

Janine's Experience Navigating Lung Cancer with the Support of Her Family

One patient describes how biomarker testing, and a targeted therapy, impacted her treatment plan following a shocking cancer diagnosis.

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For Janine, life always revolved around one thing, her family. She and her husband were raising five children and supporting them in school and their many extracurricular activities. The full-time hairdresser volunteered as a band mom, a Reserve Officers Training Corps (ROTC) mom, a parent booster, and much more. One day, a trip to the ER to evaluate recent abdomen swelling turned her world upside down.

Janine was suddenly diagnosed with ovarian cancer and doctors operated to remove a 9-pound tumor. All seemed to go well and Janine didn't require additional treatment. However, on her first follow-up appointment, a chest scan revealed she had a mass in her upper left lung.

My nurse would always ask me how I was, beyond the scan results. She really cared about me as a person and how I was coping with everything.

She was referred to a specialist, and despite having no lung cancer symptoms, was diagnosed with stage 2 non-small cell lung cancer (NSCLC). "When you hear the word cancer, you're in shock. No one can prepare you for that," Janine recalls.

Following the lung cancer diagnosis, Janine's doctor ordered a biopsy and biomarker testing, which is used to identify a patient's specific tumor makeup to help doctors understand what's driving the growth of the cancer and how it might respond to various therapies.¹ Surgery followed to remove the upper half of her left lung, where they determined the cancer had spread to one of her lymph nodes. Janine began chemotherapy and radiation treatment a short time later.

It was at this point that Janine understood the importance of having a strong supportive care team surrounding her as a patient – including her oncologist, nurse and hospital staff. "My nurse would

always ask me how I was, beyond the scan results,” Janine says. “She really cared about me as a person and how I was coping with everything.”

And at home, her family was there for her too – staying positive with their encouragement. “Unfortunately, cancer affects the whole family, not just the person who has it,” Janine says. “My kids are phenomenal though. They’re like mom, you got this!” When days inevitably get difficult, Janine leans on her husband for support. “He’s my rock through all this. I don’t know how he does it,” she says.

While putting up Christmas decorations later that year, a stroke-like episode sent Janine back to the ER. A scan showed that the cancer had spread to her brain. “I was incredibly alarmed since I had a PET scan and MRI not too long ago that showed nothing,” Janine says. Surgery removed the brain tumor, but her doctor informed her that she had progressed to stage 4 advanced metastatic NSCLC.

Unfortunately, cancer affects the whole family, not just the person who has it.

“He let me know that just because I’m incurable does not mean I’m untreatable,” Janine recalls. Unwilling to give up, her doctor revisited her biomarker results.

As of early 2022, there has been a growing consensus around the value of biomarker testing, with approximately 80% of patients with NSCLC being tested by their oncologists at diagnosis for the

KRAS G12C mutation.^{2,3} The results can inform a personalized treatment plan at multiple points in the treatment journey, including if there is progression to later stages of cancer.^{1,4} Roughly 45% of patients tested with NSCLC have an actionable biomarker that “drives” their cancer.⁵

“My husband and I came back a week later,” Janine remembers. The results showed that she had the KRAS G12C mutation, which is one of the most common mutations in NSCLC, occurring in about 13% (1 in 8) of non-squamous NSCLC patients in western countries.⁵ Janine’s doctor told her about LUMAKRAS[®] (sotorasib), a drug approved by the U.S. Food and Drug Administration (FDA) as the first once-daily oral therapy designed to target the KRAS G12C mutation in NSCLC patients.⁶

What is LUMAKRAS[®]?

LUMAKRAS[®] is a prescription medicine used to treat adults with non-small cell lung cancer (NSCLC) that has spread to other parts of the body or cannot be removed by surgery, and whose tumor has an abnormal KRAS G12C gene, and who have received at least one prior treatment for their cancer. Your healthcare provider will perform a test to make sure that LUMAKRAS[®] is right for you. It is not known if LUMAKRAS[®] is safe and effective in children.

Shortly after, Janine began treatment with LUMAKRAS[®].



[Placeholder for
Janine Branded
Video MID USA-
510-81473]

Important Safety Information

What should I tell my healthcare provider before taking LUMAKRAS[®]?

- Before taking LUMAKRAS[®], tell your healthcare provider about all your medical conditions, including if you:
 - have liver problems
 - have lung or breathing problems other than lung cancer
 - are pregnant or plan to become pregnant. It is not known if LUMAKRAS[®] will harm your unborn baby.
 - are breastfeeding or plan to breastfeed. It is not known if LUMAKRAS[®] passes into your breast milk. Do not breastfeed during treatment with LUMAKRAS[®] and for 1 week after the last dose.

Please see full LUMAKRAS[®] Patient Information at www.LUMAKRASHCP.com/PI.

“I’m really blessed that I have the best doctors because I had no clue,” Janine says. “You know, I wish I could say that I fought for my care, and I would’ve if they had told me you’re done, go home. That’s just who I am, so I have no problem advocating for myself, but I didn’t have to. I have great doctors and a great team.”

I’ve got things to do and places to go. I’m going to get on with life.

Janine’s advice for anyone going through a cancer diagnosis: “Take it one day at a time, minute by minute if you have to. Just because you keep getting knocked down, doesn’t mean you’re done.”

Janine is looking forward to making the most of her time, spending it with her husband and kids. She’s excited to see her daughter graduate college and to hopefully visit her son, who’s currently stationed with the Army in Hawaii.

“I’ve got things to do and places to go,” Janine says. “I’m going to get on with life.”

*Individual results may vary.

Janine has been compensated by Amgen for her time.

KRAS, Kirsten rat sarcoma viral oncogene homolog

To learn more about biomarker testing and the first once-daily oral treatment for people living with KRAS G12C non-small cell lung cancer, talk to your doctor and visit [LUMAKRAS.com](https://www.lumakras.com).

Important Safety Information (Continued)

What should I tell my healthcare provider before taking LUMAKRAS[®]? (Continued)

- Tell your healthcare provider about all the medicines you take, including prescription and over the counter medicines, vitamins, dietary and herbal supplements. LUMAKRAS[®] can affect the way some other medicines work, and some other medicines can affect the way LUMAKRAS[®] works.
- Especially tell your healthcare provider if you take antacid medicines, including Proton Pump Inhibitor (PPI) medicines or H₂ blockers during treatment with LUMAKRAS[®]. Ask your healthcare provider if you are not sure.

LUMAKRAS[®] may cause serious side effects, including:

- Liver problems: LUMAKRAS[®] may cause abnormal liver blood test results. Your healthcare provider should do blood tests before starting and during treatment with LUMAKRAS[®] to check your liver function. Tell your healthcare provider right away if you get any signs or symptoms of liver problems, including: your skin or the white part of your eyes turns yellow (jaundice), dark or “tea-colored” urine, light-colored stools (bowel movements), tiredness or weakness, nausea or vomiting, bleeding or bruising, loss of appetite, and pain, aching, or tenderness on the right side of your stomach-area (abdomen).
- Lung or breathing problems: LUMAKRAS[®] may cause inflammation of the lungs that can lead to death. Tell your healthcare provider or get emergency medical help right away if you have new or worsening shortness of breath, cough or fever.
- Your healthcare provider may change your dose, temporarily stop, or permanently stop treatment with LUMAKRAS[®] if you develop side effects.

The most common side effects

- The most common side effects of LUMAKRAS[®] include diarrhea, muscle or bone pain, nausea, tiredness, liver problems, cough, changes in liver function tests, and changes in certain blood tests.
- These are not all the possible side effects of LUMAKRAS[®]. Call your doctor for medical advice about side effects.

Please see full LUMAKRAS[®] Patient Information at www.LUMAKRASHcp.com/PI

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References:

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<http://beta.docker.cancerhealth.com/article/janines-experience-navigating-lung-cancer-support-family>