



IASLC

INTERNATIONAL ASSOCIATION FOR THE STUDY OF LUNG CANCER

IASLC 19th World Conference on Lung Cancer

September 23–26, 2018 Toronto, Canada
#WCLC2018

WWW.IASLC.ORG

Contacts:

Lisa Rivero
Vice President
lrivero@jpa.com | +1 617-657-1305

Becky Bunn, MSc
Public Relations Manager
Becky.Bunn@IASLC.org | +1 720-254-9509

LUME-Meso Study Shows Nintedanib Plus Pemetrexed/Cisplatin Does Not Improve Progression-Free or Overall Survival in Patients With Malignant Pleural Mesothelioma of Epithelioid Subtype

Toronto, Canada – September 25, 2018 – Findings from a recent study demonstrate that triple angiokinase inhibitor nintedanib combined with standard-of-care pemetrexed/cisplatin does not impact progression-free survival (PFS) and overall survival (OS) for unresectable malignant pleural mesothelioma (MPM) patients with epithelioid histology. Giorgio V. Scagliotti, M.D., Ph.D., of the University of Turin’s Department of Oncology and S. Luigi Hospital, and president of the International Association for the Study of Lung Cancer (IASLC), presented these findings today at the IASLC’s 19th World Conference on Lung Cancer (WCLC) in Toronto, Canada.

MPM is a rare but aggressive disease and if left untreated, median survival is six to nine months. Standard first-line treatment of pemetrexed/cisplatin typically yields a median OS of approximately one year for patients with unresectable MPM.¹ When Phase II data of LUME-Meso showed patients with epithelioid histology derived the greatest benefit from nintedanib added to pemetrexed/cisplatin in terms of improved PFS versus placebo and a trend towards improved OS, the Phase III protocol of LUME-Meso was amended to focus solely on this subgroup.

Phase III of the global, randomized, double-blind, placebo-controlled study evaluated 458 patients with confirmed MPM of epithelioid subtype with no previous systemic chemotherapy and an Eastern Cooperative Oncology Group performance status (ECOG PS) between zero and one. Patients were randomized 1:1 to receive combination treatment with up to six cycles of pemetrexed (500 mg/m²)/cisplatin (75 mg/m²) on Day 1, plus nintedanib (200 mg bid) or matched placebo on Day 2 through Day 21. After completing the combination treatment phase, patients with no disease progression received continued maintenance therapy with nintedanib or placebo.

The results of the study did not show any statistically significant and clinically meaningful improvements in the primary endpoint—PFS—or key secondary points. These results, which differed from the previously published Phase II data, do not support the use of nintedanib in combination with pemetrexed/cisplatin for patients with MPM of epithelioid subtype.

“Unfortunately, the Phase III results of LUME-Meso did not confirm that nintedanib in combination with pemetrexed/cisplatin prolongs patients’ lives,” said Dr. Scagliotti. “However, the trial reaffirms the need for solid confirmatory studies that are adequately sized, to challenge the standard of care in advanced malignant mesothelioma.”



About the WCLC

The World Conference on Lung Cancer (WCLC) is the world's largest meeting dedicated solely to lung cancer and other thoracic malignancies, attracting over 7,000 researchers, physicians and specialists from more than 100 countries. The conference will cover a wide range of disciplines and unveil research studies and clinical trial results. For more information, visit <http://wclc2018.iaslc.org/>. Follow the conference on social media with: #WCLC2018.

About the IASLC

The International Association for the Study of Lung Cancer (IASLC) is the only global organization dedicated solely to the study of lung cancer and other thoracic malignancies. Founded in 1974, the association's membership includes more than 7,500 lung cancer specialists across all disciplines in over 100 countries, forming a global network working together to conquer lung and thoracic cancers worldwide. The association also publishes the *Journal of Thoracic Oncology*, the primary educational and informational publication for topics relevant to the prevention, detection, diagnosis and treatment of all thoracic malignancies. Visit www.iaslc.org for more information. You can also follow the IASLC on [Twitter](#), [Facebook](#), [LinkedIn](#) and [Instagram](#).

###

¹ [Clin Lung Cancer](#). 2017 Sep;18(5):589-593. doi: 10.1016/j.clc.2017.03.010. Epub 2017 Mar 22.