

PATHways UK 2021

Understanding Current Challenges in Oncology Molecular Pathways in the UK

This market research study is organised and funded by Novartis Pharmaceuticals UK Ltd

Introduction

The purpose of this nationwide survey is to gain a better understanding of the current services and challenges for cancer diagnostics in UK pathology laboratories.

With recent events impacting the patient oncology diagnostic pathway, including impact of COVID-19 and the centralisation of molecular services to Genomic Laboratory Hubs, this study is designed to capture key points on current and evolving molecular pathology services and pathways with a specific focus on molecular testing in Melanoma, Breast and Lung Cancer.

In particular, we aim to highlight the barriers and challenges that may exist for pathology laboratories in providing, and areas requiring further support that may help enable, a diagnostic infrastructure supporting optimal patient management.

Please note, the results are anonymised and will be aggregated together with the responses of other participants. Your responses will therefore not be attributable to you as an individual or center and you will not be identifiable.

Respondent Profile

1.	Responder ID (to be completed by Novartis Associate)							
2.	Where in th	ne UK is your	Lab?					
Eng	ıland □	Scotland □	Wales □	Northern Ireland □				
3.	How would	l you categoris	se your hospita	al?				
Dist	trict General	□ Regio	nal Centre 🗆	Other □				

4. What region does your lab cover for diagnosis and management of cancer samples?

Local only	□ Referi	ral network 🗆					
Estimated	populations	size:					
5. Which	is your reg	gional GLH o	or genomic	s centre?			
Central & S East GLH	South GLH □	□ Ea West GLH □	st GLH □] North		est GLH □ kshire GLH [mes GLH South
Scottish G	enetics Con	sortium: Glas	gow 🗆	Edinburg	h □ Aber	deen 🗆 D	undee □
All Wales I	Medical Ger	nomics Servic	e (Cardiff)				
Precision N	Medicine Ce	entre (Belfast)					
6. Which	technolog	gies do you d	currently u	se at your	lab?		
IHC □	FISH	□ RT	-PCR □	Sanger S	equencing [□ N	GS □
Other							
Testing fo	r Specific (Cancers of In	<u>iterest</u>				
7. Can yo follow	-	an estimate	of the num	ber of sam	iples you re	ceive per m	onth for each of the
Breast		Lung □	Melar	ioma Skin [☐ Othe	r Cancers □	
8. For br	east cance	r, what is the	current s	tatus of the	following t	ests within	your lab?
Test	Reflex at diagnosis	Testing at progression/ relapse/ other post Dx	Performed by pathology lab	Moved to GLH/ Genomic centre	Moving to GLH/ Genomic hubs	Current Average Turnaround time	Additional Notes

Test	Reflex at diagnosis Y/N/On request	Testing at progression/ relapse/ other post Dx timepoints Reflex/On request/No	Performed by pathology lab Y/N	Moved to GLH/ Genomic centre Y/N	Moving to GLH/ Genomic hubs Y*/N *include timeframe if known	Current Average Turnaround time (calendar days)	Additional Notes
IHC							
HR							
HER2							
PGR							
PD-L1							
NTRKfus							
FISH							
HER2							
NTRKfus							
RT-PCR							
PIK3CA							

BRCA1/2				
NTRKfus				
NGS				
PIK3CA				
HER2				
NTRKfus				
BRCA1/2				
Others				

9. For lung cancer, what is the current status of the following tests within your lab?

Test	Reflex at diagnosis Y/N/On request	Testing at progression/ relapse/ other post Dx timepoints Reflex/On	Performed by pathology lab Y/N	Moved to GLH/ Genomic centre Y/N	Moving to GLH/ Genomic hubs Y*/N *include	Current Average Turnaround time (calendar days)	Additional Notes
		request/No			timeframe if known		
IHC						I	
PD-L1							
ROS1fus							
ALKfus							
BRAF							
NTRKfus							
FISH							
ALKfus							
ROS1fus							
METamp							
HER2amp							
RETfus							
NTRKfus							
RT-PCR				1			
EGFR							
ROS1fus							
ALKfus							
ALK							
BRAF							
KRAS							
METex14							
HER2							
RETfus							
NTRKfus							
NGS							
EGFR							
ROS1fus							
ALKfus							
BRAF							
D. V II							

10. For melanoma, what is the current status of the following tests within your lab?

Test	Reflex at diagnosis Y/N/On request	Testing at progression/ relapse/ other post Dx timepoints Reflex/On request/No	Performed by pathology lab Y/N	Moved to GLH/ Genomic centre Y/N	Moving to GLH/ Genomic hubs Y*/N *include timeframe if known	Current Average Turnaround time (receipt of sample to results reported - calendar days)	Additional Notes
IHC							
BRAF							
PD-L1							
Sanger sequ	uencing		1	1	ı		
BRAF							
NRAS							
Pyrosequen	cing	'	1	1	1		
BRAF							
RT-PCR		'	1	1	1		
BRAF							
NRAS							
KIT							
NGS		'	'	'			
BRAF							
NRAS							
KIT							
Others							'

11.	Please answer th	ne fo	llowing	questions	s regardir	ng your	process	for manag	ing urgen	t sample	es?
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a.	vvnaus	s the selection of tests used for the following types of cancer:
	i.	Breast Cancer: HR ☐ PGR ☐ HER2 ☐ Other N/A ☐
	ii.	Lung Cancer: PD-L1 ☐ EGFR ☐ ALK ☐ BRAF ☐ ROS1 ☐ RET ☐
		Other N/A
	iii.	Melanoma: BRAF ☐ OtherN/A ☐
b.		ese all performed in house? i.e. at your regional pathology centre. If not, where are
	they pe	erformed?
	Yes □	No 🗆 :
C.	For mo	elecular testing, which technology is preferred? (Select one)
	IHC □	RT-PCR Other

	C		Who is funding this testing? NHS Trust □ GLH □ N/A □
	e		Are samples also sent to GLH for NGS? Yes \square No \square N/A \square
12.	What pe	rce	ntage of samples you receive for the following cancers are urgent?
	Breast		
	Melanom	na	
	Lung		
13.			wer the following questions regarding the use of archival tissue: Please describe the process for request of archival tissue: .
	k		Describe the specific challenges with archival tissue that may exists for Lung, Breast or Melanoma?
		_	N/l- 4 i- 4l- 4
	(С.	What is the turnaround times from request to receipt of the tissue? (calendar days) i. Breast ii. Lung iii. Melanoma
	C		What are the challenges with archival tissue for genomics at GLH? Sample quality □ Additional resource requirements □ Processing issues □ Transport □ Other
14.		a.	wer the following questions regarding liquid biopsies: Do you currently offer molecular testing of liquid biopsies at your lab? EGFR only \square No \square
	k		Are there any other molecular liquid biopsies performed at your lab? If so, which one(s) and for which cancer types? No \square Yes \square :
	C		What do you foresee will be the use of liquid biopsy within the diagnostic pathway? For all testing \Box In addition to tissue testing (same targets) \Box If a suitable tissue sample is not available \Box

	Upon progression only □ For specific tests only □ i.e. For panel testing □ Not used □
d.	What are the challenges with liquid biopsies?
45. Ann way av	
-	cribe
Pathway and L	<u>.ogistics</u>
16. What are the	ne biggest difficulties with implementing a new test?
Timelines for in	nplementation □
Test developme	ent 🗆
Test validation	
Administration	
Funding/Resou	rce allocation \square
Communication	
Other	
17. Who is you	ur point of contact within clinic?
Respiratory phy	vsicians/ Pulmonologists □
Surgeon □	
Oncologist	
MDT coordinate	or 🗆
Clinical nurse s	pecialist □
Other	
18. Do you reg	gularly attend MDT?
Yes □ No □	

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19. Do you discuss results at standard MDTs?
Yes □ No □
20. Do you have a molecular specific MDTs?
Yes □ No □
21. Who initiates the testing process?
Respiratory physicians/ Pulmonologists
Surgeon □
Administrator □
Pathologist □
Clinical Scientist (genomics) \square
Oncologist □
Other
22. How do you communicate with clinicians? i.e. regarding how to access testing or to inform them of the availability of a new test?
Email
Webpage □
Hospital Newsletter □
MDT meeting \square
Other
23. On your reports, is clinical interpretation of the molecular results provided with reference to published disease area management recommendations, and available targeted therapies?
No □
Yes □
Reference to published therapy area guidelines only \square
Reference to available targeted therapies only \square
Other

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Recent Changes 24. What impact has COVID-1	19 had on your <u>current</u> services	s?				
Minimal or no impact \square	Medium impact \square	High impact \square				
Please describe if medium or hi	gh impact					
25. What impact has the roll of and/or negative)?	out of the GMS and GLH had o	n your <u>current</u> services (positiv	/e			
Minimal or no impact \square	Medium impact \square	High impact \square	N/A □			
Please describe						
26. What impact will the roll onegative)??	out of the GMS and GLH had or	n your <u>future</u> services (positive	and/or			
Minimal or no impact \square	Medium impact \square	High impact \square	N/A □			
Please describe						
27. Where do you see the role	e of regional pathology centres	s in the optimal delivery of the	GMS?			
Sample preparation \square						
Test assignment (reflexive) \square						
Conducting testing: all \square	cellular □ salvage □	urgent or first line testing \square				
Data analysis □						
Report creation \square						
Education/training □						
Other						
How do you currently work with your GLH? i.e. access to tissue, sample preparation, salvage/urgent testing, preparation of reports, etc. Please describe						
N/A □						

Barriers and Support

29. What do you see as the current barriers for optimal delivery of the GMS? Tick the relevant boxes.

ne delivery of this			Not applicable
	s service?		applicable
ne delivery of this	s service?		
ne delivery of this	s service?		
ne delivery of this	s service?		
ne delivery of this	s service?		
ne delivery of this	s service?		
ne delivery of this	s service?		
ne delivery of this	service?		
ne delivery of this	service?		
ne delivery of this	service?		
ne delivery of this	service?		
ne delivery of this	service?		
ne delivery of this	service?		
ne delivery of this	service?		
Regional pathology		DGH pathology labs	
CONTRICO			
HCPs?			
HCPs?	CNS		Clinicians
_	CNS		Clinicians
	t local pathology	t local pathology labs to su	pathologists from different sites? Regional pathology DGH

Paper education □	
HCP Portal/websites □	
Educational Meetings: virtual \square in person \square	
Preceptorships □	
Other	
Thank you for taking the time to complete the survey	

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