

# Atezolizumab prolongs survival in NSCLC with PD-L1 expression

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occurred in 90.2 and 94.7 percent of patients in the atezolizumab and chemotherapy groups, respectively, among all those who could be evaluated for safety; grade 3 and 4 adverse events occurred in 30.1 and 52.5 percent, respectively. In subgroups with a high blood-based tumor mutational burden, overall and [progression-free survival](#) favored the atezolizumab group.

"We found that atezolizumab monotherapy resulted in longer overall survival than platinum-based combination chemotherapy among [patients](#) with previously untreated metastatic NSCLC with high expression of PD-L1," the authors write.

The study was funded by F. Hoffmann-La Roche/Genentech, the manufacturer of atezolizumab.

**More information:** [Abstract/Full Text \(subscription or payment may be required\)](#)

(HealthDay)—For patients with non-small cell lung cancer (NSCLC) with programmed death ligand 1 (PD-L1) expression, treatment with atezolizumab results in longer overall survival than chemotherapy, according to a study published in the Oct. 1 issue of the *New England Journal of Medicine*.

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Roy S. Herbst, M.D., Ph.D., from the Yale School of Medicine in New Haven, Connecticut, and colleagues conducted a randomized trial involving 572 patients with metastatic nonsquamous or squamous NSCLC who had not received chemotherapy and who had PD-L1 expression. Patients were randomly assigned to receive either atezolizumab or chemotherapy in a 1:1 ratio.

The researchers found that in the 205 patients with *EGFR* and *ALK* wild-type tumors who had the highest PD-L1 expression, [median overall survival](#) was longer in the atezolizumab group than the chemotherapy group (20.2 versus 13.1 months; hazard ratio for death, 0.59). Adverse events

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