THORAX

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
AGADIR	II	Atezolizumab + BDB001 + radiothérapie	3	NSCLC	Refractory anti PD-1/L1	
AMGEN 20220028	I	AMG 355 (Anti CCR8 monoclonal Ab)	A1 dose escalation	NSCLC		
		AMG 355 + Pembrolizumab	B1 dose escalation	NSCLC		
DS8201-A-U106	Ib	Trastuzumab + Deruxtecan IV + Pembrolizumab iV	3	NSCLC	HER2-expression (IHC 1+, 2+, or 3+)	Patients must not have received prior treatment with anti-PDL-1, anti-PD-1, or anti-HER2
IMC-F106	I	IMC-F106C (IV)	22, 23, 40, 41	NSCLC	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
		IMC-F106C + Docetaxel	36	NSCLC	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
		IMC-F106C + Osimertinib	39	NSCLC	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
LOXO-RAS-20001	Ib expansion	LY3537982	B8	NSCLC with Brain metastasis	KRAS G12C TUMOR TISSUE OR LIQUID BIOPSY	Patient must have progressed/be intolerant/ineligible for immunotherapy and platinium based therapy No mutation : EGFR, ALK, BRAF (V600), MET (exon 14), ROS1, RET or NTRK 1/2/3
		LY + pembro + pemetrexed + platinum therapy	B9	NSCLC 1st line	KRAS G12C TUMOR TISSUE OR LIQUID BIOPSY	No previous line allowed.
		LY3537983 + pembro	G	NSCLC 1st line	KRAS G12C TUMOR TISSUE OR LIQUID BIOPSY	No previous line allowed.
Regomune	II	Regorafenib + Avelumab	P	Malignant pleural mesotheliom a		At least one line and max 1 line of PD(L)1/CTLA-4 mAb (received at least 4 month), anti PDL1 not mandatory
RMC LUNG-101a	I	RMC-6291 + Pembrolizumab	Part1 backfill	NSCLC	KRAS G12C	1-3 prior lines
			Part2 cohort1	NSCLC	KRAS G12C and TPS >= 50%	No prior line
		RMC-6291 + Pembrolizumab+ CHT: cisp/carbo + Alimta	Part 2 cohort 2	NSCLC	KRAS G12C	No prior line
RMC LUNG-101b	I	RMC-6236 + Pembrolizumab	Part1 backfill	NSCLC	RAS mut	1-3 prior lines
			Part2 cohort1	NSCLC	RAS mut and TPS >= 50%	No prior line
		RMC-6236 + Pembrolizumab+ CHT: cisp/carbo + Alimta	Part 2 cohort 2	NSCLC	RAS mut	No prior line

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
R7075-ONC-2009	I/II	REGN7075 + Cemiplimab+chimiotherapie	C	NSCLC	Advanced or metastatic NSCLC do not have previously documented targetable molecular alterations (eg, ALK, ROS1, EGFR, Met Ex14, etc)	anti-PD-1/PD-L1 naïve no prior systemic treatment for recurrent or metastatic NSCLC (adjuvant or neoadjuvant systemic treatments will not be counted as a prior line)
		REGN7075 + Cemiplimab+chimiotherapie	G	EGFR-mutant NSCLC post third generation TKI	NSCLC that harbors EGFR Exon 19 deletion - NSCLC that harbors EGFR L858R mutation - NSCLC with activating EGFR exon20 insertion– NSCLC with exon 18/21 atypical mutations, Stable CNS disease allowed, Small cell transformation is excluded	anti-PD-1/PD-L1 naïve Chemotherapy naïve Have received treatment with a third generation TKI : For patients whose tumors harbor previously documented EFGR Exon19 deletion or L858R mutation, prior osimertinib or other third generation TKI treatment is required
		REGN7075 + Cemiplimab	H	EGFR-mutant NSCLC post TKI	locally advanced or metastatic non-squamous NSCLC, NSCLC that harbors EGFR Exon 19 deletion - NSCLC that harbors EGFR L858R mutation - NSCLC with activating EGFR exon20 insertion– NSCLC with exon 18/21 atypical mutations	anti-PD-1/PD-L1 naïve Have received treatment with a third generation TKI : For patients whose tumors harbor previously documented EFGR Exon19 deletion or L858R mutation, prior osimertinib or other third generation TKI treatment is required Have received treatment with platinum-doublet chemotherapy
TNG908-C101	II	TNG908	1	Locally advanced or metastatic MTAP-deleted NSCLC squamous or non squamous		Received at least 1 standard-of-care targeted therapy(ies) for the known alteration
			2	Locally advanced or metastatic MTAP-deleted mesothelia		

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Senology

STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
INCB123667-101	I	INCB123667	Part 1b Group 4	TNBC		2 prior lines of chemotherapy max
REGOMUNE	II	Regorafenib + Avelumab	L	TNBC		At least one line and max 1 line of PD(L)1 mAb (received at least 4 month) anti PDL1 mandatory
RLY 2608-101	I	RLY-2608 + Fulvestrant	2	group 1a : Advanced/metastatic breast cancer PIK3CAmut	PIK3CAmut, HR+, HER2- RP2D1 (600mg BID) Expansion	with NO prior PI3K alpha inhibitor RP2D1 (dose recommended 1)
		RLY-2608 + Ribociclib 400mg + Fulvestrant	1	Advanced/metastatic breast cancer	PIK3CAmut HR+ HER2- Dose escalation	with NO prior PIK3CA α inhibitor
		RLY-2608 + Ribociclib 600mg + Fulvestrant	1	Advanced/metastatic breast cancer	PIK3CAmut HR+ HER2- Dose escalation	with NO prior PIK3CA α inhibitor
STX-487-101	I/II	STX-478	Part 1,2A1	Breast cancer	PI3KαH1047X mutation or other kinase domain mutations, HR+/HER2-	Must have received for stage III or IV disease : at least 1 CDK4/6 inhibitor regimen at least 1 anti-estrogen therapy and no more 2 prior systemic chemotherapy No prior treatment with PI3K/AKT/mTOR inhibitor
		STX-478 + Fulvestrant	Part 2 cohorte B	Breast cancer	PI3Kα H1047X mutations or other kinase domain mutations	No prior treatment with PI3K/AKT/mTOR inhibitor Have received CDK4/6 inhibitor, unless the participant is deemed by the investigator intolerant to these agents Antiestrogen therapy (see inclusion criterion 13)

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DERMATOLOGY

STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
AMGEN 20220028	I	AMG 355 (anti CCR8 monoclonal Ab)	A1 dose escalation	Melanoma		
EVICTION-ICT-01-101	I/IIa	ICT01 + Pembrolizumab	G	Melanoma CPI-refractory	Circulating γ9δ2 T cell count ≥ 20000 cells/mL Pembro Combo	At least one line
KN-8701	Ib	KIN-2787 + BINIMETINIB	A2	Melanoma	NRAS mut	received prior locally approved standard of care appropriate for their tumor type and stage of disease
R7075-ONC-2009	I/II	REGN7075 + Cemiplimab	B	Cutaneous squamous cell carcinoma	Metastatic CSCC or locally advanced CSCC	Anti-PD-1/PD-L1 naive

UROLOGY

STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
AGADIR	II	Atezolizumab + BDB001 + radiothérapie	5	UBC	Refractory anti PD-1/L1	
LOXO-FG3-22001	I	Loxo 435 + Pembrolizumab	A2	Urothelial	FGFR3 alteration	must have received at least one prior regimen, prior FGFR inhibitor treatment is permitted, but not required
REGOMUNE	II	Regorafenib + Avelumab	J	Urothelial		At least one line and max 1 line of PD(L)1 mAb (received at least 4 month), anti PDL1 not mandatory
			O	Non clear-cell renal carcinoma		

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GYNECOLOGY

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
CPI-0209	II	CPI0209	M3	Endometrial carcinoma	ARIDA1 mutated	Previous treatement with EZH2 inhibitor forbidden
INCB123667-101	I	INCB123667	Part 1b grp 2	endometrial/uterine cancer	CCNE1 amplification	3 prior lines of systemic therapy max
IMC-F106C	I	IMC-F106C (IV)	34	High Grade Serous Ovarian Carcinoma	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
		IMC-F106C + Gemcitabine	35	Ovarian and uterine/endo	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
		IMC-F106C + Carboplatin / Paclitaxel	37	Ovarian and uterine/endo	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
		IMC-F106C + Bevacizumab	38	High Grade Serous Ovarian Carcinoma	HLA-A*02:01- positive, PRAME-positive tumor	Participants must not have received prior treatment with an ImmTAC, including tebentafusp, IMCnyeso, or IMC-C103C.
STX-487-101	I/II	STX-478	Part 1,2A2	Endometrial cancer, ovarian cancer and cervical cancer	PI3Kα H1047X mutations or other kinase domain mutations	No prior treatment with PI3K/AKT/mTOR inhibitor

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DIGESTIF

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
AMGEN 20220028	I	AMG 355 (anti CCR8 monoclonal Ab)	A1 dose escalation	CRC (MSS)		
		AMG 355 (anti CCR8 monoclonal Ab)	A1 dose escalation	Gastric cancer		
		AMG355 + pembrolizumab	B1 dose escalation	CRC (MSS)		
		AMG355 + pembrolizumab	B1 dose escalation	Gastric cancer		
INCB123667-101	I	INCB123667	Part1b group 3	Gastric, GEJ and esophageal adenocarcinomas	CCNE1 amplification	3 prior lines of systemic therapy max
LOXO-RAS-20001	Ib expansion	LY3537982 monotherapy	F1	Pancreas	KRAS G12C TUMOR TISSUE OR LIQUID BIOPSY	Patient must have progressed/be intolerant/ineligible for immunotherapy and platinium based therapy No mutation : EGFR, ALK, BRAF (V600), MET (exon 14), ROS1, RET or NTRK 1/2/3
MK-345-158	II	Pembrolizumab	K		MSI-high	At least one line
				Small intestine		
				Billary		
REGOMUNE	II	Regorafenib + Avelumab	A'	Colorectal	Not MSI-high or MMR deficient (macrophage infiltrate)	At least one line
TNG908-C101	II	TNG908	4	Locally advanced or metastatic MTAP-deleted pancreatic ductal adenocarcinoma or adenosquamous carcinoma with predominantly adenocarcinoma histology	Documented bi-allelic (homozygous) deletion of MTAP in a tumor detected by a validated NGS test, or absence of MTAP protein in a tumor detected by a validated IHC test.	

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SARCOMAS

STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
Multisarc	II	Olaparib-Durvalumab		STS	Unresecable, targetable alteration	At least one line for metastatic disease or locally advanced disease

NEUROLOGY

STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
MegaMOST	II	Alectinib BID	C	Neuroblastoma	Activating ALK alterations : translocation, mutation	At least one line for metastatic disease, no previous ALK inhibitor (except crizotinib)
TNG908-C101	II	TNG908	6	MTAP-deleted R/R Glioblastoma		

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Solid tumors

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
CHRO761A1201	I	HRO761	Arm A	Solid tumors	Microsatellite instability or mismatch repair deficiency	Patient should have received all available lines of standard of care therapy, including chemotherapy and/or targeted therapy, and prior immune check point inhibitor therapy.
CO42800	I	Inavolisib + taxol	2	HNSCC	PI3KCA TUMOR TISSUE OR LIQUID BIOPSY	Must have received standard therapy
				Ovarian	PI3KCA TUMOR TISSUE OR LIQUID BIOPSY	Must have received standard therapy
EZH-1201	I	Tazemetostat	1	Solid Tumors	Moderate hepatic impairment (NCI-ODWG)	At least one line, no prior anti-EZH2
			2	Solid Tumors	Severe hepatic impairment (NCI-ODWG)	At least one line, no prior anti-EZH2
KN-8701	Ib	KIN-2787 + Binimetinib	A2	Solid tumors	BRAF class II	received prior locally approved standard of care appropriate for their tumor type and stage of disease
LOXO-FG3622001	I	Loxo 435 + Pembrolizumab	A1	Solid tumors	FGFR3 alteration or ligand amplification	Prior FGFR inhibitor treatment is permitted, but not required
M21-404	I	ABBV400	5	Solid tumour MET amplified		At least 1 line or no alternative
MegaMOST	II	Cabozantinib QD	B	Solid tumors	AXL, MET, VEGFR, VEGF, RET, ROS1, MER, TRKB, TIE-2 and/or Tyro3 activating mutations/amplification, and/or NTRK translocation TUMOR TISSUE OR LIQUID BIOPSY	At least one line for metastatic disease
		Alectinib BID	C	Solid tumors	Activating ALK alterations : translocation, mutation	At least one line for metastatic disease, no previous ALK inhibitor (except crizotinib)
		Regorafenib 3 weeks on / 1 week off	D	Solid tumors	Activating mutation and/or amplification of VEGFR1-3, TIE-2, KIT, RET, RAF1, BRAF (other than V600 mutations), CRAF, HRAS, KRAS, PDGFR, FGFR1-2, FLT3 and/or CSFR1 ; amplification of the ligands ; biallelic inactivation of SMAD4 TUMOR TISSUE OR LIQUID BIOPSY	At least one line for metastatic disease
		Trametinib QD + Dabrafenib BID	F	Solid tumors	BRAF V600 mutation, tumor tissus or liquid biopsy Except melanoma, lung and CRC	At least one line for metastatic disease

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Solid tumors

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STUDY NAME	PHASE	MOLECULE	COHORT TYPE			PREVIOUS LINE
			COHORT NUMBER	TUMOR TYPE	SPECIFICITY	
MK-7339-002	II	Olaparib	3	Solid tumors	HRD positif Except ovarian and sarcoma	At least one line and max 2 lines, platine-sensitive if applicable
MOST PLUS	II	Nilotinib		PVNS	ABL1, KIT, PDGFRA, PDGFRB, DDR1, DDR2, CSF1R mutations	At least one line
		Olaparib		Solid tumors	HDR pathway mutations	At least one line
PMV586-101	I/II	Olaparib	3	Solid tumors	HRD positif except ovarian and sarcoma	At least one line and max 2 lines, platine-sensitive if applicable
PRT3789-01	Ia	PRT3789	Dose escalation	Solid tumors	SMARCA4	Participants with NSCLC with driver mutations in oncogenes (e.g., EGFR, MET, RET, ALK, BRAF, KRAS, ROS1, etc.) are eligible after progression on approved targeted therapies
REGOMUNE	II	Regorafenib + Avelumab	M	Solid tumors	TMB-H (>16 mut/mgb on tissue or blood sample)	At least one line and max 1 line of PD(L)1 mAb (received at least 4 month) anti PDL1 not mandatory
			N	Solid tumors	MSI-H	At least one line, anti PDL1 not mandatory
RMC-LUNG-101a	I	RMC-6291 + Pembrozilumab	Part1	Solid tumors	KRAS G12C	At least one line of treatment
STX-487-101	I/II	STX-478	Part 1,2A4	Other solid tumors	PI3Kα H1047X mutations or other kinase domain mutations other than the tumor types permitted in Cohorts A1, A2, and A3Disease	No prior treatment with PI3K/AKT/mTOR inhibitor
TAPISTRY	II	ALECTINIB	C	Solid tumors	ALK fusion-positive (except NSCLC) TUMOR TISSUE OR LIQUID (VALIDATION NEEDED)	

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