
New Trends & Current Research in the Treatment of Lung Cancer, Pt. III: Locally Advanced Non-Small Cell Lung Cancer (NSCLC)



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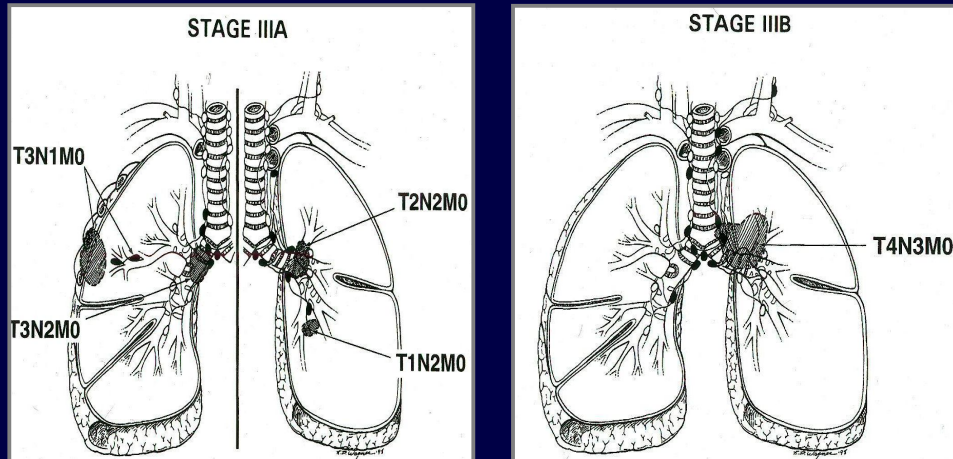
President & CEO,
GRACE

Cancer Lifeline
Seattle, WA
May 21, 2009

Disclaimers

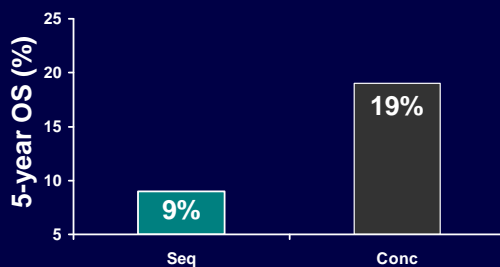
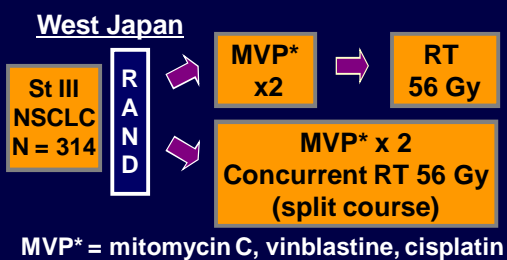
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- The contents of this program do not constitute medical advice and is intended to supplement but not replace input from an individual patient's medical team.

Stage III/Locally Advanced NSCLC

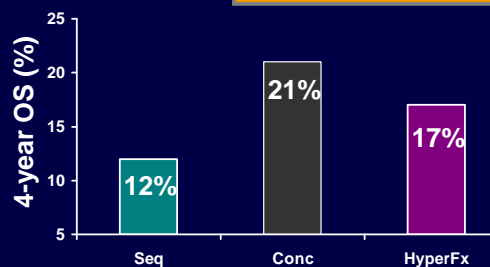
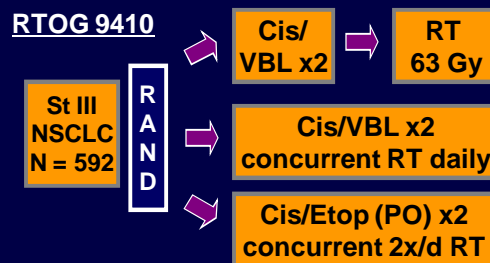


- Approximately 40-45% of new presentations of NSCLC

Efficacy Results: Sequential vs. Concurrent Chemoradiotherapy, Two Major Trials

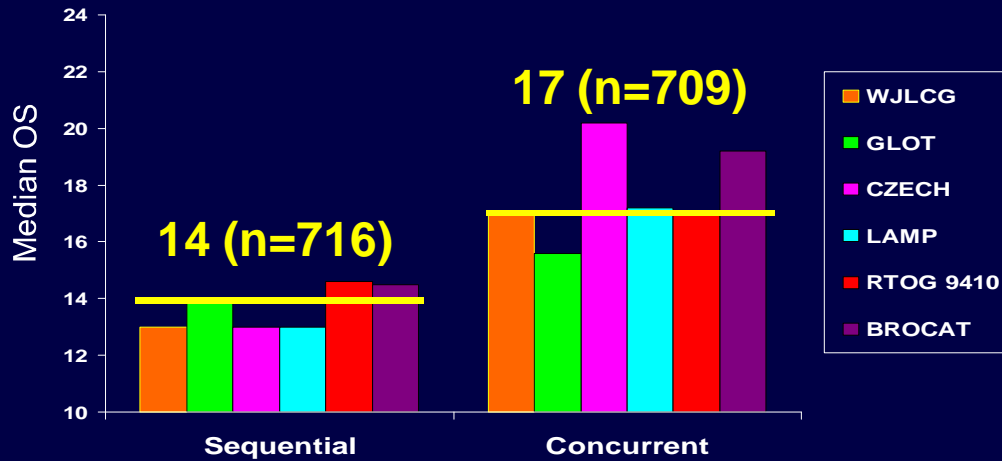


Furuse, JCO 17:2692-2699, 1999



Curran, PASCO 22:621. A#2499, 2003

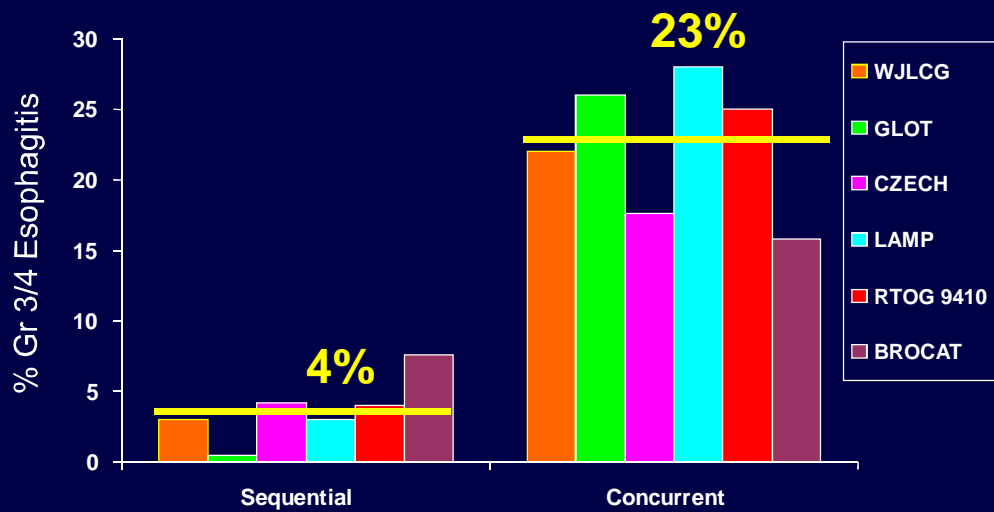
Survival Comparison between Sequential and Concurrent CT/RT



Choy, ASCO 2003

P < 0.05 (Kruskal-Wallis Test)

Early Toxicity Comparison between Sequential and Concurrent CT/RT



SWOG 9504: Consolidation Taxotere (Docetaxel) after Definitive Chemoradiation

N=83 evaluable, stage IIIB NSCLC

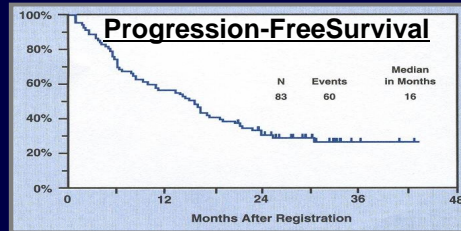
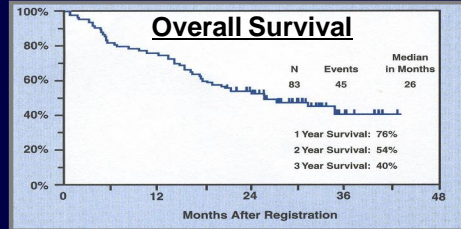


Cisplatin/Etoposide x2 cycles with concurrent RT 61Gy



Taxotere every three weeks x3 cycles, "consolidation" chemo

Gandara, J Clin Oncol, 2003



- Failure in brain – 33%

Hoosier Oncology Group (HOG) Trial: Direct Test of Consolidation Taxotere (Docetaxel)

Unresectable Stage III NSCLC
Cisplatin/etoposide x2 w/concurrent XRT to 61 Gy

No PD
PS 0-2

R
A
N
D

Consolidation Taxotere every 3 weeks x 3 cycles

Observation

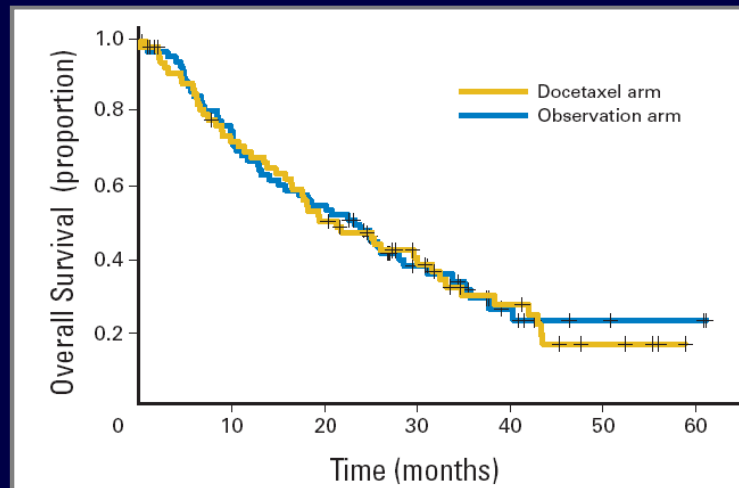
Accrued: 203 pts



147 pts (68%)

Hanna, J Clin Oncol 2008

HOG Trial: Overall Survival



Hanna, J Clin Oncol 2008

HOG Trial: Side Effects and Treatment-Related Deaths

Table 3. Select Grade 3 to 5 Nonhematologic Toxicities

Toxicity	% of Patients			<i>P</i> *
	PE/XRT	Docetaxel	Observation	
Esophagitis	17.2	—	—	—
Infections	8.9	11.0	0.0	.003
Pneumonitis	—	9.6†	1.4	< .001
Treatment-related death	1.5	5.5	0.0	.058

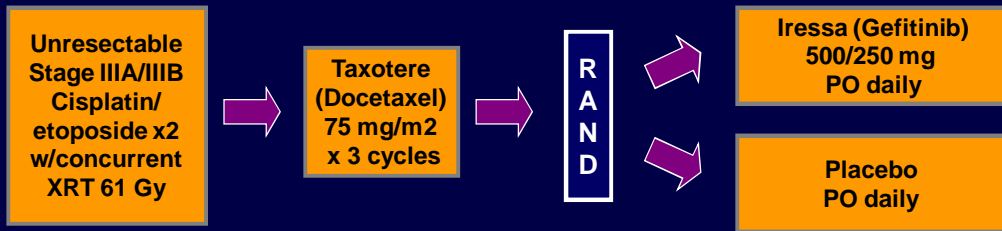
Abbreviation: PE/XRT, cisplatin, etoposide, and radiation therapy.

**P* value corresponds to comparison of docetaxel v observation groups.

†Includes one patient death.

Hanna, J Clin Oncol 2008

Chemo/Radiation → Consolidation Taxotere (Docetaxel) → Maintenance Iressa (Gefitinib) vs. Placebo

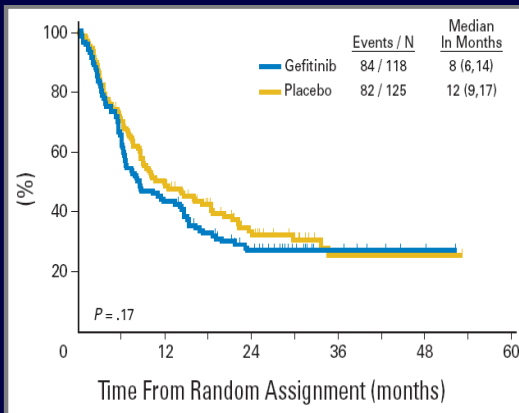


Accrued: 620 pts → 574 pts (74%) → 263 pts (42%)
 Eligible: 575 pts → 412 pts (72%) → 255 pts (44%)

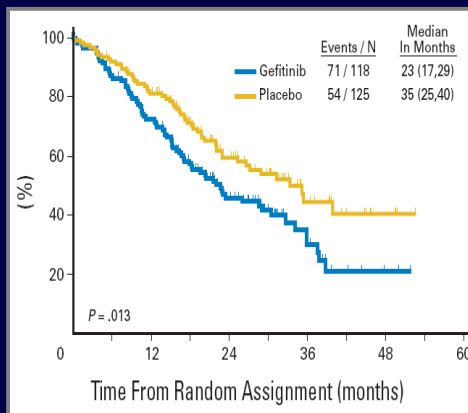
Kelly, J Clin Oncol 2008

SWOG 0023: Efficacy

Progression-Free Survival

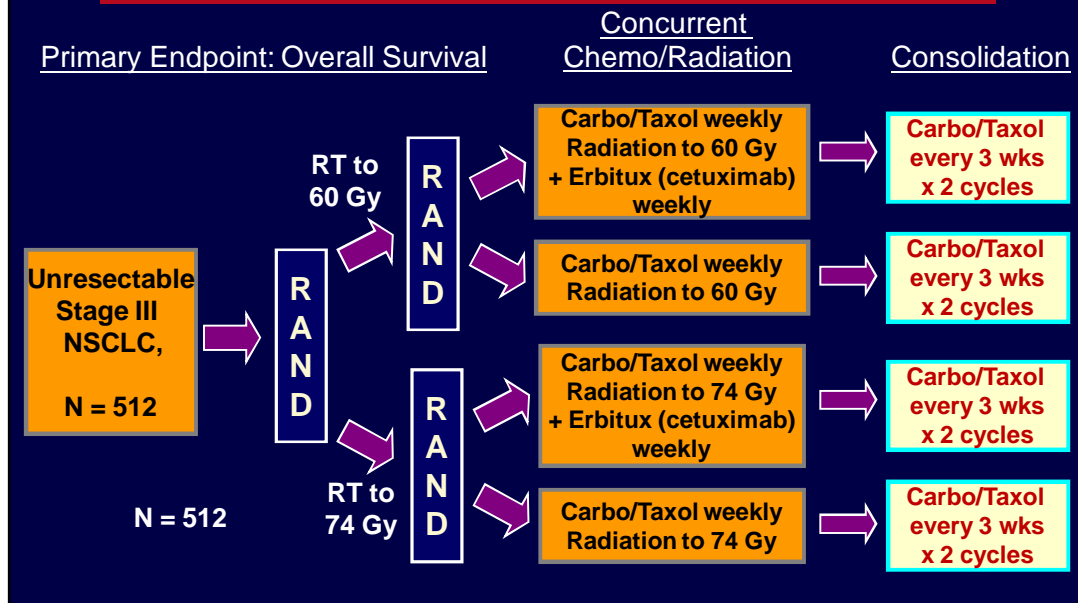


Overall Survival

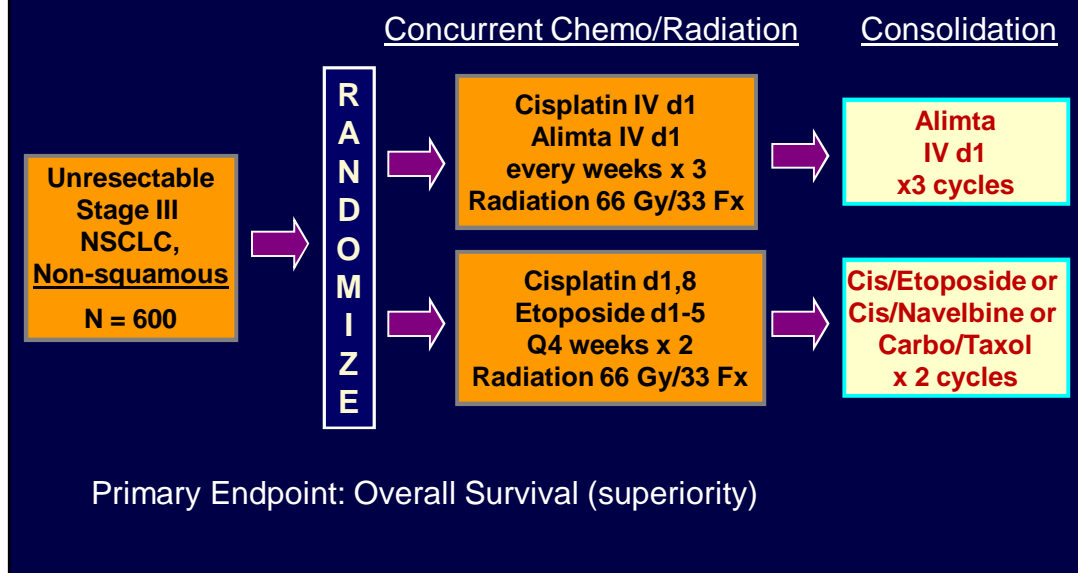


Kelly, J Clin Oncol 2008

RTOG/Intergroup Trial of Chemo/Radiation to Either 60 or 74 Gray, +/- Erbitux (Cetuximab)



Eli Lilly-Sponsored Phase III Trial in Stage III Unresectable NSCLC



Conclusions: Optimal Therapy for Stage III Unresectable NSCLC, Today

- Concurrent chemo/RT consistently superior to sequential chemo/RT
- Despite encouraging results from SWOG phase II S9504 trial, neither HOG trial nor SWOG 0023 trial demonstrates benefit with consolidation
- Maintenance EGFR inhibitor after chemo/RT and consolidation chemo was significantly detrimental in unselected population
- Current controversies/questions:
 - Is 6-7 weeks of plat-based CT with RT to 60-66 Gy is enough?!
 - We don't have compelling evidence that more chemo is better
 - Many oncologists still feel additional chemo is likely beneficial
 - New trials exploring alimta (non-squamous patients only) and erbitux, higher radiation doses, and other agents