

## Study shows different approach after progression in non-small cell lung cancer patients

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Right now, the best known treatment for patients with metastatic non-small cell lung cancer (NSCLC) with anaplastic lymphoma kinase gene rearrangements (ALK) or epidermal growth factor receptor mutations (EGFR) is crizotinib or EGFR tyrosine kinase inhibitors (TKIs), such as erlotinib, respectively. However, progression inevitably occurs. When it does, having no clear guidelines and/or indications, most patients are treated with chemotherapy. A new study published in the December 2012 issue of the International Association for the Study of Lung Cancer's (IASLC) *Journal of Thoracic Oncology*, shows that other approaches to overcome acquired resistance should be considered.

Researchers looked at <u>NSCLC</u> patients with histologically confirmed ALK rearrangements or EGFR mutations who were treated with crizotinib or <u>erlotinib</u> at the University of Colorado Cancer Center between May 2005 and December 2011.

Of the 51 patients whose cancer grew eventually on the targeted drugs, 25 were deemed suitable for local ablative therapy radiotherapy or surgery) to the site of progression, and then continued on the same drug. The use of this strategy prolonged the duration of disease control by the drug by 6.2 months, on top of the median of 9.8 months initial disease control. The benefit was most marked in patients who only experienced isolated growth in the brain – this group had another median 7.1 months of disease control before further growth either in the body and brain.



While the authors point out study limitations and the need for further research, they say their experience suggests that when NSCLC patients with EGFR mutations or ALK rearrangements "progress on erlotinib or crizotinib, respectively, and the progression occurs in only a limited number of sites (oligoprogressive disease) it may be reasonable to consider LAT to the sites of progression and continuation of the TKI."

## Provided by International Association for the Study of Lung Cancer

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