PANCREATIC CANCER ACTION NETWORK



RASONQUE™ (daraxonrasib)

RASONQUE™ (daraxonrasib) was approved in August 2026 for the treatment of adults with metastatic pancreatic adenocarcinoma who have received at least one prior systemic therapy or are not candidates for multiagent systemic therapy. This means the treatment may be an option for people with pancreatic cancer who have or have not had prior therapy.

RASONQUE™ (daraxonrasib) is a targeted therapy known as a RAS inhibitor. It blocks the activity of several RAS proteins, including both mutated forms (genes that have changed or broken unexpectedly) and wild-type (non-mutated) forms. By blocking these signals, RASONQUE™ (daraxonrasib) helps prevent cancer cells from growing.

What are the common side effects of RASONQUE™ (daraxonrasib)?	Early clinical studies found that about 30% of patients developed TRAEs (treatment-related adverse events). Rash was the most common toxicity occurring in 85% or more of patients. A more severe rash leading to dose reductions occurred in around 13% of patients. Other common side effects include: • Mouth sores (stomatitis) • Diarrhea • Nausea • Vomiting • Fatigue
When will RASONQUE™ (daraxonrasib) be available?	Since RASONQUE™ has been approved, it should be available. The company that manufacturers the drug is working with pharmacies to ensure patients have access. Because of demand, this may take some time. The best way to learn about how long the process may take is to keep in regular contact with your doctor.
How is RASONQUE™ (daraxonrasib) taken?	RASONQUE™ (daraxonrasib) is a once daily pill. Talk with your doctor to learn more about dosage and timing, which can vary between patients.
How can I talk to my doctor about RASONQUE™ (daraxonrasib)?	You can call your doctor, set up an appointment or use your healthcare patient portal to send a message. Use the questions below to help guide conversation.

Do I need biomarker testing?	Patients do not need biomarker testing to find out if they can receive RASONQUE™ (daraxonrasib). However, patients should get biomarker testing (sometimes called molecular profiling) of tumor samples to check for KRAS and other mutations. Biomarkers or mutations can be found in blood or tumor tissue to determine if there are specific therapies to target a patient's tumor. More than 90% of pancreatic tumors are thought to be driven by a KRAS mutation. Patients may access biomarker testing (as well as genetic testing for inherited mutations) through their institutions or private companies. Biomarker testing is also available through PanCAN's Know Your Tumor® service for patients who do not have access to this type of testing through their institution.
How much will RASONQUE™ (daraxonrasib) cost?	Insurance coverage and out-of-pocket costs for RASONQUE™ (daraxonrasib) will vary from person to person, and depends on an individual's specific insurance plan and any financial assistance. The best way to estimate cost is to contact your insurance provider and speak with your doctor. You can also review your insurance plan and find out if you have a co-payment, co-insurance or out-of-pocket cost for specialty medications.



Remember, every patient responds to treatment differently. It is important to talk to your doctor about the risks and possible benefits of new treatments; they know you and your medical history best.

Questions to ask your doctor about RASONQUE™ (daraxonrasib):

General Questions

- Why was RASONQUE™ (daraxonrasib) approved? Can you explain the survival benefit?
- What does "previously treated metastatic pancreatic cancer" mean?
- What are my next steps?

Eligibility and Testing

- Do I qualify for RASONQUE™ (daraxonrasib)? Why or why not?
- If I have not already, should I get biomarker testing?
- If I have not had genetic or biomarker testing, do I need to get another biopsy to collect tissue?
- Is there enough tissue from a previous biopsy that can be used for testing?
- I have not had any treatment. Am I a candidate for RASONQUE™ (daraxonrasib)?

Making a Treatment Decision

- Can we have a conversation about and/or revisit my goals of care?

- Should I wait for RASONQUE™ (daraxonrasib) to be available before making a treatment decision?
- How does treatment with RASONQUE™ (daraxonrasib) align with my goals of care?
- Should I consider RASONQUE™ (daraxonrasib), a clinical trial, or another standard option?
- Could taking RASONQUE™ (daraxonrasib) now affect my eligibility for later trials?

What to Expect During Treatment

- What side effects should I expect? What can be done to address any side effects I experience?
- How will we monitor progress to see if RASONQUE™ (daraxonrasib) is working?

Cost, Coverage and Timing

- How much will RASONQUE™ (daraxonrasib) cost?
- If RASONQUE™ (daraxonrasib) is prescribed to me, will my insurance cover it?
- Can you help me talk to my insurance provider?
- How quickly can treatment start after the prescription is written?

What happens next?

Patients interested in RASONQUE™ (daraxonrasib) should speak with their doctor as soon as possible.

RASONQUE™ (daraxonrasib) continues to be studied in different clinical trials for other stages of pancreatic cancer and other cancer types. In addition, researchers are studying daraxonrasib in combination with other drugs to help overcome treatment resistance, which occurs when cancer cells no longer respond to therapy. In these studies, daraxonrasib is usually paired with commonly used chemotherapies such as gemcitabine and Abraxane.

Next Steps

- ☐ Talk to your doctor about all treatment options, and be sure to discuss goals of care.
- ☐ Contact PanCAN Patient Services for more information.

For more information, visit pancan.org
For questions, contact us at 877-2-PANCAN

Contact PanCAN Patient Services M – F, 7 a.m. – 5 p.m. PT, at **877-2-PANCAN**
or **patientservices@pancan.org.** Hablamos español.

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