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# TOP 5 HIGHLIGHTS FROM ASCO 2026

## WU-KONG28 • NCT05668988 • Phase 3

**Sunvozertinib Bests Chemotherapy as Frontline Therapy in *EGFR* exon 20+ NSCLC**

In the phase 3 WU-KONG28 trial, sunvozertinib monotherapy delivered a 35% reduction in the risk of disease progression or death vs platinum-doublet chemotherapy — the first frontline phase 3 win in this historically difficult-to-treat exon 20 insertion population. Results were presented as a late-breaking abstract and simultaneously published in *New England Journal of Medicine*..

John V. Heymach, MD, PhD · Sunvozertinib Shows Superior Efficacy vs Chemo in Frontline Advanced *EGFR* Exon 20+ NSCLC

## CHRYSALIS-2 • NCT04077463 • Phase 1/1b

**Ami-laz Delivers 41-Month Median OS in Atypical EGFR-Mutated NSCLC**

Updated data from CHRYSALIS-2 cohort C show durable OS with first-line amivantamab plus lazertinib in 49 patients with atypical *EGFR* mutations — a population historically underserved by *EGFR*-targeted therapy. Twenty percent of patients remained on frontline treatment at data cutoff, including 7 who had received amivantamab for more than 3 years.

Caroline Seymour · Amivantamab Plus Lazertinib Extends Second-Line PFS in *EGFR*-Mutant Advanced NSCLC

## ESAONA • NCT05948813 • Phase 2

**Asandeutertinib Outperforms Osimertinib Intracranially in EGFR+ NSCLC with Brain Metastases**

Interim results from the phase 2 ESAONA trial showed asandeutertinib, a deuterated third-generation *EGFR* TKI, significantly improved intracranial ORR and intracranial PFS vs osimertinib in 224 treatment-naive patients with *EGFR*-sensitizing mutations and stable brain metastases. Median iPFS was not reached with asandeutertinib vs 17.51 months with osimertinib.

Courtney Flaherty · VRN110755 Shows Initial Antitumor Activity Across Dose Levels in *EGFR*-Mutant NSCLC

## Silevertinib • BDTX-1535 • Phase 2

**Silevertinib Shows Strong Systemic and CNS Activity Across *EGFR* Non-Classical Mutations**

The fourth-generation, brain-penetrant *EGFR* TKI silevertinib demonstrated meaningful tumor and intracranial responses across 25 unique non-classical *EGFR* mutations, including compound and PACC mutations, in 43 frontline patients. Median follow-up was 11.2 months; 53% remained on therapy at time of analysis, with the longest duration reaching 23.5 months.

Ashling Wahner · SC3613 Shows Potent Antitumor Activity and Potential for Tolerable Safety in *EGFR*-Mutant NSCLC Cells

## FLAME • NCT04769388 • Phase 2

**ctDNA-guided chemo escalation significantly improves PFS over osimertinib alone**

The phase 2 FLAME trial enrolled patients with *EGFR*-mutant NSCLC who had persistent plasma ctDNA at 3 weeks after osimertinib initiation — a marker of molecular nonresponse — and randomized them to continue osimertinib alone or escalate to combination therapy. The ctDNA-guided combination arm met its primary PFS endpoint and showed a particularly pronounced benefit in patients with brain metastases.

Ashling Wahner · FLAME Study Shows Osimertinib Plus Chemotherapy Improves PFS in ctDNA-Persistent EGFR-Mutant NSCLC