

Osimertinib bests platinum-pemetrexed in T790M+ NSCLC

8 December 2016

4 to 7 in Vienna.



The researchers found that progression-free survival was of a significantly longer duration with osimertinib versus platinum therapy plus pemetrexed (10.1 versus 4.4 months; hazard ratio, 0.30). A significantly better objective response rate was seen for osimertinib than platinum therapy plus pemetrexed (71 versus 31 percent; odds ratio, 5.39). The median duration of progression-free survival was significantly longer with osimertinib among the 144 patients with metastases to the central nervous system (CNS) (8.5 versus 4.2 months; hazard ratio, 0.32).

"Osimertinib had significantly greater efficacy than platinum therapy plus pemetrexed in <u>patients</u> with T790M-positive advanced non-small-cell <u>lung cancer</u> (including those with CNS metastases), in whom disease had progressed during first-line EGFR-TKI therapy," the authors write.

The study was funded by AstraZeneca, the manufacturer of osimertinib.

More information: Abstract

Full Text

More Information

platinum-pemetrexed therapy in patients with T790M-positive advanced non-small-cell lung cancer whose disease has progressed during first-line epidermal growth factor receptor tyrosine kinase inhibitor (EGFR-TKI) treatment, according to a study published online Dec. 6 in the *New England Journal of Medicine*. The research was published to coincide with the International Association for the Study of Lung Cancer's 17th World Conference on Lung Cancer, held from Dec.

(HealthDay)—Osimertinib is more effective than

Tony S. Mok, M.D., from the Chinese University of Hong Kong, and colleagues conducted a phase 3 trial involving 419 patients with T790M-positive advanced non-small-cell lung cancer who had disease progression after first-line EGFR-TKI therapy. Participants were randomized in a 2:1 ratio to oral osimertinib or intravenous pemetrexed plus carboplatin or cisplatin every three weeks for up to six cycles.

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