

118 Gene Panel

SNVs & InDels (117)							CNVs (27)		Fusions (10)
ABL1	AKT1	AKT2	ALK	APC	AR	ARAF	AKT1	FGFR2	ALK
ARID1A	ATM	BARD1	BRAF	BRCA1	BRCA2	BRIP1	AR	FGFR3	BCR
BTK	CBL	CCND1	CCND2	CCNE1	CD274	CDH1	BRAF	KDR	BRAF
CDK12	CDK4	CDK6	CDKN2A	CEBPA	CHEK1	CHEK2	BRCA1	KIT	EGFR
CSF1R	CTNNB1	DDR2	DPYD	EGFR	ERBB2	ERBB3	CCND1	KRAS	FGFR2
ESR1	FANCL	FBXW7	FGFR1	FGFR2	FGFR3	FLT3	CCND2	MAPK1	FGFR3
GATA3	GNA11	GNAQ	GNAS	HRAS	IDH1	IDH2	CCNE1	MDM2	NTKR1
IGF1R	JAK2	JAK3	KDM6A	KDR	KEAP1	KIT	CD274	MET	NTRK2
KRAS	MAP2K1	MAP2K2	MAPK1	MAPK3	MDM2	MET	CDK12	MYC	RET
MLH1	MPL	MSH2	MSH6	MTOR	MYC	MYCN	CDK4	MYCN	ROS1
NF1	NF2	NFE2L2	NOTCH1	NPM1	NRAS	NTRK1	CDK6	PDGFRA	
NTRK2	NTRK3	PALB2	PDCDILG2	PDGFRA	PDGFRB	PIK3CA	EGFR	PIK3CA	
PIK3R1	PMS2	PPP2R1A	PPP2R2A	PTEN	PTPN11	RAD51B	ERBB2	RAF1	
RAD51C	RAD51D	RAD54L	RAF1	RB1	RET	RHEB	FGFR1		
RHOA	RIT1	RNF43	ROS1	RUNX1	SETD2	SMAD4			
SMO	STAG2	STK11	TCF7L2	TERT	TOP2A	TP53			
TSC1	TSC2	U2AF1	VHL	UGT1A1					

Sample Requirement

PE/Ascites	Total 40 c.c. (4 STRECK Tubes)
Blood/CSF	Total 20 c.c. (2 STRECK Tubes) 註1 CSF最低至少10 c.c.
Tissue	HE染色片*1 (5 um) & 10片空白片 (10um，tumor content>20%) 註1 空白片數須依檢體大小而定 註2 骨頭檢體需EDTA脫鈣

SNV點突變 (Single nucleotide variation)	DNA序列產生單核苷酸變異 (A,T,C,G) (ex. EGFR L858R, KRAS G12C, BRAF V600E...)
InDel短片段插入缺失 (insertion / deletion)	DNA序列發生短片段數十個核苷酸的插入或缺失 (ex. EGFR ex19 del, EGFR ex20 ins...)
CNV拷貝數變化 (Copy number variation)	基因組的某個區域發生複製或缺失的情況 (ex. ERBB2/HER amp, MET amp...)
Fusion基因融合	染色體發生結構重組導致不同的兩個基因序列相連 (ex. EML4–ALK, CD74–ROS1, FGFR3–TACC3...)
MSI微衛星不穩定 (microsatellite instability)	微衛星 (microsatellites) 是遍佈於人類基因組中的短串聯重複序列。與正常細胞相比,腫瘤細胞的微衛星由於複製錯誤引起的簡單重複序列的增加或丟失而導致微衛星長度的改變。
TMB腫瘤突變負荷量 (Tumor Mutation Burden)	在腫瘤基因外顯子編碼區的每一兆鹼基中，發生置換和插入/缺失突變（非同義突變）的總數，可評估免疫治療反應。

5種檢體別（組織、胸水、腹水、腦脊髓液，血液）

10個工作天完成產出報告（實驗室收到合格檢體）

50000x液態切片超深度定序檢測正確找出極微量癌症基因突變

Analytical Performance

AlphaLiquid-100 癌液準®	Reportable Range	AF / CN	Sensitivity
SNVs	≥ 0.03%	≥ 0.1%	95%
InDels	≥ 0.01%	≥ 0.1%	95%
CNVs	≥ 2.2 copies	≥ 2.4 copies	99%
Fusions	≥ 0.05%	≥ 0.2%	95%

AlphaSolid-100 癌克準™	Reportable Range	AF / CN	Sensitivity
SNVs	≥ 1%	≥ 1%	100%
InDels	≥ 1%	≥ 1%	100%
CNVs	≥ 2.6 copies	≥ 2.6 copies	100%
Fusions	≥ 1%	≥ 1%	100%



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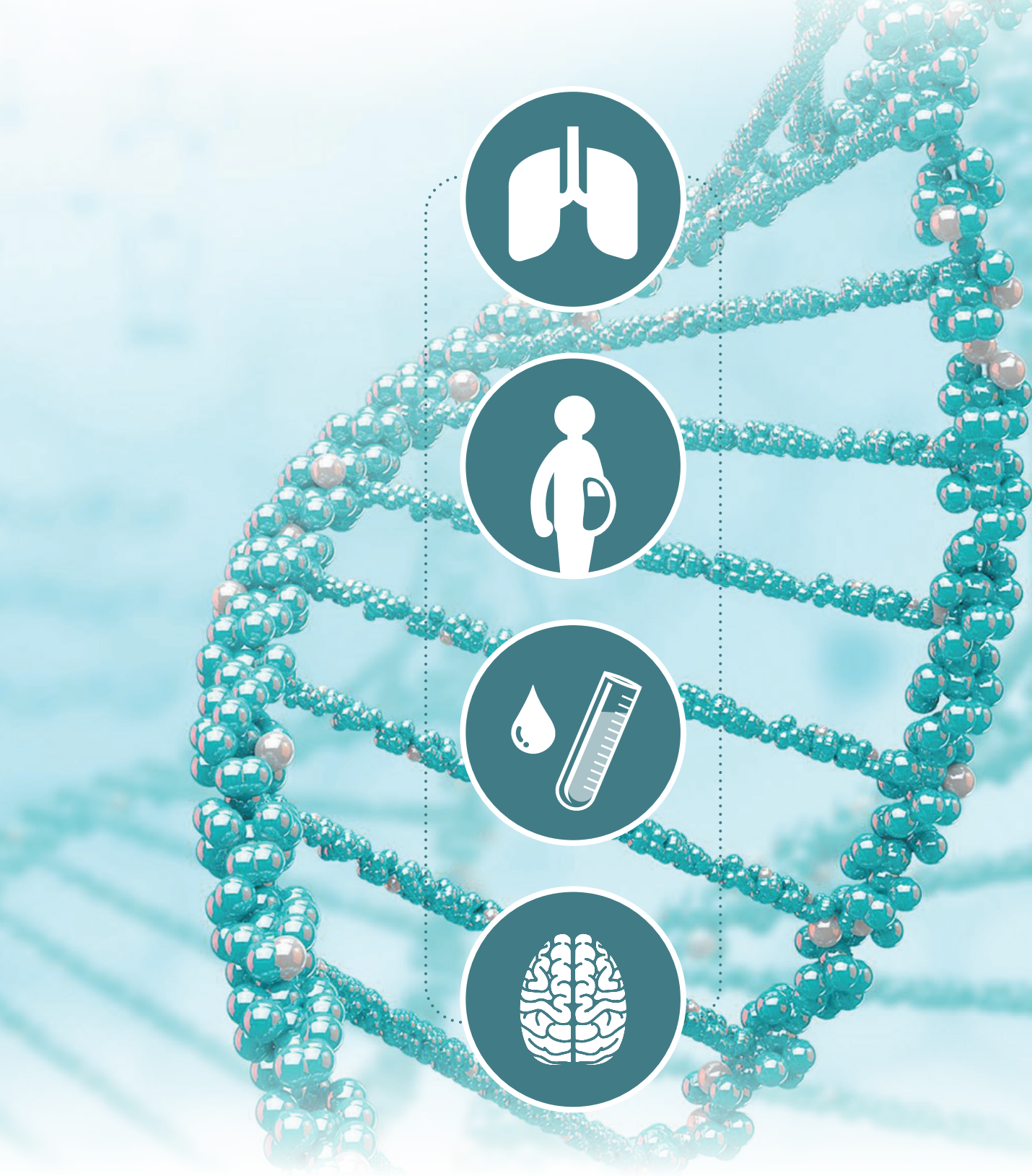


了解更多



查詢報告

癌液準® 癌克準™
Total Solution for NGS



癌液準 / 癌克準使用Hybrid-Capture based NGS，根據病人狀況挑選合適檢體，針對癌症相關118基因進行分析。提供早中晚期實體瘤患者的個人化治療策略指引資訊，包括腫瘤基因分型、治療選擇和治療反應監控。

Q: 當病人組織檢體不足時該如何送檢？

A: 依病人狀況不同選擇合適檢體進行NGS檢測

The diagram illustrates a human silhouette with internal organs. A green dashed line connects the brain to the 'CNS-only progression' bar. A blue dashed line connects the heart to the 'Systemic progression' bar. Below the bars, a list of sample types is shown with arrows pointing to the corresponding body parts: 'Tissue' (green arrow to brain), 'PE supernatant' (blue arrow to heart), 'CSF supernatant' (green arrow to brain), and 'Blood' (blue arrow to heart).

- Tissue
- PE supernatant
- CSF supernatant
- Blood

抗藥 / 追蹤

1st Treatment

2nd Treatment

3rd Treatment

X line Treatment

癌克準™	V	△（如果組織充足）	△（如果組織充足）	X
癌液準®	V	V	V	V

Figure 2: Allele frequency and number of variants in CSF cfDNA and cell pellets.

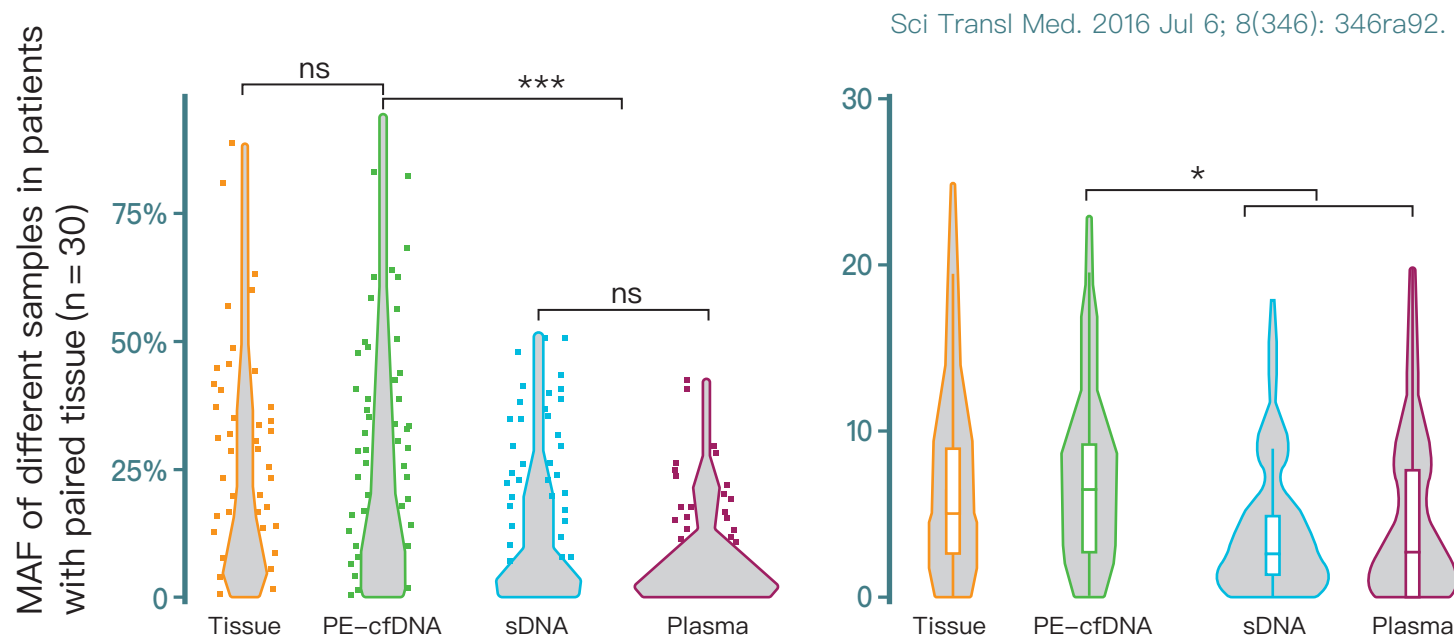
Left Chart: Mean allele frequency (%)

Sample Type	Mean allele frequency (%)	Significance
Cell pellet	~14	***
CSF cfDNA	~42	

Right Chart: # Number of Variants

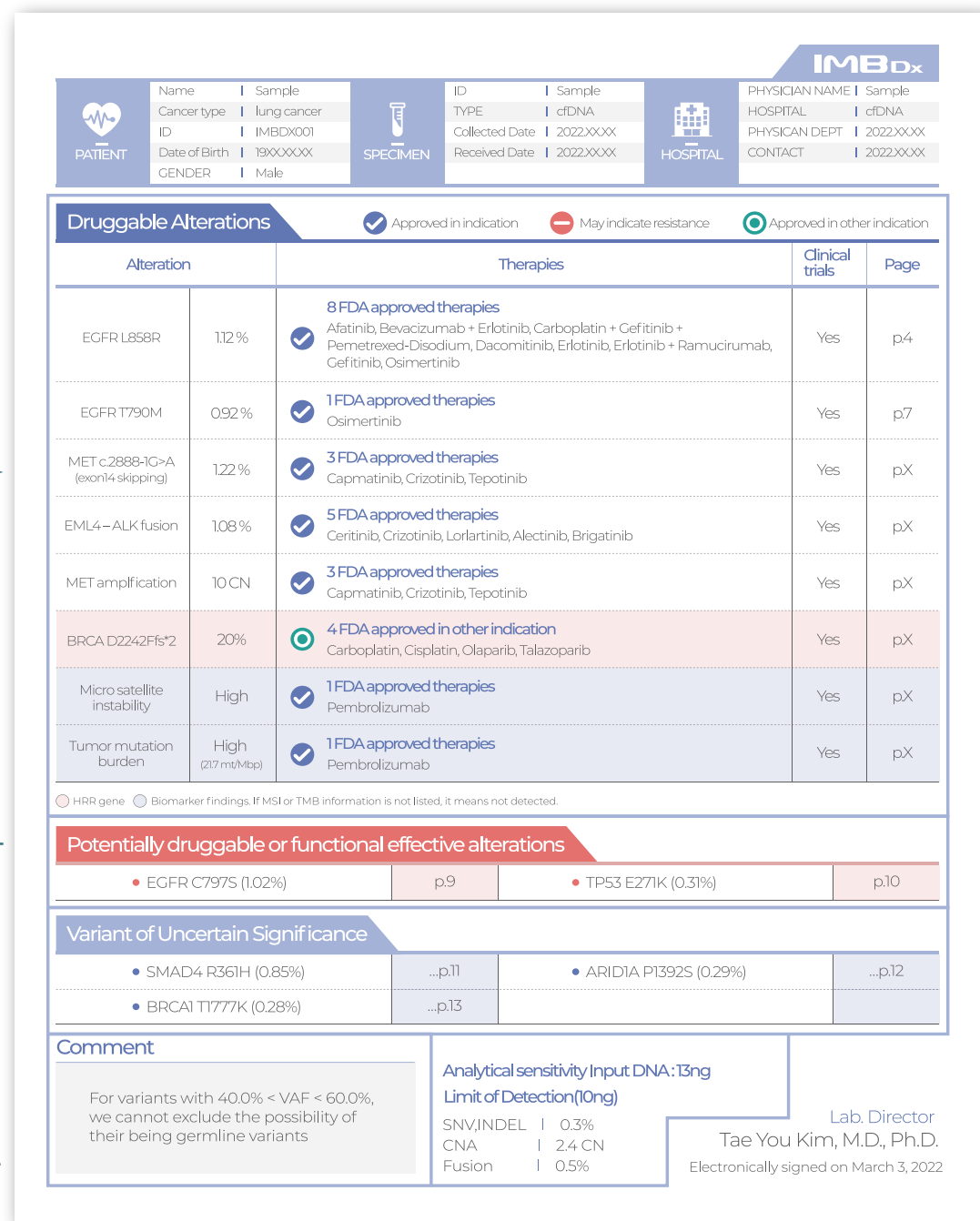
Sample Type	# Number of Variants	Significance
Cell pellet	~4	**
CSF cfDNA	~6	

根據文獻，針對腦/腦膜轉移病人，腦脊髓液上清液檢體比細胞檢體可找出更多基因變異資訊。



根據文獻，病人體液上清液檢體基因變異與組織相近，且更有機會找到更多變異，為病人找尋下一線治療機會。

根據變異提供FDA/NCCN建議用藥，及相對應證據力強弱。同時根據檢測者所在位置提供臨床研究資訊。



We provide information on detected variants that are either potentially druggable or functionally useful but with which no approved therapy information exists.

Limit of Detection (LOD) information is provided based on the original input DNA amount of the sample.

Additional sample-specific comments if there is any relevant information that should be noted

List of variants that are functionally uncertain or unknown.