Documents

Auclin, E.[a b] , Benitez-Montanez, J.[c] , Tagliamento, M.[c d] , Parisi, F.[e] , Gorria, T.[f] , Garcia-Campelo, R.[g] , Dempsey, N.[h] , Pinato, D.J.[i] , Reyes, R.[f] , Albarrán-Artahona, V.[f] , Dall'Olio, F.[c] , Soldato, D.[c d] , Hendriks, L.[j] , Nana, F.A.[k] , Tonneau, M.[a] , Lopez-Castro, R.[l] , Nadal, E.[m] , Kazandjian, S.[n] , Muanza, T.[n] , Blanc-Durand, F.[c] , Fabre, E.[o] , Castro, N.[p] , Arasanz, H.[p] , Rochand, A.[b] , Besse, B.[c] , Routy, B.[a] , Mezquita, L.[f q r]

Second-line treatment outcomes after progression from first-line chemotherapy plus immunotherapy in patients with advanced non-small cell lung cancer

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Abstract
Introduction: Chemotherapy plus immunotherapy is the standard of care for patients with metastatic NSCLC. No study has evaluated the outcomes of second-line chemotherapy treatments after progression following first-line chemo-immunotherapy. Method: This multicenter retrospective study evaluated the efficacy of second line (2L) chemotherapies after progression under first-line (1L) chemo-immunotherapy, measured by overall survival (2L-OS) and progression free survival (2L-PFS). Results: A total of 124 patients were included. The mean age was 63.1 years, 30.6 % of the patients were female, 72.6 % had an adenocarcinoma and 43.5 % had a poor ECOG-performance status prior to 2L initiation. Sixty-four (52.0 %) patients were considered resistant to first line chemo-immunotherapy. (1L-PFS < 6 months). In 2L treatments, 57 (46.0 %) patients received taxane monotherapy, 25 (20.1 %) taxane plus anti-angiogenic, 12 (9.7 %) platinum-based chemotherapy and 30 (24.2 %) other chemotherapy. At a median follow-up of 8.3 months (95 %CI: 7.2–10.2), post initiation of 2L treatment, the median 2L-OS was 8.1 months (95 % CI: 6.4–12.7) and the median 2L-PFS was 2.9 months (95 %CI: 2.4–3.3). Overall, the 2L-objective response and 2L-disease control rates were 16.0 %, and 42.5 %, respectively. Taxane plus anti-angiogenic and platinum rechallenge achieved longest median 2L-OS: not reached (95 %CI: 5.8-NR) and 17.6 months (95 %CI 11.6-NR), respectively (p = 0.05). Patients resistant to the 1L treatment had inferior outcomes (2L-OS 5.1 months, 2L-PFS 2.3 months) compared with 1L responders (2L-OS 12.7 months, 2L-PFS 3.2 months). Conclusion: In this real-life cohort, 2L chemotherapy achieved modest activity following progression under chemo-immunotherapy. 1L-resistant patients remained a refractory population, highlighting a need for new 2L strategies.

Author Keywords
Chemo-immunotherapy; Non small cell lung cancer; Prognosis; Second line; Survival

Index Keywords
angiogenesis inhibitor, platinum, programmed death 1 ligand 1, taxane derivative, antineoplastic agent, taxoid; adult, advanced cancer, antineoplastic activity, Article, cancer chemotherapy, cancer growth, cancer patient, cancer survival, cohort analysis, disease control, ECOG Performance Status, female, first-line treatment, histology, human, immunotherapy, male, middle aged, monotherapy, non small cell lung cancer, overall survival, progression free survival, retrospective study, second-line treatment, treatment outcome, clinical trial, immunotherapy, lung tumor, multicenter study, non small cell lung cancer, pathology; Antineoplastic Combined Chemotherapy Protocols, Carcinoma, Non-Small-Cell Lung, Female, Humans, Immunotherapy, Lung Neoplasms, Male, Middle Aged, Progression-Free Survival, Retrospective Studies, Taxoids

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