PACIFIC Study Shows Quality of Life is Maintained in Non-Small Cell Lung Cancer Patients Treated with Durvalumab after Concurrent Chemoradiation

Yokohama, Japan – October 17, 2017 – The use of the immunotherapy drug durvalumab after concurrent chemoradiation in locally advanced, unresectable non-small cell lung cancer (NSCLC) patients was shown to improve progression-free survival (PFS) while upholding quality of life measures. Dr. Rina Hui of the University of Sydney and Westmead Hospital in Australia presented these findings today at the International Association for the Study of Lung Cancer (IASLC) 18th World Conference on Lung Cancer (WCLC) in Yokohama, Japan.

While previous studies have demonstrated durvalumab’s clinical efficacy and tolerability profile, Dr. Hui and her team recognized the need to study patients’ accounts of the treatment. This study is the first randomized, global, blinded assessment of patient-reported outcomes with consolidation durvalumab treatment after chemoradiation in locally advanced NSCLC. The researchers viewed patient-reported quality of life data as imperative to better informing the decision of whether or not to administer durvalumab in this patient population.

The researchers randomized NSCLC patients who had received standard concurrent chemoradiation, but had not experienced disease progression, into two groups. The intervention group was treated with durvalumab for up to twelve months, while the control group was treated with placebo. Participants completed questionnaires at baseline and at different points throughout the study. To measure changes among the participants, the researchers analyzed variations from the baseline, time to deterioration and odds of improvement.

The results of the study showed that patients treated with durvalumab did not experience worsening of symptoms, function or health-related quality of life, which was similar to patients who received placebo. These results strongly support the use of durvalumab in this disease setting, as the health benefits are significant and the treatment option is tolerable. Additionally, these outcomes may prompt consideration of this intervention as a new standard of care among this population.

“As a clinician, this study is important because up until now, the 5-year survival rate of patients with locally advanced NSCLC is only 15%,” said Dr. Hui. “This study offers hope for improved patient outcomes without compromising quality of life by the treatment.”
**About the WCLC**
The World Conference on Lung Cancer (WCLC) is the world’s largest meeting dedicated to lung cancer and other thoracic malignancies, attracting over 6,000 researchers, physicians and specialists from more than 100 countries. The goal is to disseminate the latest scientific achievements; increase awareness, collaboration and understanding of lung cancer; and to help participants implement the latest developments across the globe. Organized under the theme of “Synergy to Conquer Lung Cancer,” the conference will cover a wide range of disciplines and unveil several research studies and clinical trial results. For more information, visit [wclc2017.iaslc.org](http://wclc2017.iaslc.org).

**About the IASLC**
The International Association for the Study of Lung Cancer (IASLC) is the only global organization dedicated to the study of lung cancer and other thoracic malignancies. Founded in 1974, the association’s membership includes more than 6,500 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.

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