



A great mind with a big heart living a quality life, even with lung cancer.

> Case report of a 61-year-old patient with stage IV metastatic non-squamous NSCLC & liver metastases. ECOG PS1





TECENTRIQ

+ AVASTIN + CARBOPLATIN

+ PACLITAXEL

*All medical and treatment details are from one IMpower 150 clinical trial patient. The name and personal details of the patient have been changed to protect patient confidentiality.



Tecentriq, in combination with Avastin, paclitaxel and carboplatin, is indicated for the first-line treatment of patients with metastatic non-squamous non-small cell lung cancer (NSCLC) with no EGFR or ALK genomic tumor aberrations.

MEDICAL HISTORY

Former smoker until 2011 1 pack/day for 30 years

Atrial fibrillation Hyperuricaemia

Benign prostate hyperplasia

Laryngeal cancer resolved 2011

Stage III NSCLC

completely resected. 6 cycles adjuvant cisplatin + vinorelbine | 2013

DIAGNOSIS | 04.2016 STAGE IV NSCLC ADDITIONAL LESIONS



Parenchyma numerous small lesions

NEGATIVE MUTATIONS

EGFR | ALK KRAS | ROSI BRAF | HER2 MET-amp

PD-L1 IHC: TC= 1096 IC = 196

Enrolled in clinical trial

05.2016

Randomised to Arm B

4 cycles induction

TECENTRIQ + AVASTIN

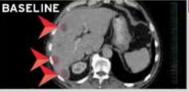
- + CARBOPLATIN
- + PACLITAXEL

Maintenance

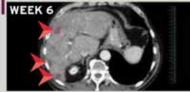
TECENTRIO + AVASTIN

zoom

WEEK 1 Paclitaxel withdrawn after 1st infusion



CT | target liver lesions



33% reduction vs baseline



33% reduction vs baseline





01.2018

Progressive disease due do new adrenal gland lesion

Liver mets stable

2L chemotherapy started





Patient safety summary

Treatment-related* AEs **Grade 1-2**

Nausea

Peripheral neuropathy (grade 3, paclitaxel withdrawn)

Diarrhoea

Neutro-/thrombo-& leukopenia grade 2-4, no change to medication

Hypokalemia & -magnesaemia

Arthralgia

Pain

*In opinion of investigator. Treatment relationship may be to one or more of atezolizumab, bevacizumab, carboplatin or paclitaxel





TECENTRIQ + Avastin + carbo/pac for chemotherapy-naïve non-squamous mNSCLC

A powerful regimen when patients need more

Deliver sustained survival in specifc patient types^{1,5}





12 months PFS was 38% with TECENTRIQ + Avastin + carbo/pac vs 20% with Avastin + carbo/pac alone (HR=0.59: 95% CI, 0.50, 0.69: P<0.0001)

A majority of patients responded to TECENTRIQ + Avastin + carbo/pac³

• ORR 56% (95% CI, 51.4, 61.4) with TECENTRIQ + Avastin + carbo/pac vs 41% (95% CI, 35.3, 45.2) with Avastin + carbo/pac alone

A manageable and familiar safety profile³

2.0% of patients experienced ≥ grade 3 bleeding events with TECENTRIQ + Avastin + carbo/pac vs 1.3% with Avastin + carbo/pac alone[†]

The first cancer immunotherapy combination to demonstrate meaningful OS in EGFR+ patients and patients with liver metastases*





References

1. Tecentriq India prescribing Information 2. Avastin India prescribing Information 3. Socinski MA, Jotte R, Cappuzzo F, et al; IMpower150 Study Group. Atezolizumab for first-line treatment of metastatic nonsquamous NSCLC. N Engl J Med. 2018;378:2288-2301. 4. Data on file. Roche. 5. Nogami N et. al J Thorac Oncol. 2022 Feb;17(2):309-323.

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Please use the QR code/click on the link for the latest Prescribing Information (PI)

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