

# 高雄市南屏癌症防治衛教學會-南台血腫論壇

活動時間： 112年6月17日（星期六）下午15:20~19:00

活動地點： 聯上飯店

活動住址： 高雄市左營區裕誠路486號

時間	主題	講師	主持人
15:20~15:30	Opening	癌治療醫院 饒坤銘副院長	
15:30~16:10	Beat the rare mutation--Inhibiting Her-2 driven pathway in lung cancer	楊宗穎 醫師 台中榮總	饒坤銘 醫師 義大癌醫
16:10~16:50	Achilles tendon in gastric cancer	姜乃榕 醫師 北榮醫院	李楊成 醫師 市南醫院
16:50~17:30	Break		
17:30~18:10	Comprehensive effects of Ribociclib on breast cancers	郭兩萱 醫師 奇美醫院	馮盈勳 醫師 奇美醫院
18:10~18:50	Exploring the long tail of advanced colon-rectal cancer	謝孟哲 醫師 義大癌醫院	饒坤銘 醫師 義大癌醫
18:50~19:00	Discussion & Warm up	ALL	

## 課程摘要:

### Beat the rare mutation--Inhibiting Her-2 driven pathway in lung cancer

Lung cancer remains the leading cause of cancer-associated mortality worldwide, but with the emergence of oncogene targeted therapies, treatment options have tremendously improved. Owing to their biological relevance, members of the ERBB receptor family, including the EGF receptor (EGFR), HER2, HER3 and HER4, are among the best studied oncogenic drivers. Activating EGFR mutations are frequently observed in non-small cell lung cancer (NSCLC), and small molecule tyrosine kinase inhibitors (TKIs) are the established first line treatment option for patients whose tumors bear "typical/classical" EGFR mutations (exon 19 deletions, L858R point mutations). Additionally, new TKIs are rapidly evolving with better efficacy to overcome primary and secondary treatment resistance (e.g., that due to T790M or C797S resistance mutations). Some atypical EGFR mutations, such as the most frequent exon 20 insertions, exhibit relative resistance to earlier generation TKIs through steric hindrance. In this subgroup, newer TKIs, such as mobocertinib and the bi-specific antibody amivantamab have recently been approved, whereas less frequent atypical EGFR mutations remain understudied. In contrast to EGFR, HER2 has long remained a challenging target, but better structural understanding has led to the development of newer generations of TKIs. The recent FDA approval of the

antibody-drug conjugate trastuzumab-deruxtecan for pretreated patients with HER2 mutant NSCLC has been an important therapeutic breakthrough. HER3 and HER4 also exert oncogenic potential, and targeted treatment approaches are being developed, particularly for HER3. Overall, strategies to inhibit the oncogenic function of ERBB receptors in NSCLC are currently evolving at an unprecedented pace; therefore, this review summarizes current treatment standards and discusses the outlook for future developments. .

### **Achilles tendon in gastric cancer**

Gastric cancer is a leading cause of cancer-related deaths globally. Human epidermal growth receptor 2 (HER2) overexpression of *HER2* gene amplification is present in 20% of gastric cancers and defines a subset amenable to HER2-directed therapeutics. The seminal ToGA study led to routine use of the monoclonal antibody trastuzumab in conjunction to platinum-fluoropyridimine first-line chemotherapy for HER2-positive gastric cancers as standard-of-care. Although limited progress was made in the decade following ToGA, there is now an abundance of novel therapeutic approaches undergoing investigation in parallel. Additionally, new data from randomised trials have indicated efficacy of the antibody-drug conjugate trastuzumab deruxtecan in chemorefractory patients and increased responses with the addition of first-line immune checkpoint blockade to trastuzumab and chemotherapy. This review will outline the data supporting HER2 targeting in gastric cancers, discuss mechanisms of response and resistance to HER2-directed therapies and summarise the emerging therapies under clinical evaluation that may evolve the way we manage this subset of gastric cancers in the future.

### **Comprehensive effects of Ribociclib on breast cancers**

In a previous analysis of this phase 3 trial, first-line ribociclib plus letrozole resulted in significantly longer progression-free survival than letrozole alone among postmenopausal patients with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative advanced breast cancer. Whether overall survival would also be longer with ribociclib was not known.

### **Exploring the long tail of advanced colon-rectal cancer**

Locally advanced and locally recurrent colon cancers pose a surgical challenge with tumors extending into surrounding structures and organs. Anticipation of the need for an extended surgical resection, often with multivisceral en bloc organ removal, is critical for surgical planning. For both primary and recurrent tumors, postsurgical long-term survival is achievable but only after complete resection. The role of neoadjuvant and adjuvant therapy continues to be redefined in this era of biologic chemotherapeutics, and multimodality therapy holds promise in aiding resection and improving postsalvage survival.

## 講師簡介

### 楊宗穎

臺中榮民總醫院內科部胸腔內科 科主任  
臺中榮民總醫院內科部胸腔內科 主治醫師

### 姜乃榕

國立成功大學 臨床醫學研究所 博士  
國防醫學院 醫學系 醫學士  
2022- 迄今 臺北榮民總醫院 腫瘤醫學部 腫瘤內科 主治醫師  
2022- 迄今 國家衛生研究院 癌症研究所 兼任助研究員級主治醫師  
2021- 迄今 教育部 部定助理教授

### 郭雨萱

奇美醫院血液腫瘤科主治醫師  
慈濟醫學大學醫學系醫學士  
臺大醫院內科部住院醫師  
臺大醫院腫瘤部總醫師  
臺大醫院腫瘤部兼任主治醫師  
臺大醫院雲林分院主治醫師  
義大醫院主治醫師  
日本國立癌症中心進修  
教育部部定助理教授

### 謝孟哲

義大癌治療醫院血液腫瘤科 科主任  
高雄長庚紀念醫院血液腫瘤科主治醫師  
高雄市立聯合醫院血液腫瘤科主治醫師  
義守大學專任助理教授  
教育部部定助理教授