

Clinical trials of immune checkpoint inhibition for lung cancer in previously untreated patients

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1 PD-L1 inhibitors

Trial	Treatments	Patients	Trials design and methods
atezolizumab + Paclitaxel + Carboplatin vs Bevacizumab + Paclitaxel + Carboplatin			
IMpower 150 <i>ongoing</i> [NCT02366143] n=NA follow-up:	-	chemotherapy-naive patients with Stage IV non-squamous non-small cell lung cancer	open label
atezolizumab vs Gemcitabine + (Cisplatin or Carboplatin)			
GO29432 <i>ongoing</i> [NCT02409355] n=NA follow-up:	-	patients with chemotherapy-naive, Stage IV squamous non-small cell lung cancer	open label
atezolizumab vs Pemetrexed + (Carboplatin or Cisplatin)			
IMpower 110 <i>ongoing</i> [NCT02409342] n=NA follow-up:	Atezolizumab (MPDL3280A) versus dual regimen of carboplatin or cisplatin plus pemetrexed	chemotherapy-naive patients with Stage IV NSCLC	open label
avelumab vs platinum-based doublet			
JAVELIN Lung 100 <i>ongoing</i> [NCT02576574] n=NA follow-up:	avelumab versus platinum-based doublet	a First-line Treatment of Recurrent or Stage IV non-small cell lung cancer with Programmed death ligand 1+ tumors	
durvalumab (MEDI4736) tremelimumab vs Standard of Care			
NEPTUNE <i>ongoing</i> [NCT02542293] n=NA follow-up:	MEDI4736 + tremelimumab versus platinum-based SoC chemotherapy	the first-line treatment of patients with epidermal growth factor receptor (EGFR) and anaplastic lymphoma kinase (ALK) wild-type advanced or metastatic NSCLC	

References

IMpower 150, 0:

GO29432, 0:

IMpower 110, 0:

JAVELIN Lung 100, :

NEPTUNE, :

2 PD1 inhibitors

Trial	Treatments	Patients	Trials design and methods
nivolumab vs Standard of Care			
CheckMate 026 , 2016 [NCT02041533] n=541 follow-up:	Nivolumab solution for Injection 3 mg/kg Intravenous every 2 weeks until disease progression versus Investigator's Choice Chemotherapy administered in 3-week cycles up to a maximum of 6 cycles of Intravenous injection until disease progression	patients with previously untreated advanced non-small cell lung cancer (NSCLC) whose tumors expressed PD-L1 at >5% (>1% ???). Patients with EGFR activating mutations and ALK translocations, which are sensitive to targeted therapy, were excluded.	Parallel groups open design
pembrolizumab vs Standard of Care			
Keynote 024 , 2015 [NCT02142738] n=154/151 follow-up: 11.2 months (median)	Pembrolizumab (200 mg, administered as intravenous (IV) infusion on Day 1 of each 21-day cycle for up to 35 cycles or until documented PD versus standard of care (SOC) platinum-based chemotherapies	previously untreated advanced NSCLC with PD-L1 expression on at least 50% of tumor cells and no sensitizing mutation of the epidermal growth factor receptor gene or translocation of the anaplastic lymphoma kinase gene	Parallel groups open label

References

CheckMate 026, 2016:

Carbone DP, Reck M, Paz-Ares L, Creelan B, Horn L, Steins M, Felip E, van den Heuvel MM, Ciuleanu TE, Badin F, Ready N, Hiltermann TJN, Nair S, Juergens R, Peters S, Minenza E, Wrangle JM, Rodriguez-Abreu D, Borghaei H, Blumenschein GR Jr, Villaruz LC, Ha First-Line Nivolumab in Stage IV or Recurrent Non-Small-Cell Lung Cancer. N Engl J Med 2017;376:2415-2426 [28636851]

Carbone DP, Reck M, Paz-Ares L, Creelan B, Horn L, Steins M, Felip E, van den Heuvel MM, Ciuleanu TE, Badin F, Ready N, Hiltermann TJN, Nair S, Juerge First-Line Nivolumab in Stage IV or Recurrent Non-Small-Cell Lung Cancer. N. Engl. J. Med. 2017; 376:2415-2426 [28636851]

Keynote 024, 2015:

Reck M, Rodriguez-Abreu D, Robinson AG, Hui R, Csozsi T, Flp A, Gottfried M, Peled N, Tafreshi A, Cuffe S, O'Brien M, Rao S, Hotta K, Leiby MA, Lubiniecki GM, Shentu Y, Rangwala R, Brahmer JR Pembrolizumab versus Chemotherapy for PD-L1-Positive Non-Small-Cell Lung Cancer. N Engl J Med 2016 Oct 8;: [27718847] 10.1056/NEJMoa1606774

3 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and meta-analysis in the field of all major heart and vessels diseases.

The TrialResults-center database provides a unique view of the treatment efficacy based on all data provided directly from clinical trial results, offering a valuable alternative to personal bibliographic search, published meta-analysis, etc. Furthermore, it would allow comparing easily the various concurrent therapeutic for the same clinical condition.

Rigorous meta-analysis method is used to populate TrialResults-center: widespread search of published and non published trials, study selection using pre-specified criteria, data extraction using standard form.

TrialResults-center is continually updated on a weekly basis. We continually search all new results (whatever their publication channel) and these news results are immediately added to the database with a maximum of 1 week.

TrialResults-center is non-profit and self-funded.