

**1848MO****Phase II study of firmonertinib in patients with previously treated advanced/metastatic non-small cell lung cancer (mNSCLC) with EGFR exon 20 insertion (ex20ins) mutations**

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**Background**

Firmonertinib (firmo, also known as furmonertinib) is an oral third-generation EGFR inhibitor with broad activity and selectivity across EGFR mutations. Firmo has FDA breakthrough therapy designation and is being tested in a global randomized phase (Ph) III study in first-line (1L) EGFR ex20ins mutant NSCLC. Here, we report topline results from a Ph II trial conducted in previously treated NSCLC patients (pts) with EGFR ex20ins mutations (FURMO-003; NCT05466149).

**Methods**

FURMO-003 is a Ph II, multicenter, open-label study of firmo 240 mg QD. Eligible pts had advanced/mNSCLC with EGFR ex20ins mutations and received prior platinum-based therapy. Pts with clinically stable central nervous system (CNS) metastases were eligible. Primary endpoint was confirmed overall response rate (cORR) by blinded independent central review (BICR). Secondary endpoints included duration of response (DOR), progression-free survival (PFS), overall survival (OS) and safety.

**Results**

As of March 31, 2025, 71 pts were enrolled and treated (median age, 57.0 years; 50.7% female; 22.5% with CNS metastases; 76.1% ECOG PS 1; 1 median [1–3] lines of prior systemic therapy). Efficacy analysis included 70 pts, the cORR by BICR was 44.3%. The cORR was 47.0% if excluding 4 pts without measurable disease at baseline by BICR. The DCR was 90.0%. Median DOR was 8.3 months (mos). Median PFS and OS were 8.3 mos and 21.2 mos (32.9% death events), respectively. Treatment-related adverse events (TRAEs) occurring in ≥30% of pts included diarrhea (64.8%), anaemia (39.4%), blood creatinine increased (33.8%), and aspartate aminotransferase increased (31.0%). Grade 3–4 TRAEs were reported in 18 (25.4%) pts and 4 (5.6%) pts discontinued due to TRAEs.

**Conclusions**

Firmo demonstrates promising clinical activity and an acceptable safety profile in previously treated advanced/mNSCLC pts with EGFR ex20ins mutations in China. These results support firmo as a valuable treatment option for this pts population. Firmo is also under evaluation in a global, randomized Ph III trial for 1L NSCLC pts w/ex20ins (FURVENT; NCT05607550) and has completed enrollment.

**Clinical trial identification**

NCT05466149, NCT05607550.

**Legal entity responsible for the study**

The authors.

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## **Disclosure**

Y. Jiang, Q. Zhao: Financial Interests, Personal, Full or part-time Employment: Shanghai Allist Pharmaceuticals Co., Ltd. All other authors have declared no conflicts of interest.

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