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Summary

# EFFECTS OF GUT MICROBIOTA ON ANTITUMOR ACTIVITY IN CHEMOREFRACTORY METASTATIC COLORECTAL CANCER AND NON-SMALL CELL LUNG CANCER PATIENTS TREATED WITH CETUXIMAB PLUS AVELUMAB

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Colorectal

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**Exploratory analysis of the CAVE-mCRC trial identified two butyrate-producing gut bacteria, Agathobacter M104/1 and Blautia SR1/5, as potential biomarkers associated with improved progression-free survival in chemo-refractory RAS wild-type metastatic colorectal cancer patients treated with cetuximab plus avelumab.**

## KEY POINTS

- In 14 patients from the CAVE-mCRC trial, higher baseline levels of Agathobacter M104/1 were associated with median PFS of 13.5 months versus 4.6 months in patients with lower levels (p=0.006).
- Higher baseline levels of Blautia SR1/5 were associated with median PFS of 5.9 months versus 3.6 months (p=0.021).
- Binomial logistic regression showed statistically significant associations between PFS and the presence of Agathobacter M104/1 (OR: 1.98, p=0.041) and Blautia SR1/5 (OR: 2.52, p<0.0001), as well as C-reactive protein levels (OR: 1.84, p=0.010).
- The association between these bacteria and PFS was also observed in a validation cohort from the CAVE-Lung trial involving non-small cell lung cancer patients.
- This is the first study to identify these two butyrate-producing bacteria as potential biomarkers for response to cetuximab plus avelumab in chemorefractory colorectal and lung cancer patients.

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