

**PROTOCOL SYNOPSIS**

<b>Title of Study:</b> A Retrospective Observational Study for H3 K27M-mutant Glioma
<b>Study Centers:</b> Approximately 50 centers in the United States & other regions (country selection based on feasibility results).
<b>Number of Patients:</b> Available data from all eligible patients from each study center will be collected. Target enrollment is ~50 evaluable patients in Cohort A and ~1500 evaluable patients in Cohort B.
<b>Rationale:</b> There is limited published information about prognostic factors and the progression of H3 K27M-mutant glioma. Therefore, this natural history study aims to better define the response to treatment, natural disease progression, outcomes, and prognostic factors in patients with H3 K27M-mutant and/or midline glioma.
<p><b>Overall Design:</b> This is a multicenter, retrospective, descriptive, observational study in patients with H3 K27M-mutant and/or midline glioma to describe the response to treatment, natural disease progression, outcomes, and prognostic factors. Data will be collected via retrospective chart reviews across selected centers.</p> <p>The study will present data and outcomes for 2 cohorts of patients:</p> <ul style="list-style-type: none"> <li>• Cohort A will include patients with diffuse midline glioma, H3 K27M-mutant that is intended to match selection criteria for patients included in an analysis of efficacy in a planned new drug/marketing application for the Sponsor.</li> <li>• Cohort B is intended to evaluate prognostic factors for survival in a broader group of patients with H3 K27M-mutant and/or midline glioma.</li> <li>• A patient who meets eligibility criteria for both Cohort A and Cohort B will be included and analyzed in both (i.e., the cohorts are not mutually exclusive).</li> </ul>
<p><b>Primary Objectives with Endpoints:</b> Cohort A: To determine recurrent diffuse midline glioma, H3 K27M-mutant glioma objective response to treatment intervention determined by overall objective response rate (ORR) by RANO-HGG criteria as assessed by BICR. Cohort B: To identify prognostic factors for survival determined by OS, measured from diagnosis and from each instance of recurrence</p>
<p><b>Key Inclusion criteria:</b></p> <ol style="list-style-type: none"> <li>1. Medical records (including clinic notes and/or electronic databases) relating to glioma diagnosis and treatments received are available for review. (Minimum information includes demographics, disease characteristics, histology, disease history [diagnosis, tumor location, recurrences], radiation and other treatment history, survival status and death date if applicable.)</li> <li>2. Glioma:       <ol style="list-style-type: none"> <li>a. Cohort A           <ol style="list-style-type: none"> <li>i. Pathology-proven diffuse glioma with a known H3 K27M mutation <u>AND</u></li> <li>ii. Tumor involvement in a midline structure of the brain (thalamus, hypothalamus, basal ganglia, brainstem, cerebellum, cerebellar peduncle, midline cortex, corpus colosum, pineal region, optic tract, optic chiasm.</li> </ol> </li> <li>b. Cohort B           <ol style="list-style-type: none"> <li>i. Pathology-proven diffuse glioma with a known H3 K27M mutation <u>OR</u></li> <li>ii. Tumor involvement in a midline structure of the brain (including DIPG or a primary spinal tumor).</li> </ol> </li> </ol> </li> <li>3. Initial diagnosis was in 2012 or later.</li> </ol> <p>Additional inclusion criteria for <u>Cohort A</u>:</p> <ol style="list-style-type: none"> <li>4. Age <math>\geq 2</math> years at start of treatment intervention.</li> <li>5. At least one second-line, or later, therapy for glioma that did not involve radiation, bevacizumab, Sponsor's study drugs, or related compounds (e.g., biosimilars).</li> <li>6. Availability of MRI files ([DICOM] format) and corticosteroid dose from baseline of treatment intervention through progression (if applicable), with associated KPS/LPS.</li> <li>7. Prior therapy with at least radiation and an interval of at least 90 days from completion of the most recent prior radiation to start of treatment intervention.</li> <li>8. Evidence of progressive and measurable contrast-enhancing disease on brain MRI according to Response Assessment in Neuro-Oncology (RANO) high-grade glioma (HGG) criteria before treatment intervention was initiated.</li> <li>9. The following time periods must have elapsed prior to the start of treatment intervention: 23 days for temozolomide, 6 weeks from antibodies including bevacizumab, and 4 weeks from other anti-tumor therapies.</li> <li>10. Corticosteroid dose that was stable or decreasing for at least 3 days prior to MRI scan that occurred before initiation of treatment intervention.</li> <li>11. KPS/LPS <math>\geq 60</math> at the start of treatment intervention. [If a patient meets all other eligibility criteria, but the KPS/LPS score is not specified in the medical records, a score may be inferred by the investigator based on physical examination chart notes.]</li> </ol> <p>Additional inclusion criteria for <u>Cohort B</u>: Known date of death or survival follow-up of at least 6 months from initial diagnosis.</p>
<p><b>Key Exclusion criteria:</b> A potential patient who meets any of the following criteria will not be eligible for inclusion in the study:</p> <ol style="list-style-type: none"> <li>1. Unknown H3 K27M mutation status.</li> </ol> <p>Additional exclusion criteria for <u>Cohort A</u>:</p> <ol style="list-style-type: none"> <li>2. DIPG or a primary spinal tumor.</li> <li>3. Evidence of leptomeningeal spread of disease or cerebrospinal fluid dissemination.</li> </ol> <p>Additional exclusion criteria for <u>Cohort B</u>: Prior treatment with Sponsor's study drugs at any time.</p>