Immunotherapy Boosts Lung Cancer Survival

Longer-term follow-up shows improved overall survival with Keytruda or Opdivo.

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Long-term data show that PD-1 checkpoint inhibitors improve survival for people with advanced non-small-cell lung cancer (NSCLC), including those with the lowest PD-L1 levels.

Martin Reck, MD, PhD, of Lung Clinic Grosshansdorf in Germany, presented updated results from a Phase III trial comparing Keytruda (pembrolizumab) versus chemotherapy as a first treatment for people with advanced NSCLC with high PD-L1 levels (50% or greater).

Keytruda provided an overall survival (OS) benefit over chemotherapy, with median survival durations of 26 versus 14 months, respectively. At three years, the survival rates were 44% and 25%.

While these results are good news for people with high PD-1 levels, those account for only around 10% of advanced lung cancer patients.

But people with undetectable PD-L1 levels can benefit too. An analysis of more than 400 patients with PD-L1 negative tumors in three first-line treatment trials showed that Keytruda plus chemotherapy reduced the risk of death by 44% compared with chemo alone.

Immunotherapy also offers a survival advantage for previously treated people, according to an analysis of patients with advanced NSCLC in two Phase III trials who received Opdivo (nivolumab) or chemotherapy.

After five years, 13% of Opdivo recipients were still alive, compared with just 3% of solo chemotherapy recipients—about a fivefold improvement. What's more, this advantage was seen across all patient subgroups, including those with PD-L1 negative tumors.

Although these drugs work only for a minority of people, those who do respond live considerably longer than expected with older treatments, which have a five-year survival rate of less than 5%.

Immunotherapy "has completely changed the management of lung cancer," turning it into "a chronic disease with good quality of life" for some individuals, says Reck.

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