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**World Conference on Lung Cancer Tuesday Press Conference:  
Improving the Cure Rate for Stage III Lung Cancer**

*Toronto, Canada* – September 25, 2018 – Today’s press conference at the International Association for the Study of Lung Cancer’s (IASLC’s) 19th World Conference on Lung Cancer (WCLC) featured some of the year’s most innovative research in both small cell and non-small cell lung cancer. Frances Shepherd, M.D., FRCPC, WCLC honorary chair, medical oncologist at Princess Margaret Cancer Centre and former president of the IASLC (2005-2007), opened with the practice-changing importance of data shared this morning at the 2018 Presidential Symposium. Dr. Shepherd continued with background on the current inoperability and low cure rate of Stage III lung cancers, which comprise 1/3 of all lung cancers. Ground breaking data presented during today’s symposium demonstrated an advancement in disease treatment not seen for many years.

**PACIFIC study shows durvalumab improves overall survival in patients with unresectable non-small cell lung cancer without progression after chemoradiotherapy**

Recent findings from the PACIFIC trial found that durvalumab demonstrates statistically significant and clinically meaningful improvement in overall survival (OS) compared with placebo for patients with Stage III, unresectable non-small cell lung cancer (NSCLC) who have not progressed following chemoradiotherapy (CRT).

According to Scott J. Antonia, M.D., Ph.D., department chair of the Thoracic Oncology Department at the H. Lee Moffitt Cancer Center and Research Institute in Tampa and Professor of Oncologic Sciences at the University of South Florida College of Medicine, these results are significant, as PACIFIC is the first trial to show a survival advantage following CRT in this patient population.

“Results of PACIFIC provide compelling evidence for the unprecedented benefit of durvalumab treatment as the standard of care in this patient population,” said Dr. Antonia. “Durvalumab offers the first major advance in this disease setting in many years, offering new hope to patients with Stage III, unresectable NSCLC without progression after CRT.”

Read the full press release [here](#).

**Interim analysis of ALTA-1L demonstrates potential for brigatinib as first-line treatment option for ALK-positive non-small cell lung cancer**

An interim analysis of the ALTA-1L study provided the first comparative data on the efficacy and safety of brigatinib versus crizotinib, the first-line standard of care comparator, in patients with anaplastic lymphoma kinase (ALK) inhibitor-naïve ALK+ non-small cell lung cancer (NSCLC).

Lead investigator Ross Camidge, M.D., Ph.D., Joyce Zeff Chair in Lung Cancer Research at the University of Colorado Cancer Center, and team found one-year post-treatment, 67 percent of patients treated with brigatinib remained progression-free compared to 43 percent of those treated with crizotinib, and the risk of progression or death was reduced by 51 percent with brigatinib compared to crizotinib.

“Interim data shows brigatinib is set to become a first-line treatment option for ALK+ lung cancer,” said Dr. Camidge. “Even with only nine to 11 months of follow-up, the efficacy of brigatinib is clearly superior to crizotinib.”

Read the full press release [here](#).

### **NELSON study shows CT screening for nodule volume management reduces lung cancer mortality by over fifty percent**

Recent findings from Europe’s largest running lung cancer screening trial, the NELSON study, demonstrate that the use of computed tomography (CT) screening with a unique nodule management protocol led to a 26 percent reduction in deaths among lung cancer patients at eight years of study follow-up.

Harry J. De Koning, M.D., Ph.D., professor of Public Health & Screening Evaluation, Erasmus Medical Center, Rotterdam, Netherlands, and team initiated the study to assess the effect of CT screening, in combination with increasing screening intervals, on lung cancer mortality.

“These findings show that CT screenings are an effective way to assess and manage nodule volume in lung cancer patients, often leading to detection of suspicious nodules and subsequent surgical intervention, and can positively impact survival rates,” said Dr. De Koning. “These results can be used to inform and direct ongoing medical follow up and intervention for lung cancer patients.”

Read the full press release [here](#).

### **Atezolizumab improves outcomes for small cell lung cancer when added to standard-of-care treatment**

The IMpower133 study successfully met its co-primary endpoints, demonstrating that adding 1L atezolizumab to standard carboplatin and etoposide prolonged overall survival (OS) and progression-free survival (PFS) in patients with extensive-stage small cell lung cancer (ES-SCLC), as compared to carboplatin and etoposide treatment alone.

According to presenter Stephen V. Liu, M.D., associate professor of medicine at Georgetown University and a member of the trial steering committee, these findings have the potential to change the current treatment landscape for ES-SCLC.

“The standard of care for extensive-stage small cell lung cancer has been unchanged for decades, which has contributed to unacceptably poor outcomes,” said Dr. Liu. “This is the first study in 30 years to show a significant improvement in survival in the first line treatment of this highly lethal disease. This is an exciting time in oncology, and we are thrilled to finally see real progress in the SCLC space.”

Read the full press release [here](#).

### **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**

Findings from the LUME-Meso 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.

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, Giorgio V. Scagliotti, M.D., Ph.D., of the University of Turin's Department of Oncology and S. Luigi Hospital, president of the International Association for the Study of Lung Cancer (IASLC), and team amended the Phase III protocol to focus solely on this subgroup.

“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, adequately sized, to challenge the standard of care in advanced malignant mesothelioma.”

Read the full press release [here](#).

Livestreams of the daily press conferences are available [here](#).

### **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](http://www.iaslc.org) for more information. You can also follow the IASLC on [Twitter](#), [Facebook](#), [LinkedIn](#) and [Instagram](#).

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