

Exploring Patient Experiences with Zongertinib: Qualitative Interviews of US Patients in the Beamion LUNG-1 Trial

Chul Kim^{1*}, Christina S. Baik², Joshua K. Sabari³, Georges Azzi⁴, Adam Rock⁵, Yanis Bumber⁶, Jonathan Riess⁷, Aakash Desai⁶, Constance Mubekapi-Musadaidzwa⁸, Anna Rydén⁸, Marjolein van den Bos⁹, Wei-Han Cheng¹⁰, Heiko Zettl¹¹

¹Lombardi Comprehensive Cancer Center, Georgetown University, Washington, DC, USA; ²University of Washington and Fred Hutchinson Cancer Center, Seattle, WA, USA; ³Perlmutter Cancer Center, New York University Langone Health, New York, NY, USA;

⁴Michael & Dianne Bienes Comprehensive Cancer Center, Holy Cross Health, Fort Lauderdale, FL, USA; ⁵City of Hope Comprehensive Cancer Center, Duarte, CA, USA; ⁶OhioHealth – Marion Medical Oncology/Hematology, Marion, OH, USA; ⁷University of California Davis Comprehensive Cancer Center, Sacramento, CA, USA; ⁸CLINIGMA®, Copenhagen, Denmark; ⁹Boehringer Ingelheim MIDI Center, Amsterdam, The Netherlands; ¹⁰Boehringer Ingelheim Pharmaceuticals, Inc., Ridgefield, CT, USA; ¹¹Boehringer Ingelheim International GmbH, Ingelheim am Rhein, Germany

Introduction

- Zongertinib is an irreversible tyrosine kinase inhibitor that selectively inhibits HER2 while sparing wild-type EGFR, thereby minimizing associated toxicities
- The Beamion LUNG-1 (NCT04886804) Phase Ib trial assessed zongertinib monotherapy in patients with advanced or metastatic *HER2*-mutant NSCLC
 - Efficacy and safety outcomes in previously treated¹ and treatment-naïve² patients with *HER2*-mutant NSCLC have been reported previously
- Here, we report the outcomes of qualitative interviews with patients enrolled to Beamion LUNG-1 that aimed to generate patient narratives of their experiences living with NSCLC and with zongertinib monotherapy
- This aligns with the U.S. FDA's Patient-Focused Drug Development initiatives,³ which detail the importance of capturing patient feedback early in drug development by interviews and/or PRO instruments, to ensure treatments address real-world needs, to complement risk-benefit assessments, and to help define meaningful endpoints

EGFR, epidermal growth factor receptor; FDA, Food and Drug Administration; HER2, human epidermal growth factor receptor; NSCLC, non-small cell lung cancer; PRO, patient-reported outcomes

Objectives

- The interviews aimed to capture participants' experiences of NSCLC and zongertinib treatment, focusing on symptoms and tolerability
- Additional objectives were to explore comparisons to previous treatments, including chemotherapy and radiation, and treatment expectations

Methods

- Twelve US patients with advanced *HER2*-mutant NSCLC from the Beamion LUNG-1 Phase Ib trial participated in the interviews
- Between July 2024 and July 2025, semi-structured telephone interviews, including both open- and closed-ended questions, were conducted by a trained interviewer 3–5 months into treatment. Informed consent was documented by site staff prior to contact, with verbal confirmation obtained at the start of each interview
- Thematic and descriptive analyses were conducted using a two-step cyclical coding process, applying an inductive approach to the data

Participants

- Key demographic characteristics of the study participants were consistent with the main trial populations;^{1,2} 9 participants had received at least 1 prior systemic treatment for *HER2*-mutant NSCLC

	Study participants (N=12)
Median age, years	66.5
Female, n (%)	8 (67)
Prior therapies, n (%)	
Treatment-naïve	3 (25)
Had received ≥1 prior therapy	9 (75)

References

1. Heymach JV, et al. N Engl J Med 2025;392:2321–33; 2. Heymach JV, et al. N Engl J Med 2026;394:1675–84; 3. U.S. FDA. <https://www.fda.gov/drugs/development-approval-process-drugs/fda-patient-focused-drug-development-guidance-series-enhancing-incorporation-patients-voice-medical>

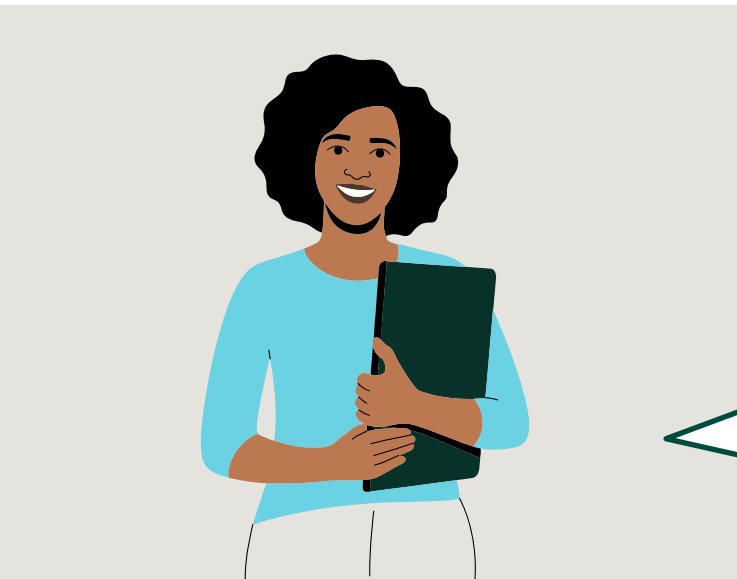
Key Findings and Conclusions

- **Meaningful improvement in cough:** cough, the most frequently reported NSCLC-related symptom before treatment, was consistently described as 'meaningfully improved' with oral zongertinib monotherapy
- **Lower symptomatic treatment burden:** patients with advanced *HER2*-mutant NSCLC reported fewer and less disruptive treatment-related symptoms with zongertinib than with prior systemic treatments
- **Patient preference for zongertinib:** patients preferred zongertinib over prior treatments, citing minimal treatment-related symptoms, the ease of once-daily oral administration, and a meaningful overall quality of life benefit

Key Insights From Patient Interviews

Before Beamion LUNG-1, living with NSCLC was characterized by persistent cough and burdensome treatments

- Most participants (8; 67%) reported experiencing cough prior to the study and described it as uncontrollable, persistent, and disruptive to their daily lives, with one participant characterizing their experience as having "no life other than illness"
- All participants reported that NSCLC had affected their lives, including daily activities, hobbies and social roles



"going from working out and staying healthy, and all of a sudden to have that ripped from you where you can't breathe or you can't take 10 good steps without sucking air, it's a life-changing event"

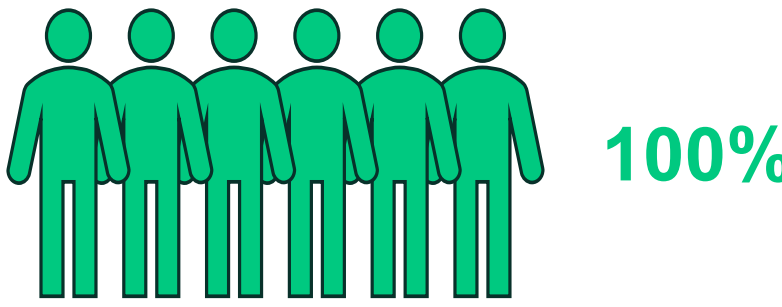
- Prior treatments were considered lengthy and difficult, spanning multiple lines of chemotherapy and radiation, undermining independence

"I would get my [previous treatment], I'd have 2 days because I would get steroids the day before, I would get steroids with my infusion, and I would get a steroid the day after. So really, for the first couple of days, I felt great. But then I'd get these stomach cramps, and they would last in the beginning 4 days, 5 days, 6 days. And then they would stop and I would get about 2 weeks of feeling normal. That was how [previous treatment] worked for over a year and a half."



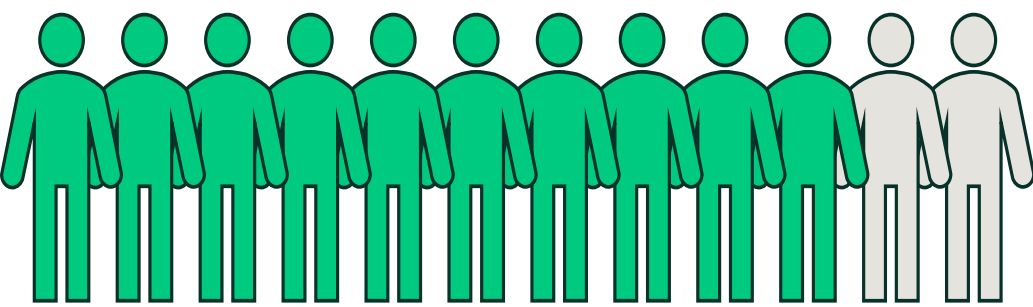
On-treatment experience with zongertinib: meaningful improvements in cough and tolerable side effects

- Of the 6 participants who had ongoing cough symptoms at the start of Beamion LUNG-1,[†] all (100%) reported improvements in their cough symptoms, describing them as mild, less frequent, or a rare occurrence
- Of the 12 participants, 3 (25%) reported no symptomatic side effects with zongertinib
- Nine (75%) participants reported symptomatic side effects consistent with the known safety profile of zongertinib;^{1,2} none necessitated treatment discontinuation



[†]Two reported that their symptoms had resolved prior to the Beamion LUNG-1 trial following radiation and chemotherapy

Zongertinib met or exceeded treatment expectations and was preferred over prior systemic therapies

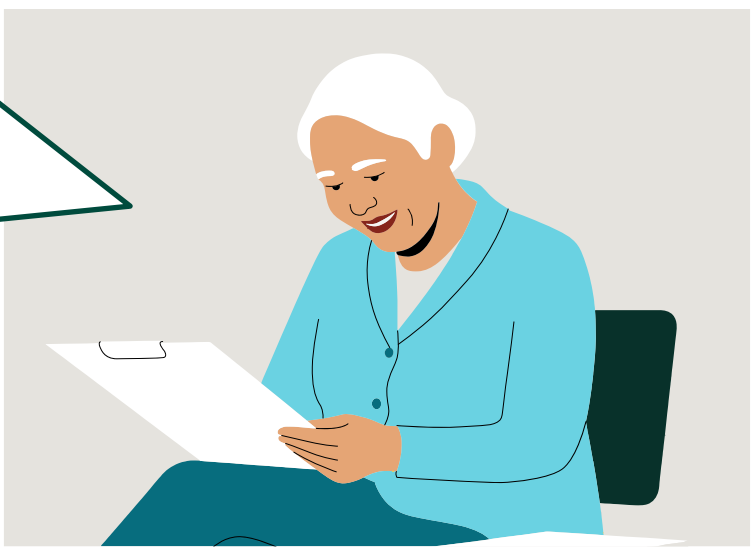


83%

- Ten of the 12 participants (83%) reported that zongertinib met or exceeded their treatment expectations[‡]
- Participants reported tumor reduction, stabilization, and fewer side effects with zongertinib, all leading to meaningful quality of life improvements

- Oral administration was universally well tolerated and strongly preferred over administration by infusion
- Among participants who had received prior systemic treatments, there was a clear preference for zongertinib over prior chemotherapy and other treatments
 - Participants cited the minimal treatment-related symptoms, ease of administration, and overall quality of life benefit

"I have no comparison there. I've sat and watched IVs go in my arm. This is much easier on the mind and on the body than to sit there and watch chemotherapy being applied to your body. This is much better, it's no comparison. I can take my pills and go about my day, I literally forget about it. The nausea reminds you, but it is definitely 1,000% better than receiving chemotherapy traditionally in the vein."



[‡]One participant reported that their treatment expectations were partially met, and 1 could not provide a response as they were waiting for results IV, intravenous

Plain Language Summary

- It is important to get patient feedback early in the drug development process to ensure treatments address real-world unmet patient needs
- Twelve US patients enrolled to the Beamion LUNG-1 trial, which assessed zongertinib in patients with advanced *HER2*-mutant NSCLC, participated in interviews to capture their experience with zongertinib
- Participants reported that cough (one of the main symptoms associated with the disease) improved with zongertinib; participants also preferred zongertinib over their previous treatments



<https://tinyurl.com/3ucsmtm2>

Scan this QR code or visit the URL to access the poster presentation

Materials obtained through Quick Response (QR) Code are for personal use only and may not be reproduced without permission from WCLC or the authors of this presentation