Generating a free molecular screening platform for lung cancer characterization.

What is EPROPA?

EPROPA (European Program for ROutine testing of Patients with Advanced lung cancer) is a support program promoted by WALCE (Women Against Lung Cancer in Europe) and designed to offer equality of access to molecular testing and associated targeted drugs within clinical trials across Europe. EPROPA through WALCE involves Centres of Expertise in the treatment of lung cancer, Academia and Pharma Companies. The main goal of EPROPA is to generate a free-of-charge molecular screening platform for tumor characterization in order to increase the detection of oncogenic drivers (frequent or rare) in NSCLC patients. At the same time, EPROPA will optimize patients access to biomarker-driven clinical trials.

Which is the main goal?

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Who designed EPROPA?

Women Against Lung Cancer in Europe (WALCE) is a non-profit Organization founded in 2006, based in Italy and networking at European level. Its primary aims are to support people affected by lung cancer and their families and to promote educational programs for patients as well as awareness and primary prevention campaigns for the general public. WALCE is a member of Lung Cancer Europe (LuCE) and Global Lung Cancer Coalition (GLCC). With EPROPA, WALCE is aiming to reduce disparities to the access to extensive molecular screening and clinical trials with biomarkerdriven drugs in Europe.

Where is the EPROPA Reference Centre?

WALCE is located at San Luigi University Hospital in Orbassano (Turin, Italy), close to the Molecular Biology Lab of the Pathological Anatomy Division of the Department of Oncology – University of Turin, where tests will be carried out. WALCE along with the Reference Centre will guarantee for the quality and the timely execution of the analyses. The International Association for the Study of Lung Cancer (IASLC) is the official scientific partner together with the Department of Oncology of the University of Turin. A group of Key Opinion Leaders in Thoracic Oncology gave support to EPROPA including: Antonio Araujo (Portugal), Tanja Cufer (Slovenia), Razvan Curca (Romania), Enriqueta Felip (Spain), Dariusz Kowalski (Poland), Helena Linardou (Greece), Laura Mazilu (Romania), Katja Mohorcic (Slovenia), Luis Paz-Ares (Spain), Rodryg Ramlau (Poland), and Nevena Svetozar Sečen (Serbia). Lung Cancer Patient Advocates and Organizations: Alina Comanescu (Romania), Ewelina Szmytke (Poland) and K.E.F.I. Association (Greece). Pharma Companies supporting EPROPA include: Amgen, AstraZeneca, BeiGene, Blueprint Medicines, Eli Lilly, Incyte, Merck, MSD, Pfizer, and Roche.

Who are EPROPA partners?

EPROPA will ensure teleconsulting to a National Reference Centre for patients with NSCLC to share clinical and pathological data. Tissue samples will be shipped to the central laboratory for molecular screening and, on the basis of the biomarkers found, the potential inclusion of patients within clinical trials will be assessed. The estimated turn-around time from shipment of the samples to test results will be approximately 10 working days, from the arrival in the laboratory of the tissue sample.

What will EPROPA do for me?

What will EPROPA do for my patient?

The platform will give free-of-charge molecular screening of tumor samples. WALCE will coordinate a close collaboration between you and Academia and this will give the opportunity to match molecular characteristics and ongoing biomarker-driven clinical trials. In the case the results will open the opportunity to enter in a dedicated clinical trial and the patient accepts to participate to this, EPROPA will help patients to reach the closest site where such study is available, covering the cost of journey and staying for both patient and one of his/her caregivers during the experimental treatment. However, as the treating physician, you will follow all the steps of the process and you will mediate every choice during your patient's journey. EPROPA project is not intended at all to substitute your professionalism.



Main inclusion criteria

- See ≥ 18 years;
- Histologically or cytologically confirmed diagnosis of non-small-cell lung cancer;
- Stage IIIB / C or IV disease (according to the 8th edition of the IASLC TNM staging system);
- Availability of adequate tumor sample: FFPE tissue sample (tissue block or sections) from the primary tumor, recurrent tumor, metastasis. Central performed confirmation of tumor tissue adequacy in terms of quantity and quality will be required before molecular screening at the Department of Oncology of the University of Turin;

- At least three months of life-expectancy;
- Written informed consent according to ICH / GCP and national / local regulations;
- Absence of exclusion criteria such as: active B or C hepatitis, HIV, second malignancies, severe organ disfunction, comorbidities that may prevent access to clinical trials.

For more information, please refer to the specific part of the Study Protocol.



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