with the York General Hospital oncology team. In the back row are Heather, Karrie, Liz, Sarah and Maelyn. In the front are Nicole, Dr. Copur and Jessica.

nurses, one oncology clinic nurse, five pharmacists, an on-site lab and radiology services. MCC looks forward to providing more cohesive, multidisciplinary cancer care to the York medical community and patients, " said Dr. M. Sitki Copur.

"With the addition of these surgeons,

MCC represented at the Race for GRACE

The Morrison Cancer Center team was among those raising money to assist cancer patients at the Race for GRACE on April 4.

Race for GRACE started in 2010 as a fundraiser for the GRACE Cancer Foundation. The race raises funds to help cancer patients, but also celebrates, honors and remembers those whose lives have been touched by cancer.

MCC and the GRACE Cancer Foundation have partnered together for many events.



Staff highlight: Tonya Peterson, RN BSN OCN

Morrison Cancer Center Nursing Supervisor and Charge Nurse Tonya Peterson began her career in 2005 as a CNA at a local nursing home and critical access hospital.

Peterson, RN BSN OCN, joined Mary Lanning Healthcare in June 2011, also as a CNA at the time. She graduated with her Nursing Degree from Creighton University School of Nursing — Mary Lanning campus in May 2013, initially working as an ICU nurse. She joined the MCC staff in October 2014 as an oncology nurse, receiving her OCN in 2018.

Throughout her MCC career, she worked her way up into her current role.

"I chose oncology because I have seen first-hand how nurses can help patients with a cancer diagnosis," Peterson said. "I have seen my grandparents and father-in-law, as well as several people



Peterson

from my hometown, go through cancer treatment. Another reason for me in choosing oncology is the constantly challenging and changing science of cancer treatments and new discoveries which feeds my drive to continue to learn and grow."

Peterson lives in Hastings with her husband and her dog. In her spare time, she enjoys game nights, fishing and attending her nephew's sporting events.

"Tonya has a keen mind, and she is always in search of new information and ways to apply them to our patients' needs," said Dr. M. Sitki Copur. "She has been instrumental in obtaining and organizing the data in several of our MCC ASCO presentations. She exemplifies the characteristics of an inquisitive, knowledgeable, skillful, organized, problem-solving, astute clinical nurse, along with a scholarly side. She does a tremendous job of running two tight ships for MCC at the Grand Island and Hastings campuses."

MCC at ASCO 2023 in Chicago

The Morrison Cancer Center was represented at the 2023 American Society of Clinical Oncology (ASCO) annual meeting in Chicago.

With more than 40,000 people attending in person, similar to pre-pandemic levels, the annual meeting was the biggest cancer conference in the world. The scientific program was packed and nearly 7,000 abstracts, including one from MCC, were submitted. This is a 7-percent increase from 2022. The MCC abstract presented data on NextGen sequencing comparing PDL1 scores to tumor mutational burden. The theme of this year's meeting was patient-centered care and patient involvement in all aspects of care, research in exploring strategies to help patients and patient organizations prioritization of goals and influencing research.

Publications since our last issue

 Copur M.S., Peterson, T., Doornbos K., Tun S.M., Springer C., Robbins L., Arbogast, J., Muske, C., Buescher, L., Sukup, J., Buescher L., Horn, A., Wedel, W., Lintel, N., Brunt, K., Duckert, R., Lavudi S. Programmed cell death ligand 1 (PD-L1) expression landscape and its relationship with tumor mutational burden (TMB) in a community-based cancer center patient population in rural central Nebraska. J Clin Oncol 41, 2023 (suppl 16; abstr e15141). (Published)

- Copur M.S., Tun S.M., Duckert R. First-Line Venetoclax Combinations in Chronic Lymphocytic Leukemia. New Engl J Med 2023 (Submitted for Publication)
- Costa L., J., Chhabra S., Medvedova E., Dholaria B., R., Schmidt T., M., Godby

K., N., Silbermann R., Dhakal B., Bal S., Giri S., D'Souza A., Hall A., Hardwick P., Omel J., et al. Minimal Residual Disease Response-Adapted Therapy in Newly Diagnosed Multiple Myeloma: Final Report of the MASTER Trial. Lancet Heamatology 2023 (Submitted for publication)

Survivors gather at MCC Ice Cream Social



Dr. Soe Min Tun (above), MCC nurses and Carlene Springer, APRN, enjoy some ice cream from Special Scoops during the first Morrison Cancer Center Ice Cream Social celebrating survivors. Cancer Survivors Day was June 4.

About 70 cancer survivors and their guests attending the Morrison Cancer Center Ice Cream Social on June 1.

Special Scoops provided free ice cream treats for cancer survivors during the event in the Perkins-Spady Recuperative Gardens, just next door to MCC.



Mehmet Sitki Copur, MD

Medical Director/ Professor Mary Lanning Healthcare Morrison Cancer Center/University of Nebraska Medical Center Adjunct Faculty

Summary Answers Viewed: 69 Total Views: 25012 People Reached: 3947

itions Reached: 2601



theMednet

The Morrison Cancer Center's contributions in theMednet has reached a total of 25,012 views. MCC has answered more than 69 questions.

theMednet is a physician-only online community where expert answers are offered to real-world oncology questions when there are no clear guidelines or published research on the topic.

More than 1,000 academic physicians are recruited based on their research, publications, case volumes, clinical trials and peer recommendations from every cancer center in the United States. The physicians are posed with answering challenging questions from other practicing oncology physicians. The answers are peer-reviewed and indexed, making them accessible through a quick search.

Cancer Committee

The Mary Lanning Healthcare Cancer Committee heard melanoma data from a Central Nebraska General Surgery surgeon on May 9.

Dr. Shellie Faris, Cancer Liaison Physician, presented National Cancer Data Base (NCDB) data about MLH's program relating to the stage distribution of melanoma cases over the past four years.

The committee chose a quality improvement initiative of "Patient Identification Process for Colon Cancer Screening." The Quality Department is conducting a workflow analysis for MLH-owned primary care clinics. MLH wants to help increase screening rates for colorectal cancer, which can reduce the number of patients presenting with late-stage disease.



Dr. Shellie Faris

The MLH cancer program community screening

events this year focus on raising awareness of the need to screen, and how the screening age has been lowered to 45, versus 50, in adults.

Further discussion took place about the review of Cancer Conference presentations and the work for CoC standards.

The new cancer program goal for 2023 was set to move forward with American College of Radiology (ACR) accreditation.

FDA hematology/oncology drug approvals since last issue

The FDA granted accelerated approval to **glofitamab-gxbm**(Columvi,Genentech,Inc)for relapsed refractory or diffuse large B-cell lymphoma not otherwise specified or large B-cell lymphoma arising from follicular lymphoma, after two or more lines of systemic therapy. **6/15/2023**.

The FDA approved **olaparib with abiraterone** (Lynparza, AstraZeneca Pharmaceuticals LP) and prednisone (or prednisolone) for BRCA-mutated metastatic castration-resistant prostate cancer. **5/31/2023.**

The FDA granted accelerated approval to **epcoritamab-bysp** (Epkinly, Genmab US, Inc.) for relapsed or

refractory diffuse large B-cell lymphoma and high-grade B-cell lymphoma. **5/19/2023**

The FDA approved **polatuzumab vedotin-piiq** (Polivy, Genentech, Inc.) for previously untreated diffuse large B-cell lymphoma, not otherwise specified, and high-grade B-cell

lymphoma. **4/19/2023.**

The FDA approved **omidubicel** (Omisirge, Gamida Cell, Ltd.) to reduce time to neutrophil recovery and infection in patients with hematologic malignancies. **4/17/2023.**

The FDA granted accelerated approval to **enfortumab vedotin-ejfv**

(Padcev, Astellas Pharma) with pembrolizumab for locally advanced or metastatic urothelial carcinoma. **4/3/2023.**

The FDA granted accelerated approval to **retifanlimab-dlwr** (Zynyz, Incyte Corporation) for metastatic or recurrent locally advanced Merkel cell carcinoma. **3/22/2023.**

The FDA approved **dabrafenib** (Tafinlar, Novartis) with trametinib (Mekinist, Novartis) for pediatric patients with low-grade glioma with a BRAF V600E mutation. **3/16/2023.**

Cancer walk draws a crowd

The second annual Making Strides for Cancer Walk drew a crowd of about 350 people to the Hastings College Lynn Farrell Arena parking lot.

The event, which was highlighted by a Butterfly Release by the GRACE Foundation, included 79 survivors, friends, family and community members.

The Mary Lanning Healthcare Foundation, GRACE Foundation, Morrison Cancer Center and many sponsors worked together to provide a fun evening, celebrating those who have been touched by cancer and remembering those who have passed away.

Money raised from the event will go toward purchase of vein visualizers for MCC at its Hastings and Grand Island campuses.









INDIGO: A global, randomized, double-blinded, phase 3 study of vorasidenib versus placebo in patients with residual or recurrent grade 2 glioma with an IDH1/2 mutation

Grade 2 gliomas are slowly progressive, malignant brain tumors with a poor long-term prognosis. Current treatments (surgery followed by observation or adjuvant radiation and chemotherapy) are not curative and can be associated with short- and long-term toxicities.

Mutations in isocitrate dehydrogenase (IDH) 1 or 2 occur in approximately 80% and 4% of grade 2 gliomas, respectively, and are a disease defining characteristic in the World Health Organization (WHO) 2021 definition. Vorasidenib (VOR) - an oral, brain-penetrant, dual inhibitor of mutant (m)IDH1/2 enzymes has shown a tolerable safety profile and preliminary clinical activity in phase 1 studies. In this randomized, double-blind, placebo-controlled phase 3 study (NCT04164901) patients (pts) were randomized 1:1 to receive VOR 40 mg daily or placebo (PBO) daily in 28-day cycles. Patients were stratified by 1p19q status and baseline tumor size. Key

eligibility criteria included: age ≥12; KPS >80; residual or recurrent grade 2 IDH1m or IDH2m oligodendroglioma or astrocytoma; measurable non-enhancing disease; no prior treatment for glioma with most recent surgery 1-5 years from randomization; and not in immediate need of chemotherapy/radiation.

Primary endpoint: radiographic progression-free survival (PFS) by blinded independent radiology committee (BIRC). Key secondary endpoint: time to next intervention (TTNI). As of 2nd planned interim analysis data cutoff, 331 pts were randomized across 10 countries: 168 to VOR and 163 to PBO. Of the 331 pts: median age: 40.4 years (range, 16 to 71); KPS =100: 53.5%; histological subtype: oligodendroglioma: 172 and astrocytoma: 159; median time from last surgery until randomization: 2.4 years. Two hundred twenty-six (68.3%) pts remained on treatment (131VOR; 95PBO). PFS by BIRC was statistically significant

in favor of the VOR arm (HR, 0.39; 95% Cl, (0.27, 0.56); P=0.00000067). Median PFS: VOR: 27.7 mos; PBO: 11.1 mos. TTNI was statistically significant in favor of the VOR arm (HR, 0.26; 95% Cl, (0.15, 0.43); P=0.000000019). This is the first prospective, randomized phase 3 study of a targeted therapy in grade 2 mIDH glioma. VOR significantly improved PFS by BIRC compared with PBO with a manageable safety profile. These data demonstrate the clinical benefit of VOR in this pt population for whom chemotherapy and radiotherapy are being delayed. Clinical trial information: NCT04164901.

Reference: Mellinghoff KI, Van Den Bent MJ, Blumenthal DT, et al. INDIGO: A global, randomized, double-blinded, phase 3 study of vorasidenib versus placebo in patients with residual or recurrent grade 2 glioma with an IDH1/2 mutation. J Clin Oncol 41, 2023 (suppl 17; abstr LBA1).

MCC in Hastings & Grand Island



Dr. M. Sitki Copur and the Morrison Cancer Center team serve patients in both locations.

Patients have a choice



No one chooses to have cancer. But when cancer chooses the patients you serve, please let them know they have the option of referral to Dr. Copur and his team at the Morrison Cancer Center.

402-460-5899 308-384-2446

MCC efforts featured in GI newspaper

The July 2 issue of the Grand Island Independent featured a story about the efforts of Dr. M. Sitki Copur and the MCC team to improve Medicare Advantage plans for cancer patients.

The article by Jeff Bahr highlights MCC's Advocacy Championship recognition by the Association for Clinical Oncology (ASCO) during the 2023 Advocacy Summit in Washington, D.C.

To view the article: https://theindependent.com/ local-oncologist-criticizes-medicare-advantage-plans/article_18c395c0-5c89-5817-bbd0-0ff842496e34.html#:~:text=The%20medical%20 director%20of%20the,are%20by%20Medicare%20 Advantage%20plans.

Local oncologist criticizes Medicare Advantage plans

Dr. M. Sitki Copur says UnitedHeathcare and others are not good for those with cancer





Overall survival analysis from the ADAURA trial of adjuvant osimertinib in patients with resected EGFR mutated (EGFRm) stage IB-IIIA non-small cell lung cancer (NSCLC)

Osimertinib is a third-generation, central nervous system (CNS) active EGFR-TKI, that potently and selectively inhibits EGFR-TKI sensitizing and EGFR T790M resistance mutations.

In the primary analysis from the Phase III ADAURA study (NCT02511106), adjuvant osimertinib demonstrated a clinically meaningful, statistically significant, and practice-changing disease-free survival (DFS) benefit vs placebo in patients with completely resected EGFRm (ex19del/L858R) NSCLC \pm adjuvant chemotherapy. In an updated DFS analysis, with 2 years additional follow-up, DFS and CNS DFS benefit with adjuvant osimertinib were sustained (stage II-IIIA DFS hazard ratio (HR) 0.23; 95% confidence interval (CI) 0.18, 0.30; stage IB-IIIA DFS HR 0.27; 95% CI 0.21, 0.34; stage II-IIIA CNS DFS HR 0.24; 95% CI 0.14, 0.42), with a tolerable safety profile observed over the extended treatment duration. Authors report the planned final overall survival (OS) analysis from ADAURA. Eligible patients (aged ≥18 years (≥20 in Japan and Taiwan), WHO PS 0/1 with completely resected EGFRm (ex19del/ L858R) stage IB, II or IIIA (AJCC/UICC 7th edition) NSCLC; adjuvant chemotherapy allowed) were randomized 1:1 to osimertinib 80 mg once daily or placebo until disease recurrence, treatment completion (3 years), or a discontinuation criterion was met. The primary endpoint was investigator-assessed DFS in stage II-IIIA.

Key secondary endpoints: DFS in stage IB-IIIA, OS and safety. Data cut-off: January 27, 2023. Globally, 682 patients were randomized; osimertinib n=339, placebo n=343. Adjuvant osimertinib significantly improved OS vs placebo. In patients with stage II-IIIA disease, OS HR was 0.49 (95% CI 0.33, 0.73; p=0.0004; 100/470 events, 21% maturity); 5-year OS rate was 85% with osimertinib vs 73% with placebo. Median follow-up for OS in stage II-IIIA was 59.9 months (osimertinib) and 56.2 months (placebo). In the overall population (stage IB-IIIA), OS HR was 0.49 (95% CI 0.34, 0.70; p<0.0001; 124/682 events, 18% maturity); 5-year OS rate was 88% with osimertinib vs 78% with placebo, with a median follow-up for OS of 60.4 months (osimertinib) and 59.4 months (placebo). Median OS was not reached in either population or treatment group.

Adjuvant osimertinib demonstrated an unprecedented, highly statistically significant and clinically meaningful OS benefit in patients with EGFRm stage IB-IIIA NSCLC after complete tumor resection, with or without adjuvant chemotherapy. ADAURA is the first global Phase III study to demonstrate a statistically significant DFS and OS benefit with targeted treatment for patients with EGFRm stage IB-IIIA NSCLC. Clinical trial information: NCT02511106.

Reference: Herbst R, Tsuboi M, John T et al. Overall survival analysis from the ADAURA trial of adjuvant osimertinib in patients with resected EGFR mutated (EGFRm) stage IB-IIIA non-small cell lung cancer (NSCLC) J Clin Oncol 41, 2023 (suppl 17; abstr LBA3).



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