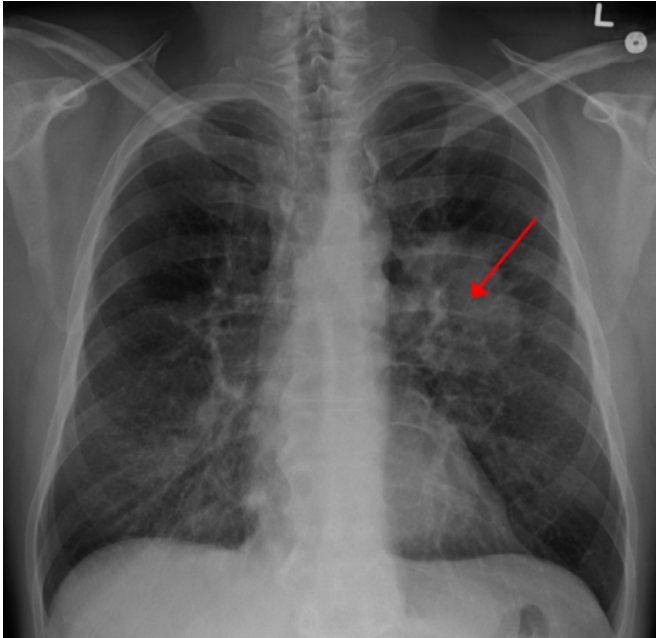


Estimating survival in patients with lung cancer, brain metastases

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Lung CA seen on CXR. Credit: [CC BY-SA 4.0](https://creativecommons.org/licenses/by-sa/4.0/) James Heilman, MD/Wikipedia

A new article published online by *JAMA Oncology* updates a tool to estimate survival in patients with lung cancer and brain metastases.

Lung cancer is a leading cause of death in the United States and around the world. A frequent and serious consequence of the disease is metastasis to the brain. New therapies mean survival from lung cancer continues to improve and patients are at increased risk of developing later complications of the disease, such as [brain metastases](#). Understanding prognosis for lung cancer is important, both for designing individualized care and future clinical trials.

In their article, Paul W. Sperduto, M.D., M.P.P., of Minneapolis Radiation Oncology and the University of Minnesota, Minneapolis, and coauthors update

the original Diagnosis-Specific Graded Prognostic Assessment (DS-GPA) with new genetic and molecular data to create a new index called the Lung-molGPA, which can be accessed electronically.

The updated Lung-molGPA was designed by analyzing data from 2,186 patients in a multi-institution database from 2006 through 2014 with non-small cell [lung cancer](#) and newly diagnosed brain metastases. Two new prognostic factors were used in the new Lung-molGPA: EGFR and ALK gene mutations. The authors reported overall median survival in the patient group was 12 months.

Study limitations include its design, which cannot establish causality.

"The updated Lung-molGPA incorporating gene alteration data into the DS-GPA is a user-friendly tool that may facilitate clinical decision-making and appropriate stratification of future clinical trials," the study concludes.

More information: *JAMA Oncol.* Published online November 17, 2016. [DOI: 10.1001/jamaoncol.2016.3834](https://doi.org/10.1001/jamaoncol.2016.3834)

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