Guardant360® Nearly Doubled the Number of Patients Found with Targetable Mutations

Aggarwal et al. 2018 JAMA Oncology

**KEY FINDING**

- Incorporating Guardant360 into routine clinical management of advanced NSCLC nearly doubled the number of patients identified with clinically actionable mutations compared to using tissue genotyping alone.

**STUDY OVERVIEW**

Published in *JAMA Oncology*, this large, prospective study enrolled 323 patients with advanced NSCLC and concluded that routine use of Guardant360 can increase the likelihood of finding targetable mutations.

44% of patients who were eligible for a tissue biopsy were unable to get results from tissue

10% Tissue biopsy not possible

34% Tissue QNS

Guardant360 nearly doubled the number of patients found with targetable mutations

Patients

<table>
<thead>
<tr>
<th>Tissue + Guardant360</th>
<th>Tissue</th>
</tr>
</thead>
<tbody>
<tr>
<td>82</td>
<td>47</td>
</tr>
</tbody>
</table>

90% concordance

For patients at diagnosis, a concordance of approximately 90% was reported for Guardant360 and tissue testing.

**WHAT KOLs HAVE SAID**

“These results, combined with the patient satisfaction with the relative ease of providing blood rather than a solid tissue sample, suggest a clinical strategy of pursuing plasma NGS first, then tissue NGS if plasma NGS cannot detect relevant mutations.”

Guardant360 provides genomic data in 7 days and is covered by Medicare for advanced NSCLC

REFERENCES: Clinical Implications of Plasma-Based Genotyping With the Delivery of Personalized Therapy in Metastatic Non-Small Lung Cancer 2018 JAMA Oncol 1, Gyawali, and West 2018 JAMA Oncology editorial