Rozlytrek, Roche’s first tumour-agnostic therapy, approved in Europe for people with NTRK fusion-positive solid tumours and for people with ROS1-positive advanced non-small cell lung cancer

- Rozlytrek has shown durable responses across multiple tumour types, including cancer that has spread to the brain
- This approval shows the value of combining genomic profiling with precision medicine to offer patients with rare and hard-to-treat cancers a personalised treatment option

Basel, 03 August 2020 - Roche (SIX: RO, ROG; OTCQX: RHHBY) today announced that the European Commission has granted conditional marketing authorisation for Rozlytrek® (entrectinib) for the treatment of adult and paediatric patients 12 years of age and older with solid tumours expressing a neurotrophic tyrosine receptor kinase (NTRK) gene fusion, who have a disease that is locally advanced, metastatic or where surgical resection is likely to result in severe morbidity, and who have not received a prior NTRK inhibitor, who have no satisfactory treatment options. The European Commission has also approved Rozlytrek for the treatment of adults with ROS1-positive, advanced non-small cell lung cancer (NSCLC) not previously treated with ROS1 inhibitors.¹

“We are excited to announce the approval of Rozlytrek in Europe for two indications, bringing patients with NTRK and ROS1 gene fusions a new effective treatment even when their cancer has spread to the brain,” said Levi Garraway, M.D., Ph.D., Roche’s Chief Medical Officer and Head of Global Product Development. “This advance represents another important step forward in cancer care by allowing us to treat certain genetic drivers of cancer irrespective of the location of the tumour within the body. Roche is deeply committed to driving personalised healthcare and addressing the high unmet need in patients around the world with rare cancers.”

The approval is based on results from the integrated analysis of the pivotal phase II STARTRK-2, phase I STARTRK-1 and phase I ALKA-372-001 trials, and data from the phase I/II STARTRK-NG study. These studies demonstrate that Rozlytrek has durable responses across several NTRK gene fusion-positive solid tumours, including sarcoma, non-small cell lung, salivary MASC, secretory and non-secretory breast, thyroid, colorectal, neuroendocrine, pancreatic, ovarian, endometrial carcinoma, cholangiocarcinoma, gastrointestinal cancers and neuroblastoma, as well as ROS1-positive NSCLC.¹ Results showed:

- Rozlytrek shrank tumours in more than half of people with NTRK fusion-positive, locally advanced or metastatic solid tumours (overall response rate [ORR]=63.5%; N=74), and objective responses were observed across 14 tumour types (median duration of response [DoR]=12.9 months [9.3 months – not reached], N=21 out of 47 patients defined by ORR).¹
- In ROS1-positive, advanced NSCLC, Rozlytrek shrank tumours in 73.4% of people with the disease (ORR; N=94 with a minimum of 12 months follow up), with a median DoR of 16.5 months (14.6 – 28.6 months). In a group of 161 patients with a minimum of 6 months follow up, including 29% of patients with central nervous system (CNS) metastases at baseline, ORR was observed to be 67.1%.¹
Objective responses to Rozlytrek were seen in people with CNS metastases at baseline, with an intracranial ORR of 62.5% and 77.8% in both NTRK and ROS1 populations, respectively.\(^1\)

In paediatric patients, Rozlytrek shrank tumours (ORR) in all children and adolescents who had NTRK gene fusions (N=5), with two achieving a complete response (CR). Two patients with primary high-grade tumours in the CNS had objective responses, including one patient with a CR.\(^1\)

Rozlytrek was well tolerated.

The most common adverse reactions (≥20 percent) with Rozlytrek were fatigue, constipation, altered sense of taste (dysgeusia), swelling (oedema), dizziness, diarrhoea, nausea, nervous system disorders (dysaesthesia), shortness of breath (dyspnoea), anaemia, increased weight, increased blood creatinine, pain, cognitive disorders, vomiting, cough, and fever (pyrexia).\(^1\)

Rozlytrek has been granted Priority Medicines (PRIME) designation by the EMA for the treatment of NTRK fusion-positive, locally advanced or metastatic solid tumours in adult and paediatric patients who have either progressed following prior therapies or who have no acceptable standard therapies.\(^1\) NTRK gene fusions have been identified in a range of solid tumour types, and are present in up to 90% of some rare cancer types and less than 1% of other more common tumours, including lung and colorectal.\(^2\) ROS1 gene fusions account for 1-2% of NSCLC, the most common type of lung cancer that accounts for up to 85% of all diagnoses.\(^3,4\)

Biomarker testing for these fusions is the most effective way to identify people who are most eligible for treatment with Rozlytrek. Roche is leveraging its expertise in developing personalised medicines and advanced diagnostics, in conjunction with Foundation Medicine, to develop a companion diagnostic that will help identify people with NTRK and ROS1 gene fusions.

**About the integrated analysis**

The approval in Europe is based on an integrated analysis including data from 74 people with locally advanced or metastatic NTRK fusion-positive solid tumours (14 tumour types) and 161 people with ROS1-positive NSCLC from the phase II STARTRK-2, phase I STARTRK-1 and phase I ALKA-372-001 trials.\(^1\) It is also based on data from the phase I/II STARTRK-NG study in paediatric patients. The studies enrolled people across 15 countries and more than 150 clinical trial sites. Safety was assessed from an integrated analysis of 504 people across these four trials.\(^1\)

**About NTRK fusion-positive cancer**

NTRK fusion-positive cancer occurs when the NTRK1/2/3 genes fuse with other genes, resulting in altered TRK proteins (TRKA/TRKB/TRKC) that can activate signalling pathways involved in the proliferation of certain types of cancer.\(^5\) NTRK gene fusions are present in tumours irrespective of site of origin. These fusions have been identified in a broad range of solid tumour types, including sarcoma, non-small cell lung, salivary MASC, secretory and non-secretory breast, thyroid, colorectal, neuroendocrine, pancreatic, ovarian, endometrial carcinoma, cholangiocarcinoma, gastrointestinal cancers and neuroblastoma.\(^1\)

**About ROS1-positive NSCLC**

ROS1 is a tyrosine kinase, which plays a role in controlling how cells grow and proliferate. When a ROS1 gene fusion occurs, cancer cells grow and proliferate in an uncontrolled manner. Blocking this abnormal signalling can cause tumour cells to shrink or die.\(^3\)
ROS1 gene fusions account for 1-2% of NSCLC.³ Lung cancer is the leading cause of cancer-related death across the world.⁶ Each year, more than one and a half million people die as a result of the disease globally, equating to more than 4,000 deaths every day.⁶ NSCLC is the most common type of lung cancer and accounts for up to 85% of all lung cancer diagnoses.⁴ While the ROS1 gene fusion can be found in any patient with NSCLC, young never-smokers with NSCLC have the highest incidence of ROS1 gene fusions.³

About Rozlytrek
Rozlytrek® (entrectinib) is a tumour-agnostic once-daily oral medicine for the treatment of locally advanced or metastatic solid tumours that harbour NTRK1/2/3 or ROS1 gene fusions. It is a selective tyrosine kinase inhibitor designed to inhibit the kinase activity of the TRKA/B/C and ROS1 proteins, whose activating fusions drive proliferation in certain types of cancer.⁷,⁸ Rozlytrek can block NTRK and ROS1 kinase activity and may result in the death of cancer cells with NTRK or ROS1 gene fusions.⁷,⁸

Rozlytrek was granted accelerated approval in August 2019 by the US Food and Drug Administration (FDA), following receipt of Breakthrough Therapy designation, for the treatment of adult and paediatric patients 12 years of age and older with solid tumours that have a NTRK gene fusion without a known acquired resistance mutation, are metastatic or where surgical resection is likely to result in severe morbidity, and have progressed following treatment or have no satisfactory alternative therapy, and was approved for the treatment of adults with ROS1-positive, metastatic NSCLC. In June 2019, Japan’s Ministry of Health, Labour and Welfare (MHLW) also approved Rozlytrek for the treatment of adult and paediatric patients with NTRK fusion-positive, advanced recurrent solid tumours, and later approved Rozlytrek in ROS1-positive NSCLC in February 2020. Rozlytrek has also received approvals by health authorities in Australia, Canada, Hong Kong, Israel, New Zealand, South Korea and Taiwan.

About Roche in lung cancer
Lung cancer is a major area of focus and investment for Roche, and we are committed to developing new approaches, medicines and tests that can help people with this deadly disease. Our goal is to provide an effective treatment option for every person diagnosed with lung cancer. We currently have five approved medicines to treat certain kinds of lung cancer and more than ten medicines being developed to target the most common genetic drivers of lung cancer or to boost the immune system to combat the disease.

About Roche
Roche is a global pioneer in pharmaceuticals and diagnostics focused on advancing science to improve people’s lives. The combined strengths of pharmaceuticals and diagnostics under one roof have made Roche the leader in personalised healthcare – a strategy that aims to fit the right treatment to each patient in the best way possible.

Roche is the world’s largest biotech company, with truly differentiated medicines in oncology, immunology, infectious diseases, ophthalmology and diseases of the central nervous system. Roche is also the world leader in in vitro diagnostics and tissue-based cancer diagnostics, and a frontrunner in diabetes management.

Founded in 1896, Roche continues to search for better ways to prevent, diagnose and treat diseases and make a sustainable contribution to society. The company also aims to improve patient access to medical
innovations by working with all relevant stakeholders. More than thirty medicines developed by Roche are
included in the World Health Organization Model Lists of Essential Medicines, among them life-saving
antibiotics, antimalarials and cancer medicines. Moreover, for the eleventh consecutive year, Roche has been
recognised as one of the most sustainable companies in the Pharmaceuticals Industry by the Dow Jones
Sustainability Indices (DJSI).

The Roche Group, headquartered in Basel, Switzerland, is active in over 100 countries and in 2019 employed
about 98,000 people worldwide. In 2019, Roche invested CHF 11.7 billion in R&D and posted sales of CHF
61.5 billion. Genentech, in the United States, is a wholly owned member of the Roche Group. Roche is the
majority shareholder in Chugai Pharmaceutical, Japan. For more information, please visit www.roche.com.

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Roche Group Media Relations
Phone: +41 61 688 8888 / e-mail: media.relations@roche.com

Dr. Nicolas Dunant  
Phone: +41 61 687 05 17  
Patrick Barth  
Phone: +41 61 688 44 86

Daniel Grotzky  
Phone: +41 61 688 31 10  
Karsten Kleine  
Phone: +41 61 682 28 31

Nina Mählitz  
Phone: +41 79 327 54 74  
Nathalie Meetz  
Phone: +41 61 687 43 05

Barbara von Schnurbein  
Phone: +41 61 687 89 67

Roche Investor Relations
Dr. Karl Mahler  
Phone: +41 61 68-78503  
e-mail: karl.mahler@roche.com  
Jon Kaspar Bayard  
Phone: +41 61 68-83894  
e-mail: jon_kaspar.bayard@roche.com

Dr. Sabine Borngräber  
Phone: +41 61 68-88027  
e-mail: sabine.borngraeb@roche.com  
Dr. Bruno Eschli  
Phone: +41 61 68-75284  
e-mail: bruno.eschli@roche.com

Dr. Birgit Masjost  
Phone: +41 61 68-84814  
e-mail: birgit.masjost@roche.com  
Dr. Gerard Tobin  
Phone: +41 61 68-72942  
e-mail: gerard.tobin@roche.com

Investor Relations North America
Loren Kalm  
Phone: +1 650 225 3217  
e-mail: kalm.loren@gene.com  
Dr. Lisa Tuomi  
Phone: +1 650 467 8737  
e-mail: tuomi.lisa@gene.com