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PACIFIC-R real-world study: Treatment duration and interim analysis of progression-free survival in unresectable stage III NSCLC patients treated with durvalumab after chemoradiotherapy

N. Girard[1], H.J.M. Smit[2], A. Sibille[3], F. McDonald[4], F. Mornex[5], M.C.C. Garassino[6], A.R. Filippi[7], S. Peters[8], J.K. Field[9], D.C. Christoph[10], R. Fietkau[11], V.D. Haakensen[12], J. Bar[13], C. Chouaid[14], V. Bray[15], S. Kao[16], W. Sawyer[17], A. Allen[18], M. Licour[19], P. Garrido[20]

[1] Institut du Thorax, Institut Curie & Montsouris, Paris, France, [2] Department of Pulmonary Diseases, Rijnstate Hospital, Arnhem, Netherlands, [3] Department of Pneumonology and Allergology, Centre Hospitalier Universitaire de Liège, Liège, Belgium, [4] Lung Unit, The Royal Marsden NHS Foundation Trust, London, UK, [5] Department of Radiation Oncology, Centre Hospitalier Universitaire de Lyon, Lyon, France, [6] Department of Hematology/Oncology, University of Chicago, Chicago, IL, USA, [7] Radiation Oncology Department, Fondazione IRCCS Policlinico San Matteo and University of Pavia, Pavia, Italy, [8] Department of Oncology, Centre Hospitalier Universitaire Vaudois (CHUV), Lausanne, Switzerland, [9] Roy Castle Lung Cancer Research Programme, Department of Molecular and Clinical Cancer Medicine, University of Liverpool, Liverpool, UK, [10] Department of Medical Oncology/Hematology, Evang. Kliniken Essen-Mitte, Evang. Huyssens-Stiftung Essen Huttrop, Essen, Germany, [11] Department of Radiation Oncology, Universitätsklinikums Erlangen, Erlangen, Germany, [12] Department of Oncology, Oslo University Hospital, Oslo, Norway, [13] Institute of Oncology, Sheba Medical Centre, Ramat Gan, Israel, [14] Service de Pneumologie, CHI Créteil, Créteil, France, [15] Department of Medical Oncology, Liverpool Hospital, Sydney, NSW, Australia, [16] Department of Medical Oncology, Chris O'Brien Lifehouse, Camperdown, NSW, Australia, [17] Biostatistics, AstraZeneca, Cambridge, UK, [18] Medical Affairs, Oncology, AstraZeneca, Gaithersburg, MD, USA, [19] Medical Affairs, Oncology, AstraZeneca, Courbevoie, France[20] Medical Oncology Department, Hospital Ramón y Cajal, Universidad de Alcalá, Madrid, Spain

Background

Durvalumab consolidation therapy for up to 12 months (PACIFIC regimen) is now standard of care in patients (pts) with unresectable Stage III non-small-cell lung cancer (NSCLC) without disease progression after platinum-based chemoradiotherapy (CRT). PACIFIC-R assesses the effectiveness of durvalumab in this pt population in a real-life setting.

Methods

PACIFIC-R (NCT03798535) is a large international, observational study in pts who received ≥1 dose of durvalumab (10 mg/kg Q2W) as part of an AstraZeneca-initiated expanded access program. Pts had completed platinum-based chemotherapy concurrent or sequential to radiotherapy within the previous 12 weeks without evidence of disease progression.

Results

Outcomes were assessed in the full analysis set (N=1155). Median time to durvalumab initiation after the end of RT was 52 days. Overall median durvalumab treatment duration was 337 days (11 months); 232 (20.1%) pts received treatment for >12 months (50 [4.3%] for >14 months). Pts received a median of 22 infusions. Reasons for/median time to treatment discontinuation included completion of treatment (47.6%/11.8 months; investigator decision per country protocol), disease progression (25.8%/5.1 months) and adverse event (AE; 17.5%/2.8 months). Pneumonitis was the most common AE leading to discontinuation (temporary: 5.1%; permanent: 8.7%). 214 (18.5%) pts had any-grade pneumonitis and/or interstitial lung disease (median time from durvalumab start: 74 days [2.4 months]). Of these, most events were moderate (8.8%) in severity; 2 (0.2%) and 1 (0.1%) pts had a life-threatening or fatal event, respectively. Interim analysis (51.8% of events) showed a median real-world PFS (rwPFS) of 22.5 months (95% CI, 19.7–25.5). rwPFS by baseline PD-L1 status and prior CRT will be included in the final presentation.

Conclusions

These results demonstrate the effectiveness of consolidation durvalumab after CRT in a real-world cohort of pts with unresectable Stage III NSCLC; pneumonitis events were mostly moderate in severity. Additional data from an externally sponsored study with similar enrolment criteria in Spain will be included in the final presentation.

Clinical trial identification

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Sibille: Financial Interests, Personal, Advisory Role: AstraZeneca; Financial Interests, Personal, Advisory Role: Boehringer Ingelheim; Financial Interests, Personal, Advisory Role: Bristol Myers Squibb; Financial Interests, Personal, Advisory Role: MSD; Financial Interests, Personal, Advisory Role: Roche; Financial Interests, Personal, Advisory Role: Takeda; Financial Interests, Personal, Other, Travel grant: Bristol Myers Squibb; Financial Interests, Personal, Other, Travel grant: Boehringer Ingelheim; Financial Interests, Personal, Other, Travel grant: MSD; Financial Interests, Personal, Other, Travel grant: Roche. F. McDonald: Financial Interests, Personal, Other, Honoraria and consulting fees: AstraZeneca; Financial Interests, Personal, Other, Honoraria: Elekta; Financial Interests, Personal, Other, Consulting fees: Accuray; Financial Interests, Personal, Funding, Grant funding: MSD; Financial Interests, Personal, Other, Consulting fees: AstraZeneca. M.C.C. Garassino: Financial Interests, Personal, Advisory Role: AstraZeneca; Financial Interests, Personal, Advisory Role: MSD; Financial Interests, Personal, Advisory Role: BMS; Financial Interests, Personal, Advisory Role: Celgene; Financial Interests, Personal, Advisory Role: Novartis; Financial Interests, Personal, Advisory Role: Pfizer; Financial Interests, Personal, Advisory Role: Roche; Financial Interests, Personal, Advisory Role: Takeda; Financial Interests, Personal, Advisory Role: Seattle Genetics; Financial Interests, Personal, Advisory Role: Mirati; Financial Interests, Personal, Advisory Role: Daiichi Sankyo; Financial Interests, Personal, Advisory Role: Bayer; Financial Interests, Personal, Advisory Role: GlaxoSmithKline; Financial Interests, Institutional, Other, Honoraria: Sanofi-Aventis; Financial Interests, Personal, Advisory Role: Blueprint Medicine. A.R. Filippi: Financial Interests, Personal, Other, Scientific consultancy: AstraZeneca; Financial Interests, Personal, Advisory Board: AstraZeneca; Financial Interests, Personal, Speaker's Bureau: Roche; Financial Interests, Personal, Speaker's Bureau: Ipsen; Financial Interests, Personal, Speaker's Bureau: MSD. S. Peters: Consultation / Advisory role: AbbVie, Amgen, AstraZeneca, Bayer, Beigene, Biocartis, Bio Invent, Blueprint Medicines, Boehringer Ingelheim, Bristol Myers Squibb, Clovis, Daiichi Sankyo, Debiopharm, Eli Lilly, Elsevier, F. Hoffmann-La Roche/Genentech, Foundation Medicine, Illumina, Incyte, IQVIA, Janssen, Medscape, Merck Sharp & Dohme, Merck Serono, Merrimack, Mirati, Novartis, PharmaMar, Phosplatin Therapeutics, Pfizer, Regeneron, Sanofi, Seattle Genetics, Takeda, Vaccibody Talk in a company's organized public event: AstraZeneca, Boehringer Ingelheim, Bristol Myers Squibb, e-cancer, Eli Lilly, F. 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Christoph: Financial Interests, Personal, Invited Speaker: AstraZeneca; Financial Interests, Personal, Invited Speaker: Bayer; Financial Interests, Personal, Invited Speaker: Boehringer Ingelheim; Financial Interests, Personal, Invited Speaker: Bristol Myers Squibb; Financial Interests, Personal, Invited Speaker: Chugai; Financial Interests, Personal, Invited Speaker: MSD; Financial Interests, Personal, Invited Speaker: Novartis; Financial Interests, Personal, Invited Speaker: Pfizer; Financial Interests, Personal, Invited Speaker: Roche; Financial Interests, Personal, Invited Speaker: Sanofi; Financial Interests, Personal, Invited Speaker: Takeda; Financial Interests, Personal, Writing Engagements: AstraZeneca; Financial Interests, Personal, Expert Testimony: AstraZeneca; Financial Interests, Personal, Expert Testimony: Bayer; Financial Interests, Personal, Expert Testimony: Boehringer Ingelheim; Financial Interests, Personal, Expert Testimony: Bristol Myers Squibb; Financial Interests, Personal, Expert Testimony: Chugai; Financial Interests, Personal, Expert Testimony: MSD; Financial Interests, Personal, Expert Testimony: Novartis; Financial Interests, Personal, Expert Testimony: Pfizer; Financial Interests, Personal, Expert Testimony: Roche; Financial Interests, Personal, Expert Testimony: Sanofi; Financial Interests, Personal, Expert Testimony: Takeda; Financial Interests, Personal, Speaker's Bureau: AstraZeneca; Financial Interests, Personal, Speaker's Bureau: Bayer; Financial Interests, Personal, Speaker's Bureau: Boehringer Ingelheim; Financial Interests, Personal, Speaker's Bureau: Bristol Myers Squibb; Financial Interests, Personal, Speaker's Bureau: Chugai; Financial Interests, Personal, Speaker's Bureau: MSD; Financial Interests, Personal, Speaker's Bureau: Novartis; Financial Interests, Personal, Speaker's Bureau: Pfizer;

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R. Fietkau: Financial Interests, Personal, Other, Grants and personal fees: AstraZeneca; Financial Interests, Personal, Other, Grants and personal fees: Merck Serono; Financial Interests, Personal, Other, Grants and personal fees: MSD; Financial Interests, Personal, Other, Grants and personal fees: Novocure; Financial Interests, Personal, Other, Personal fees: Brainlab; Financial Interests, Personal, Other, Personal fees: Bristol Myers Squibb; Financial Interests, Personal, Other, Personal fees: Fresenius Kabi. C. Chouaid: Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: AstraZeneca; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Boehringer Ingelheim; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: GlaxoSmithKline; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Roche; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Sanofi-Aventis; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Bristol Myers Squibb; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: MSD; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Lilly; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Novartis; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Pfizer; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Janssen; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Takeda; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Bayer; Financial Interests, Personal, Other, Attending Scientific Meetings, Speaking, Organizing Research, or Consulting: Amgen. S. Kao: Financial Interests, Personal, Advisory Board: Pfizer; Financial Interests, Personal, Advisory Board: Roche; Financial Interests, Personal, Advisory Board: AstraZeneca; Financial Interests, Personal, Advisory Board: Takeda; Financial Interests, Personal, Advisory Board: Boehringer Ingelheim; Financial Interests, Personal, Advisory Board: MSD; Financial Interests, Personal, Advisory Board: Bristol Myers Squibb. W. Sawyer: Financial Interests, Personal, Full or part-time Employment: AstraZeneca. A. Allen: Financial Interests, Personal, Full or part-time Employment: AstraZeneca; Financial Interests, Personal, Stocks/Shares: AstraZeneca. M. Licour: Financial Interests, Personal, Full or part-time Employment: AstraZeneca; Financial Interests, Personal, Stocks/Shares: AstraZeneca. P. Garrido: Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: AstraZeneca; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: MSD; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Roche; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Bristol Myers Squibb; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Boehringer Ingelheim; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Pfizer; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: AbbVie; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Novartis; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Lilly; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Janssen; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Blueprint Medicines; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Takeda; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Gilead; Financial Interests, Personal, Other, Received personal fees for advisory role and/or talks: Rovi. 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