# Tislelizumab plus chemo slows advanced squamous NSCLC

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(HealthDay)—For patients with advanced squamous non-small cell lung cancer (sq-NSCLC), adding tislelizumab in combination with chemotherapy is associated with improved progression-free survival (PFS), according to a study published online April 1 in *JAMA Oncology*.

Jie Wang, M.D., Ph.D., from the Chinese Academy of Medical Sciences and Peking Union Medical College in Beijing, and colleagues conducted an open-label phase 3 clinical trial at 46 sites in China between July 2018 and June 2019, enrolling patients with treatment-naive, histologically confirmed stage IIIB/IV sq-NSCLC. A total of 355 patients were randomly assigned in a 1:1:1 ratio and received treatment with one of the following regimens: tislelizumab plus paclitaxel and carboplatin (arm A); tislelizumab plus nab-paclitaxel and carboplatin (arm B); or paclitaxel and carboplatin (arm C).

The researchers found that independent review committee (IRC)-assessed PFS was significantly improved with tislelizumab plus chemotherapy (arms A and B) versus chemotherapy alone (arm C) (7.6 and 7.6 months versus 5.5 months; hazard ratios, 0.524 and 0.478 for A versus C and B versus C, respectively) after a median follow-up of 8.6 months. Arms A and B versus C had higher IRC-assessed objective response rate (ORR) and longer IRC-assessed duration of response (72.5 percent/8.2 months and 74.8 percent/8.6 months, respectively, versus 49.6 percent/4.2 months). There was no association noted between tumor programmed death ligand 1 expression and IRC-assessed PFS or ORR. Discontinuation of treatment due to adverse events occurred in 12.5, 29.7, and 15.4 percent of patients in arms A, B, and C, respectively.

"This represents an additional treatment option as first-line treatment for patients with sq-NSCLC," the authors write.

Several authors disclosed financial ties to BeiGene, which manufactures tislelizumab and funded the study.

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