

Durvalumab extends survival in stage III non-small cell lung CA

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(HealthDay)—Durvalumab results in significantly longer overall survival

than placebo among patients with stage III, unresectable non-small cell lung cancer who did not have disease progression after concurrent chemoradiotherapy, according to a study published Sept. 25 in the *New England Journal of Medicine*.

Scott J. Antonia, M.D., Ph.D., from the H. Lee Moffitt Cancer Center and Research Institute in Tampa, Florida, and colleagues randomly assigned patients in a two-to-one ratio to receive durvalumab (n = 473) intravenously (10 mg per kilogram of body weight) or placebo (n = 236) every two weeks for up to 12 [months](#).

The researchers found that the 24-month overall survival rate was 66.3 percent in the durvalumab group versus 55.6 percent in the placebo group (two-sided P = 0.005). Overall survival was significantly prolonged with durvalumab versus placebo (stratified hazard ratio [HR] for death, 0.68; P = 0.0025). For progression-free survival, the median duration was 17.2 months in the durvalumab group and 5.6 months in the placebo group (stratified HR for [disease progression](#) or death, 0.51). The median time to death or distant metastasis was 28.3 months in the durvalumab group and 16.2 months in the [placebo](#) group (stratified HR, 0.53). Grade 3 or 4 adverse events of any cause occurred in 30.5 percent of the patients in the durvalumab group and 26.1 percent in the [placebo group](#). In addition, 15.4 percent and 9.8 percent of the patients, respectively, discontinued the trial regimen because of [adverse events](#).

"Adding durvalumab to the standard treatment has made a big impact for this group of patients," Antonia said in a statement. "It's allowing them to live longer and potentially increasing their chance for cure."

Several authors disclosed ties to pharmaceutical companies, including AstraZeneca, which supported the study.

More information: [Abstract/Full Text](#)

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