Chapter 2

Beyond the Blood–Brain Barrier: Intracranial Activity of HER2-Targeted ADC Therapy in HER2-Altered NSCLC with Brain Metastases

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Case Study

62-Year-Old Woman

Case Description:

- Metastatic NSCLC with HER2 mutation
- Presented with new cough to her PCP
- Workup showed multiple lung nodules with mediastinal adenopathy, liver mets, and a right adrenal metastasis
- Biopsy demonstrated metastatic NSCLC
- Oncologist started carboplatin and pemetrexed while awaiting genomic testing due to worsening symptoms

Case Study

62-Year-Old Woman

- Genomic testing showed HER2 mutation
- Given the initial response to carboplatin and pemetrexed, she continued on treatment
- After 8 months of therapy, scans showed progression
- Brain MRI for re-staging showed multiple brain mets up to 6 mm

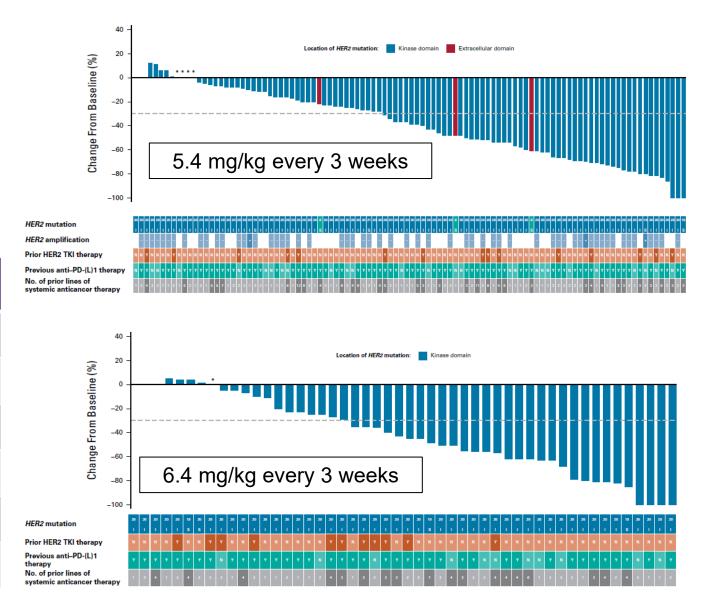
Brain Metastases

- Challenging scenario for solid tumor management
- Some targeted therapies are effective
- Most cytotoxic therapies have some limitations
- Destiny Lung-01 and 02: Trastuzumab deruxtecan for HER2+ NSCLC allowed enrollment of asymptomatic untreated brain mets

DESTINY-Lung02

- Similar efficacy with 5.4 mg/kg dosing for lung cancer relative to the higher dose
- Less toxicity (esp. ILD) with 5.4 mg/kg dosing

Adjudicated drug- related ILD	T-DXd 5.4 mg/kg Once Every 3 Weeks (n = 101), No. (%)	T-DXd 6.4 mg/kg Once Every 3 Weeks (n = 50), No. (%)	
Grade 1	4 (4.0)	4 (8.0)	
Grade 2	7 (6.9)	9 (18.0)	
Grade 3	1 (1.0)	0	
Grade 4	0	0	
Grade 5	1 (1.0)	1 (2.0)	
Total (95% CI)	13 (12.9) (7.0 to 21.0)	14 (28.0) (16.2 to 42.5)	



Clinical Pearl

For HER2-mutant non-small cell lung cancer, the dose [of trastuzumab deruxtecan] is 5.4 mg/kg.

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DESTINY-Lung-01

- 33 patients with CNS metastases at baseline were included
 - 14 had previous treatment with radiation to brain mets
 - 19 presumably had no prior therapy to brain mets
- Of the 19 patients with untreated brain mets, there were a reported 10 that that achieved partial response (53%)
- Among all 33 patients, mPFS: 7.1 months, mOS: 13.8 months
- Overall numbers of trial, mPFS 8.2 months, mOS: 17.8 months

DESTINY-Lung01 and DESTINY-Lung02 Pooled Analysis, Patients ± Brain Mets

	Destiny-Lung02 T-DXd 5.4 mg/kg		Destiny-Lung01 T-DXd 6.4 mg/kg	
	BM (n = 32)	Non-BM (n = 70)	BM (n = 54)	Non-BM (n = 87)
Confirmed systemic ORR, n (%)	15 (46.9)	35 (50.0)	27 (50.0)	51 (58.6)
DCR, n (%)	29 (90.6)	66 (94.3)	50 (92.6)	80 (92.0)
mDoR, mos	4.6	16.8	7.2	14.1
!C-ORR, n (%)	8 (25.0)		10 (18.5)	
CR	4 (12.5)		1 (1.9)	
PR	4 (12.5)	00	9 (16.7)	
SD	18 (56.3)		31 (57.4)	
PD	3 (9.4)		4 (7.4)	
IC-DCR, n (%)	26 (81.3)		4 (7.4)	
mIC-DoR, mos	9.2		4.4	-

Li BT, et al. N Engl J Med 2022;386:241-251. Li B, et al. ESMO 2023. Abstract 1321MO.

Pooled Analysis from Destiny-Breast01, 02, and 03

Treated/Stable BMs:

 Received prior CNSdirected therapy for the BMs, and their CNS disease is stable

Untreated/active BMs:

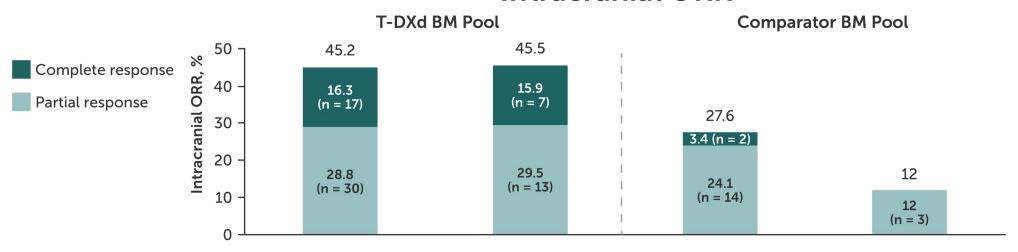
 New or progressive BMs that have not been subjected to CNSdirected therapy since documented progression

	T-DXd Pool (N = 851)		Comparator Pool (N = 465)	
	BM Pool	Non-BM Pool	BM Pool	Non-BM Pool
	(n = 148)	(n = 703)	(n = 83)	(n = 382)
Prior regimens in the metastatic setting, Median, (range), n (%)	3.0 (1.0-14.0)	3.0 (0-27.0)	3.0 (1.0-15.0)	2.0 (0-12.0)
0	0	2 (0.3)	0	1 (0.3)
1	16 (10.8)	108 (15.4)	14 (16.9)	99 (25.9)
2	41 (27.7)	192 (27.3)	27 (32.5)	110 (28.8)
3	35 (23.6)	156 (22.2)	22 (26.5)	89 (23.3)
4	18 (12.2)	71 (10.1)	9 (10.8)	39 (10.2)
≥5	38 (25.7)	174 (24.8)	11 (13.3)	44 (11.5)
Prior anti-HER2 therapy, n (%) Trastuzumab Pertuzumab T-DM1 HER2 TKI	142 (95.9)	643 (91.5)	83 (100)	381 (99.7)
	104 (70.3)	497 (70.7)	59 (71.1)	255 (66.8)
	102 (68.9)	487 (69.3)	41 (49.4)	161 (42.1)
	17 (11.5)	51 (7.3)	14 (16.9)	39 (10.2)
Prior treatment for brain metastasis, n (%) None (untreated/active) Any prior treatment for BMs (treated/stable) RT alone Surgery alone RT and surgery	44 (29.7)	642 (91.3)	25 (30.1)	359 (94.0)
	104 (70.3)	61 (8.7) ^a	58 (69.9)	23 (6.0) ^a
	80 (54.1)	45 (6.4) ^a	44 (53.0)	15 (3.9) ^a
	5 (3.4)	6 (0.9) ^a	5 (6.0)	5 (1.3) ^a
	19 (12.8)	10 (1.4) ^a	9 (10.8)	3 (0.8) ^a

Pooled Analysis from Destiny-Breast01, 02, and 03

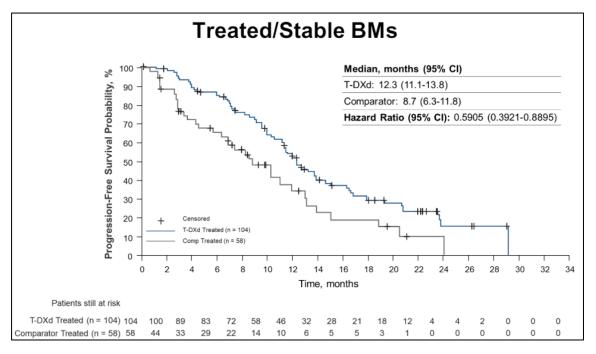
Exploratory Best IC Response, ORR, and DoR per BICR

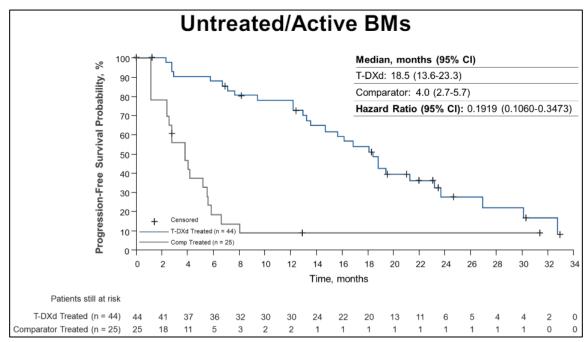
Intracranial ORR



	Treated/stable BMs	Untreated/active BMs	Treated/stable BMs	Untreated/active BMs
	(n = 104)	(n = 44)	(n = 58)	(n = 25)
Best overall IC response, n (%) Stable disease Progressive disease Not evaluable/Missing	48 (46.2)	15 (34.1)	28 (48.3)	15 (60.0)
	3 (2.9)	1 (2.3)	7 (12.1)	5 (20.0)
	6 (5.8)	8 (18.2)	7 (12.1)	2 (8.0)
IC-DoR, median, months (95% CI)	12.3 (9.1-17.9)	17.5 (13.6-31.6)	11.0 (5.6-16.0)	NA

Pooled Analysis from Destiny-Breast01, 02, and 03





Hurvitz SA, et al. ESMO 2023. Abstract 377O.

62-Year-Old Woman With HER2-Mutated, Metastatic NSCLC

- Multiple asymptomatic, untreated brain mets
- Can monitor closely on trastuzumab deruxtecan in this case given the small size of brain mets
- If symptomatic or larger size brain mets, consider treatment with radiation (or resection if indicated)