



# WHAT DO THESE RESULTS MEAN FOR INDIVIDUALS WITH NON-SMALL CELL LUNG CANCER (NSCLC)?

Amivantamab plus lazertinib helped individuals with previously untreated epidermal growth factor receptor (*EGFR*)–mutant NSCLC live longer compared to osimertinib, with a projected median overall survival benefit of >1 year. Amivantamab plus lazertinib also worked better on cancer that had spread to the brain

# Amivantamab Plus Lazertinib vs Osimertinib in First-Line *EGFR*-Mutant Advanced NSCLC: Final Overall Survival From MARIPOSA

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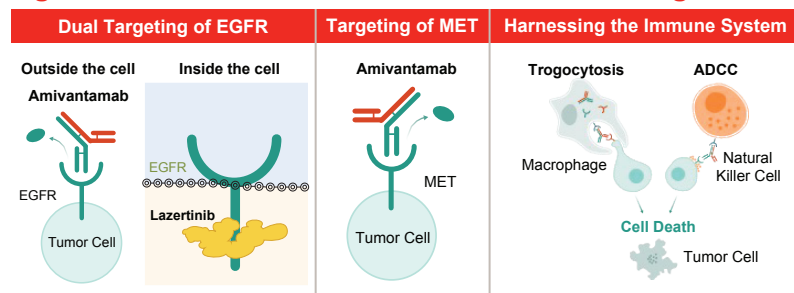
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## WHAT WAS THE PURPOSE OF THIS STUDY?

- Researchers wanted to see if a combination of 2 drugs, amivantamab plus lazertinib, worked better than another drug, osimertinib, for treating individuals who had previously untreated advanced *EGFR*-mutant NSCLC

Figure 1: How amivantamab + lazertinib work together



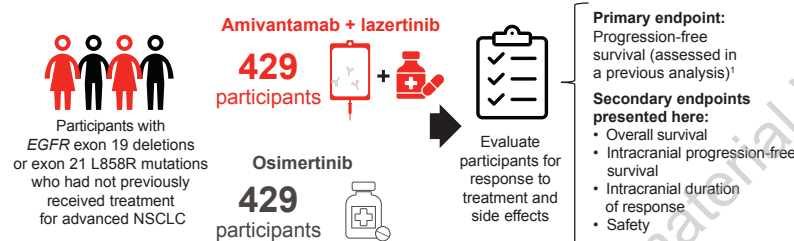
ADCC, antibody-dependent cellular cytotoxicity; EGFR, epidermal growth factor receptor.



## WHO WAS IN THE STUDY AND HOW WAS IT CARRIED OUT?

- MARIPOSA (NCT04487080) was conducted by randomly assigning participants to 1 of 3 groups: the first group received amivantamab plus lazertinib, the second group received osimertinib, and the third one received lazertinib alone; here we focus on the amivantamab plus lazertinib and osimertinib groups
- The main goals of this analysis were to see how long the participants lived and how effective these drugs are in the brain

Figure 2: MARIPOSA study design



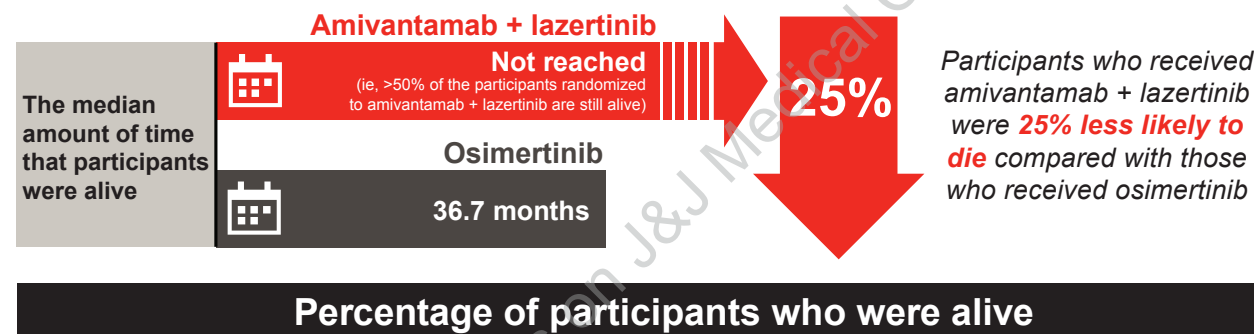
EGFR, epidermal growth factor receptor; NSCLC, non-small cell lung cancer.



## WHAT WERE THE RESULTS?

The study found that amivantamab plus lazertinib helped participants live longer compared to osimertinib, with a projected median overall survival benefit of >1 year. Participants with a history of their cancer spreading to their brain were less likely to have their disease grow further in their brain or die

Figure 3: Overall survival



Percentage of participants who were alive

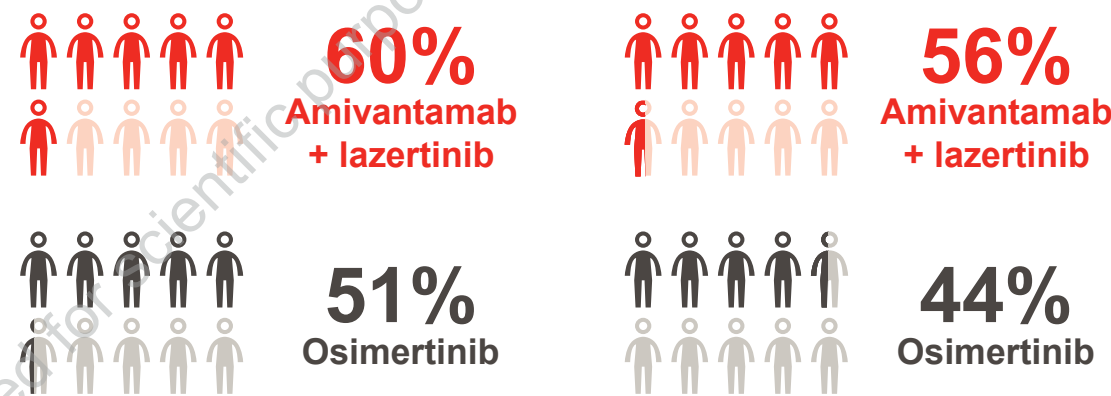


Figure 4: Outcomes in the brain

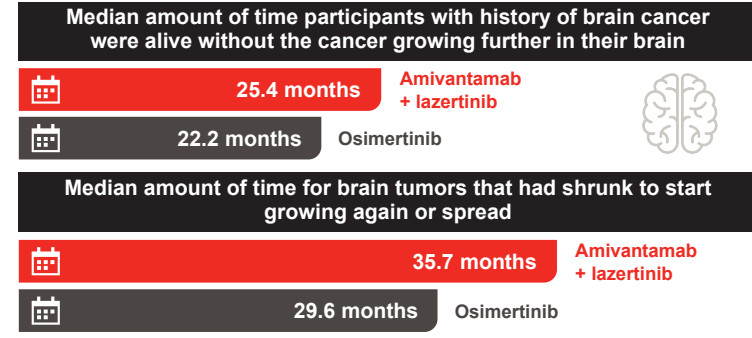


Figure 5: Preventing side effects with prophylactic regimens

Side effects with amivantamab plus lazertinib were generally manageable and no new side effects were observed compared with the previous analysis<sup>1</sup>

### Glossary of terms

<b>ADCC</b>	A process in which immune cells destroy targets coated with antibodies	<b>Macrophage</b>	A cell type that takes up bacteria and cell debris, helps show antigens, and sends signals	<b>EGFR mutation</b>	EGFR is a protein that relays chemical signals that tell the cell to grow, divide, or survive. Mutations in the <i>EGFR</i> gene are common in NSCLC and can affect how the cancer responds to treatment	<b>Exon 21 L858R substitution mutation</b>	An alteration to the DNA sequence of <i>EGFR</i> that changes the function of the protein. In the case of L858R, a small part of DNA is replaced with a different one within the <i>EGFR</i> gene	<b>Median intracranial progression-free survival</b>	Median amount of time participants with history of brain cancer were alive without the cancer growing further in their brain
<b>Natural killer cells</b>	Cells that kill virus-infected and cancer cells without needing to recognize them first	<b>Trophocytosis</b>	A process in which immune cells take bits of the surface from other cells during contact	<b>Exon 19 deletion mutation</b>	An alteration to the DNA sequence of <i>EGFR</i> that changes the function of the protein. In the case of exon 19 deletions, DNA was deleted in the part of the <i>EGFR</i> gene called exon 19	<b>Median overall survival</b>	The amount of time from the start of treatment to the point when half of the participants are still alive	<b>Median intracranial duration of response</b>	Median amount of time for brain tumors that had shrunk to start growing again or spread

### REFERENCES:

1. Cho BC, et al. *N Engl J Med*. 2024;391(16):1486-1498.



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