

CALIFORNIA STATE SCIENCE FAIR 2015 PROJECT SUMMARY

Name(s)	Project Number
Jayani R.T. Ratnam	
	35287
Project Title	
Effective Targeted Therapy for Non-Small Cell Lung Carter using	
EGFR Tyrosine Kinase Inhibitors Based on the Mutation ty	
Objectives/Goals Abstract	
To enhance the treatment of patients with Non-small cell lung cancer (NSCCC)	y finding out how and
why individuals respond differently to varying inhibitors based on their mutation type and location in the	
EGFR tyrosine kinase domain, and generate a more effective way to prescribe a order to present them with the best treatment plan possible. To study the difference of the diff	medications to patients in
mutation, and each tyrosine kinase inhibitor (TKI). Find the molecular formula and other information	
about each inhibitor. Find amino acid, nucleotide, and ordperty changes for each mutation.	
Methods/Materials Data was collected and analyzed from many data warehouses, and studies BioMart, and I-TASSER were	
used to sort the mutations by type and location, and to study the base mere GFR domains/exons in depth.	
A program was written in R to compute the mean values of response of various TKIs.	
Results	0/ of ECED mutated
NSCLC. Based on the analysis, it was concluded that for patients with an exon 19-deletion or L858R	
The two most common mutations, L858R and exon 19 deletions account for 90% of EGFR mutated NSCLC. Based on the analysis, it was concluded that for patients with an exon 19-deletion or L858R mutations the best treatment option is erlotinib with 73% average response rate. Another important mutation is T700M mutation, which is also know as an activity of mutation because it enpages in more	
I mutation is 1/901v1-inutation, which is also knowings an accurred mutation because it appears in more	
than 50% of patients after they get treated with certain TKIs The T790M-mutation behaves differently from most mutations, the amino acid threatine is replaced by methionine, which affects the binding	
capability of many TKIs. However, AZD9291 and CO-1686 have irreversible binding capabilities, and hence prove to be the best treatment options for T790M-mutations, with average response rates of 64%	
hence prove to be the best treatment options for TY90M mutations, with average response rates of 64%	
and 58% respectively. Conclusions/Discussion	
It was concluded that if cancer patients with ESEP tyrosine kinase mutations were treated with EGFR TKIs based on the mutation pattern then EGFR TKIs will be more effective. This is because each	
TKIs based on the mutation pattern than EGFR TKIs will be more effective. This is because each	
mutation is caused by an amino acto change, changing one or more properties of the protein being made. Each property change results in a different chemical structure change of some part of the protein. Each	
drug has a specific chemical structure, and because of this, they will bind differently to the EGFR protein.	
drug has a specific chemical structure, and because of this, they will bind differently to the EGFR protein, either successfully inhibiting the EGFR or not. This means that patients with a NSCLC EGFR tyrosine	
kinase mutation will have a clear plan on how to continue their treatment.	
Summary Statement	
Finding optimal treatment for non-small cell lung cancer patients based on their mutation type and	
location.	
Help Received	
Professor Gazdar and Wakelee answered a few questions I had on this topic.	