

Lung-MAP S1400 Lung Master Protocol Update Meeting

Friday, April 29, 2016 2:30 to 4:00 pm

Hyatt Regency San Francisco Seacliff A-D (Bay Level)

Agenda

Welcome Karen Kelly, MD

SWOG Lung Committee Chair

Study Updates Vassiliki (Vali) Papadimitrakopoulou, MD

Study Chair, Medical Oncology

S1400I Patient Reported Outcomes Joseph Unger, PhD

Biostatistician, Patient Reported Outcomes

Study Logistics Mary Redman, PhD

Lead Biostatistician

Tissue Requirements Philip C. Mack, PhD

Study Co-Chair, Translational Medicine

Quality Assurance and Monitoring Elaine Armstrong, MS

SWOG Quality Assurance Manager

Accrual Enhancement Committee Roy Herbst, MD, PhD

Study Co-Chair, Medical Oncology

Site Perspectives Roy Herbst, MD, PhD

Study Co-Chair, Medical Oncology

Emily Shardelow, BS, CCRP

Clinical Research Associate II

Markey Cancer Center, University of Kentucky

Lexington, Kentucky

James Wade, III, MD

Principal Investigator

Heartland NCORP, Decatur, Illinois

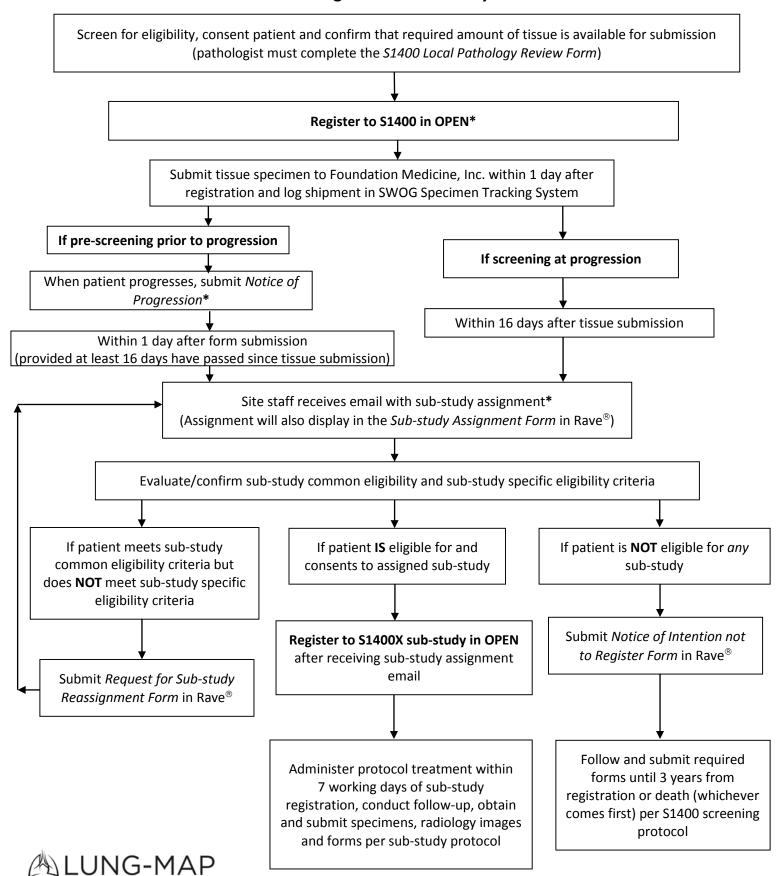
Questions and Answers David Gandara, MD

Study Co-Chair, Moderator





S1400 Registration and Study Flow



^{*}If it is determined that a patient will not register to a sub-study at any time following S1400 registration, the *Notice of Intention Not to Register* form must be submitted. Should the decision to not register a patient to their assigned sub-study be reversed, sub-study registration <u>is</u> allowed despite submission of the *Notice of Intention Not to Register* form.

Study requirement

TUMOR CONTENT ≥ 20%

including tumor volume $\geq 0.2 \text{ mm}^3$

It is important that the specimen contains as much tumor content as possible to ensure that there's enough DNA needed for sequencing.



<u>\$1400</u> requires adequate tissue for biomarker profiling.

For details, please refer to the **S1400** protocol Section 5 for eligibility requirements and Section 15 for a complete description of tissue requirements. Specimens must be submitted using the SWOG Specimen Tracking System, a process outlined in the **S1400** protocol Section 15.

contain a tumor volume

NOTE FOR LIVER SPECIMENS:

It is recommended that at least 40% of the specimen contain malignant cells to ensure sufficient tumor DNA.

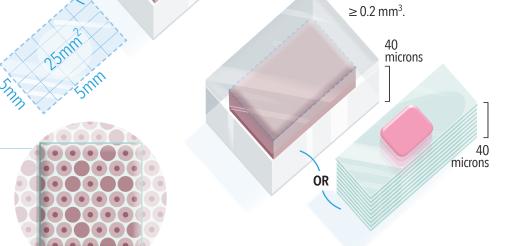
For Best Results, Use These Specifications OR SPECIMEN TYPE FFPE BLOCK or 12-20 SLIDES (+H&E SLIDE) Tissue must be formalin-fixed and paraffin embedded. A tissue block is preferred. • If sending slides: **BLOCK SLIDES** - A minimum of 12 unstained, charged, and unbaked 4-5 micron slides are required. -20 slides are highly recommended. SURFACE AREA ≥ 25 mm² SPECIMEN VOLUME ≥ 1 mm³ - Slides should include an additional H&E or The face of the block or slide (including tumor volume $\geq 0.2 \text{ mm}^3$) Aperio stained slide (If unavailable, submit should be at least 25 mm² an extra unstained slide). The total volume (surface area x depth) of the in area (for example, • For core biopsy tissue, use 3-5 cores block or stacked slides should be at least 1 mm³. 5x 5 mm or 2.5 x embedded in a single block, aligned so that If the surface area is 25 mm² as recommended, 10mm). when cut, the blade is running parallel to the the depth should be at least 40 microns. For this long axis of the cores. reason, a minimum of 12 slides is required. In OR addition, the specimen must

• Fine needle aspirates with good cellularity are acceptable as long as cell blocks are established.

 Biopsy tissue can be from primary or metastatic sites. Bone biopsies are not allowed.

NUCLEATED CELLULARITY ≥ 80 %

Specimens containing less than 80% nucleated cells require greater total volume and may not be suitable to assay. A total of 75,000 to 150,000 nucleated cells are recommended.



PRIOR TO ENROLLMENT, YOUR LOCAL PATHOLOGIST MUST SIGN OFF ON THE **\$1400** LOCAL PATHOLOGY REVIEW FORM CERTIFYING THAT TISSUE REQUIREMENTS HAVE BEEN MET.





We are seeking applicants for a new **S1400 Lung-MAP Site Coordinators Committee.** We would like the members to represent all types of sites: NCTN, NCORP, CCTG, academic, minority, etc. SWOG has funds to support travel for members to two SCC meetings per year, in conjunction with the SWOG Group Meeting, and funding for up to four conference calls per year. For more information about the committee and to apply:

https://www.surveymonkey.com/r/LMAPSCC.

The committee will have representatives from across the Groups, minority sites, and broad geographic representation among participating sites. In addition to sharing in the planning, development and implementation of S1400 training and update meetings, the Committee members will be asked to recommend and review accrual enhancement strategies and materials, changes to study procedures, and updates to data collection forms. In addition, the SCC will provide content for a SCC column in the Lung-MAP staff newsletter and solicit feedback for other content. They will also advise the Accrual Enhancement Committee on content for the Lung-MAP website. Committee members will assist with study promotion and act as Lung-MAP representatives when attending Group meetings or other scientific meetings. Committee members may act as mentors or auditors, supporting the successful implementation of S1400 at the study sites.

- 1. The Site Coordinators Committee will be composed of 12 voting members.
- The Committee officers will consist of a Chair, a Co-Chair and an Alternate Co-Chair, to be elected by the voting members of the Committee.
- 3. The SWOG Recruitment Manager and S1400 Lung-Map Project Manager will serve on the Committee as exofficio non-voting members.
- 4. The Chair will provide meeting summaries to the S1400 leadership. The Chair may delegate this responsibility to another officer or member as necessary.
- 5. Members of the Site Coordinators Committee will serve for a minimum of a two year term. Terms are openended; members may continue to serve as long as they wish, provided they meet attendance and contribution criteria.
- 6. If a member resigns or is removed from the Committee, the Committee will solicit applications for membership and select a new member from those who apply. The Committee may also select a new member from a pool of applicants who applied for previous vacancies. The SWOG Statistical Center will maintain records of the application process.

Application Deadline: May 15, 2016

Ask Karen Anderson
Recruitment & Adherence Manager
karena@crab.org

- Sites will receive up to \$5,869 (\$1,079 screening/\$4,790 registration) for each patient on trial
- ❖ If biopsies are needed, sites will receive \$3,000/\$6,000 for the biopsies performed at screening and/or progression after initial response on Arm1
- Sites will be reimbursed for additional research based procedures
- Sites will be reimbursed \$1,333 for on-site visits outside the regular audit schedule

Funding Questions: SWOG Group Chair's Office, funding@swog.org
For additional information, see funding memos



www.LungMap.org Volume 3 | Spring 2016



Securing and sending an adequate tumor tissue sample is essential to getting your patients quick access to treatment on the Lung-MAP trial. According to Dr. Fred Hirsch, Pathology Study Chair, "there must be local quality control at every step: acquisition, processing and submitting the tissue, to get good quality."

One of the most important steps for success is confirmation by your local pathologist that the tissue sample meets the Lung-MAP specifications. The pathologist must review each sample before patients are registered to the Lung-MAP trial in order to meet protocol eligibility requirements. After registering the patient, the tissue then needs to be submitted as soon as possible so as not to delay the sub-study

assignment. If a patient has already had biomarker testing at Foundation Medicine, the previous results cannot be used. Because of the potential use of these trials in FDA registration, the biomarker profiling must be done specifically for S1400.

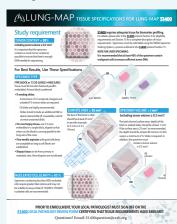
Naomi L. Hullinger, RN, Supervisor, San Antonio Military Medical Center, credits their success to these 3 steps:

- meeting with the Chief of Pathology to review the tissue requirements and timeline, discuss barriers and resolutions,
- 2) identifying a pathology staff member to work with, and
- 3) checking the status of available tissue as soon as a potential patient is identified.

Tissue Specifications

Tissue is most often inadequate for biomarker profiling due to insufficient

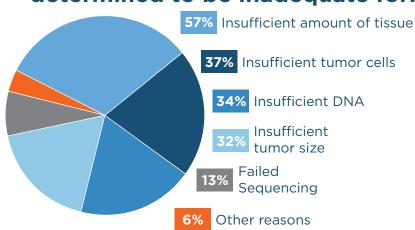
tumor cells. DNA, or amount of tissue. For this reason, it is crucial that your local pathologist review the tissue for adequacy before submitting it to FMI. We



provide additional specimen collection and selection guidelines in the "Tissue Specifications for Lung-MAP S1400" document (shown above) to help ensure the best possible results.

The "Tissue Specifications for Lung-MAP S1400" document is available via CTSU.

About 14% of tissue submissions are determined to be inadequate for:



(Note: a sample could have multiple reasons for inadequacy.)

Data as of March 11, 2016











The Top 12 Accruing Sites

Site	S1400 Accrual
Heartland Cancer Research NCORP	27
Kaiser Permanente NCI Community Oncology Research Program	20
Georgia NCI Community Oncology Research Program	19
Southeast Clinical Oncology Research (SCOR) Consortium NCORP	19
Catholic Health Initiatives NCORP	14
Yale University - Yale Cancer Center LAPS	13
Metro Minnesota Community Oncology Research Consortium	13
University of Pittsburgh Cancer Institute LAPS	12
Michigan Cancer Research Consortium NCORP	12
VCU Massey Cancer Center Minority Underserved NCORP	12
Wisconsin NCI Community Oncology Research Program	11
Wichita NCI Community Oncology Research Program	10

All site representatives are invited!

Lung-MAP Update Meeting SWOG Group Meeting San Francisco Hyatt Regency Friday, April 29

2:30 pm - 4:00 pm PST

Register for this meeting at swog.org

Did you know?

- If archival tissue is not sufficient, funding is available for an S1400 screening biopsy. Logging the tissue into SWOG Specimen Tracking will trigger reimbursement. If the patient has a biopsy specifically for the trial but is never registered, you can email funding@swog.org for a reimbursement form.
- For <u>pre-screening</u> patients: Submission of the S1400 Notice of Progression is required to receive the patient's substudy assignment and full biomarker report. The assignment email will be sent one day after submission of this form, provided at least 16 days have passed since tissue submission.
- The study's biomarker profiling includes EGFR and ALK testing.
 It is not required prior to S1400 registration, but if testing was done, the patient must not have been positive for either of these alterations

STUDY CONTACTS GOT A LUNG-MAP QUESTION? HERE'S WHO TO CALL.

Eligibility + Imaging + Data Submission:

Data Operations, (206) 652-2267 S1400Question@crab.org

Protocol + Regulatory:

SWOG Operations Office, (210) 614-8808, ext. 1019 cmiwa@swog.org

Treatment + Toxicity Study Distribution Lists:

S1400A: S1400AMedicalQuery@swog.org S1400B: S1400BMedicalQuery@swog.org S1400C: S1400CMedicalQuery@swog.org S1400D: S1400DMedicalQuery@swog.org

S1400I: S1400IMedicalQuery@swog.org

Funding Questions:

Group Chair's Office, funding@swog.org For additional information, see funding memos.

Eligibility / Data Submission	Protocol / Regulatory	Public Relations / Media
Louise Highleyman and Kara Amber Data Coordinators SWOG Data Operations Center (206) 652-2267 S1400Question@crab.org	Crystal Miwa Protocol Coordinator SWOG Operations Office (210) 614-8808 ext 1019 cmiwa@swog.org	Wendy Lawton SWOG Communications Manager SWOG Group Chair's Office (503) 348-8675 lawtonw@ohsu.edu
Specimen		Imaging
Fred R. Hirsch, MD, PhD Study Co-Chair (303) 724-3858 fred.hirsch@ucdenver.edu	Philip C. Mack, PhD Study Co-Chair (916) 734-8022 pcmack@ucdavis.edu	Lawrence H. Schwartz, MD Study Co-Chair (212) 305-8994 Ischwartz@columbia.edu

Specimen and Imaging Submission

Foundation Medicine Inc. TRIAD

(617) 418-2200 <u>SWOG1400@irocohio.org</u>

\$1400@foundationmedicine.com or call IROC Ohio at 614-293-2929

USA Investigational Drug Distribution

Pharmaceutical Management Branch (PMB)

Matthew Boron (240) 276-6575

PMBAfterHours@mail.nih.gov

Funding

Federal funding: Pat Mize, MBA

Accounting Specialist (503) 418-4533

mizep@ohsu.edu

Non-federal funding:

Casey Dawson

Financial Administration: SWOG-CTI

(734) 998-6889

casey@thehopefoundation.org

S1400 Treatment-related/Medical				
Vassiliki Papadimitrakopoulou, MD Study Chair (713) 792-6363 S1400MedicalQuery@swog.org	Roy S. Herbst, MD Study Co-Chair (203) 785-6879 S1400MedicalQuery@swog.org	David R. Gandara, MD Study Co-Chair (916) 734-3771 S1400MedicalQuery@swog.org		
Sub-Study Treatment- related/ Medical	Study Chair	Study Co-Chair		
S1400A S1400AMedicalQuery@swog.org	Vassiliki A. Papadimitrakopoulou, MD NCTN Group: SWOG (713) 792-6363	Hossein Borghaei, DO NCTN Group: ECOG-ACRIN (215) 214-4297		
S1400B S1400BMedicalQuery@swog.org	Corey J. Langer, MD NCTN Group: NRG (215) 615-5121	Jeffrey A. Engelman, MD, PhD NCTN Group: ALLIANCE (617) 724-4000		
S1400C S1400CMedicalQuery@swog.org	Martin J. Edelman, MD NCTN Group: ALLIANCE (410) 328-8708	Kathy S. Albain, MD NCTN Group: SWOG (708) 327-3102		
S1400D S1400DMedicalQuery@swog.org	Charu Aggarwal, MD, MPH NCTN Group: ECOG-ACRIN (215) 662-6318	Primo N. Lara, Jr., MD NCTN Group: SWOG (916) 734-5959		
S1400E S1400EMedicalQuery@swog.org	Mark A. Socinski, MD NCTN Group: ALLIANCE (412) 692-4724			
S1400I S1400IMedicalQuery@swog.org	Scott N. Gettinger, M.D. NCTN Group, SWOG (203) 785-7564	Lyudmila A. Bazhenova, M.D. NCTN Group: Alliance (858) 822-6189		