# THE ONCOMINE™ PRECISION ASSAY

### PATHOLOGY IS IN OUR DNA



Precision oncology continues to provide a significant survival benefit to cancer patients by matching biomarker therapy with targetable tumour-specific molecular aberrations. To this end, we offer an improved and more comprehensive solid tumour panel, the Oncomine™ Precision Assay.

### What is the Oncomine™ Precision Assay?

The Oncomine™ Precision Assay is a Next Generation Sequencing (NGS) solution that includes all relevant and emerging targets in precision oncology. The following genes are included in the assay:

DNA Hotspots: AKT1, AKT2, AKT3, ALK, AR, ARAF, BRAF, CDK4, CDKN2A, CHEK2, CTNNB1, EGFR, ERBB2, ERBB3, ERBB4, ESR1, FGFR1, FGFR2, FGFR3, FGFR4, FLT3, GNA11, GNAQ, GNAS, HRAS, IDH1, IDH2, KIT, KRAS, MAP2K1, MAP2K2, MET, MTOR, NRAS, NTRK1, NTRK2, NTRK3, PDGFRA, PIK3CA, PTEN, RAF1, RET, ROS1, SMO, TP53

**CNVs:** ALK, AR, CD274, CDKN2A, EGFR, ERBB2, ERBB3, FGFR1, FGFR2, FGFR3, KRAS, MET, PIK3CA, PTEN

Fusions: ALK, AR, BRAF, EGFR, ESR1, FGFR1, FGFR2, FGFR3, MET, NRG1, NTRK1, NTRK2, NTRK3, NUTM1, RET, ROS1, RSPO2, RSPO3

## How does the Oncomine™ Precision assay differ from the EGFRASSEQ solid tumour panel?

The Oncomine™ Precision Assay offers a significant improvement over our current solid tumour panel:

#### • Expanded profile

In comparison to the EGFRASSEQ which focuses on mutations in 10 genes, the Oncomine™ Precision Assay enables detection of 2769 unique variants, including mutations, Copy Number Variants (CNVs), and fusion variants, across 50 key genes.

- Reduced sample requirements and increased sensitivity
   The Oncomine™ Precision Assay requires only 10 ng
   of DNA (±3000 cells) or RNA, successfully producing
   sequencing results in more than 95% of samples.
- Improved turnaround time with greater clinical impact
   With the Ion Torrent Genexus™ System, genetic results
   can be obtained sooner, resulting in earlier initiation of
   the most appropriate treatment, with enhanced impact
   and reduced patient anxiety. Turnaround time will fall
   within international guidelines for NGS-based diagnostics
   and can be expected in 7-10 working days.

### Cost saving

It is more cost effective to run a single NGS panel than multiple single gene PCR assays.

# How does the Precision assay differ from the Focus assay offered by other laboratories?

The Oncomine™ Precision assay should be regarded as an evolution of the Focus assay. There is an updated gene list that emphasises potential future targeted therapies and detects increased and novel fusion isoforms. In addition, the Oncomine™ Precision assay includes 218 potential resistance mutations and is liquid biopsy compatible.



### **Fast Facts**

### **HOW TO REQUEST:**

- Contact the relevant histopathology laboratory where the case was reported
- Request OPANGS
- Special mnemonics are used for Discovery Health Patients and a preauthorisation code is required:
  - **OPALUNG** (Lung tumours)
  - **OPACOL** (Colorectal tumours)

### **TEST RESULTS:**

- The electronic report can be expected in 7-10 working days
- A clear and concise report is generated using the Oncomine™ reporter software
- A detailed report including relevant clinical trials is available upon request

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### Precision oncology targets with matched agents approved for solid tumours

Tumour type	Target / Biomarker	FDA-approved therapy
Breast cancer	ERBB2 (HER2) amplification	Herceptin® (trastuzumab), Kadcyla® (ado-trastuzumab-emtansine), or Perjeta® (pertuzumab)
	PIK3CA	Piqray® (alpelisib)
Colorectal cancer	BRAF V600E	Braftovi® (encorafinib) in combination with Erbitux® (cetuximab)
	KRAS wild-type (absence of variants in codons 12 and 13)	Erbitux® (cetuximab)
	Both KRAS and NRAS wild-type	Vectibix® (panitumumab)
Cholangiocarcinoma	FGFR2 fusions and select rearrangements	Pemazyre™ (pemigatinib) or Truseltiq™ (infigratinib)
GIST	KIT	Gleevec™ (imatinib)
Melanoma	BRAF V600E	Tafinlar® (dabrafenib) or Zelboraf® (vemurafenib)
	BRAF V600E or V600K	Mekinist® (trametinib) or Cotellic® (cobimetinib), in combination with Zelboraf® (vemurafenib)
Non-Small Cell Lung Carcinoma (NSCLC)	ALK rearrangement	Alecensa®(alectinib), Alunbrig® (brigatinib), Xalkori® (crizotinib), or Zykadia® (ceritinib)
	BRAF V600E	Tafinlar® (dabrafenib) in combination with Mekinist® (trametinib)
	EGFR Exon 19	Gilotrif® (afatinib), Iressa® (gefitinib), Tagrisso® (osimertinib) or Tarceva® (erlotinib)
	EGFR Exon 20 (T790M)	Tagrisso® (osimertinib)
	EGFR Exon 21 (L858R)	Gilotrif® (afatinib), Iressa® (gefitinib), Tagrisso® (osimertinib) or Tarceva® (erlotinib)
	KRAS G12C	Lumakras™ (sotorasib)
	MET	Tabrecta® (capmatinib)
	RET alteration	Gavreto® (pralsetinib), Retevmo® (selpercatinib)
	ROS1	Xalkori® (crizotinib), Rozlytrek® (entrectinib)
Solid tumours	NTRK1/2/3 fusions	Vitrakvi® (larotrectinib), Rozlytrek® (entrectinib)
Thyroid carcinoma	RET alteration	Gavreto® (pralsetinib)
	BRAF V600E	Tafinlar® (dabrafenib) in combination with Mekinist® (trametinib)
Urothelial cancer	FGFR2/3 altered tumours	Balversa® (erdafitinib)

Cancer treatment has historically followed a one-size-fits-all model. The precision oncology approach takes advantage of recent advances in genome sequencing and offers an unprecedented opportunity to make personalised precision patient care a reality.