PRESS RELEASE

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Biomarker Testing Before First Line Therapy Key to Improving Survival Rates for Patients Newly Diagnosed With Metastatic Colorectal Cancer

- *World Metastatic Colorectal Cancer Day sees launch of 'Get Tested' campaign*
- *Campaign aims to improve patient awareness and understanding of RAS biomarker testing as part of a personalised cancer care plan in patients newly diagnosed with mCRC*
- *Knowing the RAS status of a tumour can help doctors optimise a patient's treatment*

[Brussels, 24 March 2015] – The International Colorectal Cancer Association (ICCA)[*] today launched a new awareness campaign *'Get Tested'*, as part of its first-ever World Metastatic Colorectal Cancer Day. The *Get Tested* campaign aims to raise awareness and understanding of the importance of RAS testing in patients who are newly diagnosed with metastatic colorectal cancer (mCRC), and to encourage them to discuss testing with their doctor.

The campaign is endorsed by a number of healthcare professional organisations and patient support groups worldwide, and its website provides information on mCRC and the role of biomarkers in treatment selection, as well as explaining what RAS testing is. The website also provides links to information for patients and resources from several national patient support groups.

The campaign presented a White Paper to Parliamentarians in Brussels that calls for improved access to testing for patients newly diagnosed with mCRC, and for the routine use of RAS biomarker testing before starting first line therapy in establishing a personalised cancer care plan.

"For patients newly diagnosed with mCRC, having a RAS biomarker test before starting first line treatment is extremely important", said Professor Ciardiello, Chairman of the ICCA, President-Elect of the European Society for Medical Oncology and Professor of Medical Oncology at the Seconda Università degli Studi di Napoli in Naples, Italy. "RAS tests can help select the most appropriate treatment as part of a patient's personalised treatment plan. Our campaign website gives patients

more information on mCRC and RAS testing so they can better understand the options available to them and discuss these with their physician."

Speaking at the campaign launch in Brussels, Elisabetta Gardini, MEP, Head of the Italian European People's Party said "mCRC is an example of where selecting a 'personalised', or 'precision', medicine approach through the use of biomarkers can potentially make a real difference to treatment success for patients. We need to rapidly reach a point where all European citizens, and those in other regions around the world, can be confident that appropriate diagnostic testing will be available following diagnosis of mCRC, wherever they are living."

Colorectal cancer, also known as bowel cancer, is the third most common cancer in men and the second most common in women worldwide. In 2012 more than 694,000 people died from the disease.[1] Metastatic colorectal cancer is the advanced stage of the disease, where the primary tumour in the colon or rectum has spread (metastasised) to other parts of the body, commonly the liver or lungs, making it more difficult to treat. Survival rates for mCRC are low, with only 10–12% of patients surviving 5 years after diagnosis.[2,3] Recent analyses of clinical data, however, have indicated that the selection of anti-epidermal growth factor receptor (EGFR) therapy, can improve survival rates for those mCRC patients whose tumours do not have RAS mutations.[4–9] In recognition of the advancement that RAS testing has provided for the management of mCRC, treatment guidelines have been updated in both Europe and USA to recommend that all patients with mCRC undergo a RAS mutation status test before the use of anti-EGFR therapy.[10,11]

A biomarker test is a simple way of looking at the type and status of particular genes of interest in a cancer.[12,13] Biomarkers have been found for many different types of cancer, including colorectal, breast and lung, and have an increasingly important role in helping physicians to tailor care and treatment for their patients – a practise termed 'precision medicine' or 'personalised medicine'.[12–14] RAS − a predictive biomarker − is the collective name for the group of genes that includes KRAS and NRAS and can be used to help select the most appropriate therapy for an individual mCRC patient.[4–8]

In mCRC, RAS has been identified as a key biomarker that can help predict how well mCRC patients may respond to particular treatments, making it important to know their RAS status as early as possible. Approximately half of patients with mCRC have RAS wild-type tumours and half have RAS mutant tumours.[15]

About the International Colorectal Cancer Association

The International Colorectal Cancer Association (ICCA)* is a global initiative bringing together a multi-disciplinary group of stakeholders with an interest in the management of metastatic colorectal cancer and improved patient care. The ICCA is responsible for the *Get Tested* campaign, which aims to raise awareness and understanding of the importance of biomarker testing in selecting treatment as part of developing a personalised cancer care plan for patients newly diagnosed with metastatic colorectal cancer. The *Get Tested* campaign is endorsed by: the Association of Patients with Oncological Diseases, Bowel Cancer Australia, Bowel Cancer UK, CHU de Rouen, Dance with Cancer, EuropaColon, European Alliance Personalised Medicine, European Cancer Patient Coalition, Global Colon Cancer Association, Institut du Cancer de Montpellier, L'Istituto Nazionale Tumori, Irish Cancer Society, Italian Federation of Voluntary Associations in Oncology and Seconda Università di Napoli. Support for the *Get Tested* campaign is provided by Merck Serono, Sysmex Inostics and Amgen.

For further information about RAS and the *Get Tested* campaign, visit: www.GetTestedCampaign.com.

*The ICCA is currently undergoing registration in Brussels as an International Non Profit Making Association (INPMA).

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