Understanding EGFR+ Lung Cancer

A Patient Guide to Biomarker Testing, Treatment, and Costs

Your Diagnosis: NSCLC

Hearing the words "lung cancer" can feel scary. But there is good news. There are many treatment choices for non-small cell lung cancer, or NSCLC.

We want you to feel ready for your cancer care. This guide explains some of the words you may hear. If you were just diagnosed, it helps to learn about genetic tests, called biomarker tests. This test finds the gene changes that may explain how the tumor behaves.

Your treatment plan may use more than one type of medicine. Some medicines go into a vein at a clinic (intravenous, or IV), some are given as a shot under the skin also at a clinic (subcutaneous, or SUBQ), and others are pills you take at home. Not everyone with NSCLC will receive the same treatment.

What Is a Biomarker?

A biomarker is a small signal from a tumor cell. It is short for "biological marker." This signal can tell your care team a lot. It can show how your cancer cells act. It can show how they grow, change, or respond to medicine.

What Is Biomarker Testing?

Biomarker testing looks closely at the DNA, RNA, or proteins inside your tumor. It is also called molecular testing or genomic testing. This test finds the exact gene changes that are making your cancer grow.

With this information, your care team can pick a treatment that can work well for your cancer.

How Is Testing Done?

Most biomarker tests use a small sample from your biopsy. A sample from your tumor is called a tissue biopsy. Sometimes, your care team can test a sample of your blood instead. This is called a liquid biopsy.

Other Biomarkers Tested for in NSCLC

Biomarker	How Treatment May Be Given
EGFR	IV or SUBQ and/or pill
ALK	Pill
ROS1	Pill
KRAS G12C	Pill
BRAF V600E	Pill
MET exon 14	Pill
c-MET	IV
RET	Pill
HER2	IV or pill
NTRK	Pill
NRG1	IV
PD-L1	IV or SUBQ

What Is EGFR?

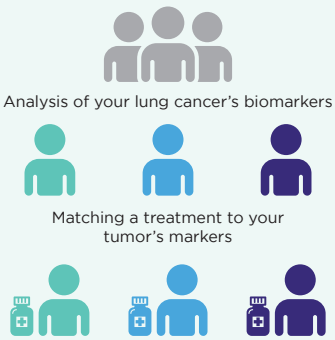
EGFR stands for epidermal growth factor receptor. It is a protein on the outside of cells that helps them grow.

In some lung cancers, a change in the EGFR gene makes cells grow out of control. About 1 in 4 people with NSCLC have this gene change.

If you have an EGFR gene change, also called EGFR-positive NSCLC, you may be a good fit for targeted therapy.

How Biomarker Testing Helps

- Pinpoints exactly what is influencing your cancer's behavior
- Matches you with the treatment most likely to work
- Tracks how well your treatment is working over time



Sarah's Journey

Sarah, a 55-year-old middle school math teacher, always prided herself on living a healthy lifestyle and being organized. When she developed a stubborn cough, she blamed it on seasonal allergies and the dusty chalkboards in her classroom. But when the cough led to a diagnosis of NSCLC 2 weeks before Thanksgiving, she felt like her world had been turned completely upside down. A few weeks later, her provider called with an important update: her biomarker testing came back. Sarah's tumor was EGFR-positive.

"Having a target means we have a specific way to fight it," her provider explained. To give Sarah the strongest chance, her care team recommended a combined approach: a daily targeted therapy pill, plus traditional IV chemotherapy.

Balancing Combination Therapy

Sarah's organizational skills were her lifeline for her cancer treatment. Her new routine felt like a part-time job:

- Every Day: Sarah took her targeted therapy pill at 8:00 AM sharp with her morning tea. She learned quickly that taking it at the exact same time every day was the best way to keep a steady amount of the medicine in her body to block the cancer's "on" switch.
- Every 3 Weeks: This was "Clinic Day." Sarah's sister would drive her to the infusion center where she would receive her IV chemotherapy.

Managing the Ups and Downs

"While the daily pill was easier to manage than my clinic visits for IV infusions, both presented their own challenges," Sarah recalled. Combining these treatments meant she had to pay close attention to her body. She learned to manage the dry skin and mild rash caused by the oral medicine using heavy, unscented moisturizers. Following her chemotherapy infusions, Sarah frequently battled nausea and fatigue, relying on a substitute teacher to cover her classes and her neighbors to coordinate a meal train to help her through the toughest weeks.

To cope, she created a visual calendar on her fridge. She put a bright orange sticker on the days she successfully took her pill, and a big blue star on her clinic days. Checking off those orange boxes gave her a sense of control.

Finding Her Stride

There were days Sarah wanted to skip a pill or delay an infusion but she remembered her provider's words: The oral targeted therapy and the IV chemo were working together as a team—one targeting the specific mutation, the other attacking the fast-growing cells—and they needed her to stick to the schedule for the best possible results.

Six months into her treatment, Sarah's scans showed significant shrinkage of her tumors. The side effects and the fatigue were still there but more manageable, and she was able to find her rhythm. She wasn't just surviving the schedule; she was managing it, one orange sticker and one blue star at a time.

Key Terms

Biomarker: A signal from a tumor that shows how cancer may act or respond to treatment.

Biomarker testing: A test of a tumor's DNA, RNA, or proteins. Also called molecular or genomic testing.

Tissue biopsy: A sample taken from your tumor to test for biomarkers.

Liquid biopsy: A blood sample tested for biomarkers. Also called a blood biopsy.

Targeted therapy: A treatment made to attack cancer cells with a specific gene change.

Chemotherapy: Medicine that kills fast-growing cells, including cancer cells.

Immunotherapy: Medicine that helps your immune system find and attack cancer cells.

Sarah's Advice for Others

1. **Ask about biomarker testing immediately**
   Ask your care team if your tumor has been tested. Knowing your specific mutation before starting any therapy is the only way to get the most accurate treatment for *your* specific cancer.

2. **Stick to your schedule**
   Taking your pill at the exact same time every day may seem unnecessary, but consistency is how targeted therapies work best. Set an alarm on your phone and use a visual calendar so you never miss a dose.

3. **Give yourself grace**
   Combining a daily pill with IV or SUBQ therapy may sometimes feel tricky and a little tiresome. Let your friends and family help you, communicate every side effect to your care team so they can help you manage it, and just take things one day at a time.

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What Is Targeted Therapy?

Targeted therapy finds and attacks cancer cells with a specific gene change, like EGFR. It is medicine made just for your exact cancer. Many targeted therapies come as a pill you take at home, others may be IV or SUBQ.

What Is Combination Therapy?

Sometimes cancer cells learn how to get around a single treatment. This is called resistance. Combination therapy uses two or more treatments together, like a one-two punch:

- Targeted therapy blocks the gene change that helps cancer grow
- Immunotherapy helps your immune system find and attack cancer cells
- Chemotherapy kills cells that are growing and dividing quickly

Using more than one treatment can make it harder for cancer cells to adapt. Biomarker testing helps your care team pick what is best for you: targeted therapy alone, or a combination.

What About Side Effects?

Every treatment can cause side effects, but they affect everyone differently. Some patients have very few. Others may have more.

You're not on your own. Your care team can help you feel more comfortable with medicine, treatment adjustments, or simple daily tips. Speak up if something feels off, even if it seems small. The sooner you tell them, the sooner they can help.

Ask questions. Share how you're feeling. Your care team is there to help you.

Importance of Staying on Schedule

Taking your cancer medicine the way your care team prescribes it gives you the best chance to get the best results. If you ever have trouble taking your medicine on time, let your care team know right away so they can help you stay on track.

Questions to Ask Your Care Team

- How will biomarker testing affect my treatment?
- How long will it take to get my test results?
- Can I start treatment before my results come back?
- Will my treatment be in pill form, in IV or SUBQ form, or some combination?
- What side effects should I watch for?
- When should I call the care team?

Starting Your Treatment

1. Save the phone number for who to call in an emergency
2. Make a treatment schedule, plus a backup plan
3. Plan for good nutrition and drinking enough water
4. Talk with your team about exercise and staying active

Tip! Ask your care team to make you a calendar for your treatment!

REMINDERS
1. Take pill same time daily.
2. Drink lots of water.

QUESTIONS FOR MY CARE TEAM:

_____

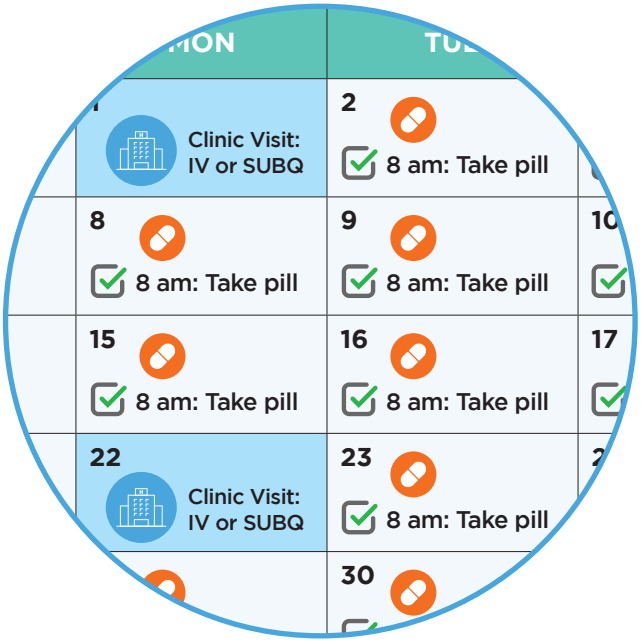
_____

_____

CONTACTS

Care Team:_____

Clinic Phone Number:_____



Understanding the Cost of Your Care

Cancer care can be expensive, but you do not have to handle it alone. Many people need help paying for treatment.

Your insurance company needs to approve treatment first. Your care team can help with this. If you get a treatment at the infusion center or clinic, it is usually covered by your medical insurance. You will likely pay a set fee for each visit.

If you take a pill at home for your cancer treatment, these medicines often come from a specialty pharmacy instead of your local drugstore. This means you may need to plan ahead for refills and work with your care team or pharmacy to keep your supply on track.

IV or SUBQ Therapy	Oral Therapy
Medical Insurance Covered as a medical procedure	**Pharmacy Insurance** Covered as a prescription drug
Clinic Administration Drug is given by nurse/ provider in clinic	**Specialty Pharmacy** Pick up prescription from the pharmacy or it may be delivered to your home
Medical Billing Facility bills insurance directly	**Co-pay Considerations** Patients generally have to pay a co-pay
Co-pay or Coinsurance Fixed fee or % at every visit	**Prescription Drug Tier** Tiered coinsurance is common

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If paying for your medicine is a challenge, whether or not you have health insurance, talk to your care team. Some drug companies offer programs that may help with the cost of medicine for patients who qualify. Your care team can help you look into these options and see what might be available to you.

Getting Help With the Costs of Treatment

Ask your care team for help. Resources, like financial counselors and social workers, can help you find:

- Free or low-cost brand-name pills
- Help paying for utilities, rent, or transportation
- Grants and emergency funds

It is okay to ask for help. Try saying: “Can you help me find support for my living expenses?” or “What options do I have to help pay for these medicines?”

Tips for Your Appointments

- Write down your questions before your visit (see page 3)
- Bring a family member or friend to take notes
- Repeat back what you heard, and ask your team to confirm

Resources for Patients

EGFR Resisters
egfrcancer.org

LUNGevity
lungevity.org

American Cancer Society
cancer.org

CancerCare
cancercare.org

National Cancer Institute
cancer.gov

Making Decisions Together

Shared decision-making means you and your care team choose your treatment plan together. Before you decide, make sure you:

- Understand all of your treatment choices
- Know what could happen if you choose to wait or do nothing
- Talk about the benefits and possible side effects of each therapy
- Pick the treatment that fits your goals and what matters most to you

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Understanding Your Care

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