

# Non-Small Cell Lung Cancer: KOL Insight

https://marketpublishers.com/r/NC4ED9311A4EN.html

Date: June 2015

Pages: 0

Price: US\$ 7,495.00 (Single User License)

ID: NC4ED9311A4EN

### **Abstracts**

Non-Small Cell Lung Cancer: KOL Insight offers detailed expert opinion on the continuing evolution of the treatment paradigm for EGFR/ALK positive and negative NSCLC, and the potential for targeting KRAS-mutation positive disease.

The treatment of advanced NSCLC has seen substantial advances in the past decade and this progress is set to continue, propelled by the development of checkpoint inhibitors and new targeted therapies. The second-line space is set to undergo a paradigm shift driven by the emergence of the PD-1 and PD-L1 inhibitors as well as new targeted agents. In the longer term the first-line setting will diversify as new products, including checkpoint inhibitors, vie for approval in this lucrative space.

Non-Small Cell Lung Cancer: KOL Insight presents a comprehensive qualitative review of targeted therapies in the market for advanced NSCLC with an emphasis on current and future treatment pathways.

#### Research Objectives

Which drugs constitute the first- and subsequent-line treatments of choice for patients in the following segments: EGFRm+, ALK translocation positive and EGFR mutation/ALK translocation negative? Which product attributes contribute to this preference?

How BMS's Opdivo, Astellas'/Roche's Tarceva, AstraZeneca's Iressa, Boehringer Ingelheim's Gilotrif and Vargatef, Pfizer's Xalkori, Novartis' Zykadia, Roche's Avastin and Eli Lilly's Cyramza are perceived by the medical community in terms of efficacy, tolerability, ease of administration, and other product attributes, and how they compare with other current and pipeline treatment options.



Which recently completed or ongoing clinical trials (e.g. CheckMate-057, CheckMate-026, CheckMate-227, KEYNOTE-021, OAK, PACIFIC, LUX-Lung 7, AURA3, TIGER-1, ALEX, AvaALL, SELECT-1 and HER3-Lung) have the greatest potential to impact prescribing trends, and how will the results impact the future treatment of NSCLC.

What do pipeline targeted therapies for NSCLC need to show in order to become the treatment of choice in a specific patient segment and line of therapy and is it likely the product will meet these requirements?

How the use of each current and pipeline targeted NSCLC product will change in the future in terms of patient segment, line of therapy and preference.

What pipeline products for NSCLC will need to show in terms of efficacy and tolerability endpoints to compete effectively, and what the likelihood is that the pipeline products will achieve those endpoints.

Which pipeline products are the most promising and how they will impact current players in the market (e.g. Merck & Co.'s Keytruda, Roche's atezolizumab and alectinib, AstraZeneca's durvalumab and mereletinib, Celgene's/ Clovis' rociletinib, BMS's Yervoy, Array's/AstraZeneca's selumetinib and AbbVie's veliparib).

How the treatment landscape for NSCLC will evolve in the future for each patient segment and line of therapy.

**Key Opinion Leaders** 

**KOLs from North America** 

Paul Bunn, Distinguished Professor, Division of Medical Oncology, University of Colorado Edward Garon, Associate Professor, Division of Hematology and Oncology, David Geffen School of Medicine, UCLA, Los Angeles, California

Giuseppe Giaccone, Associate Director for Clinical Research, Lombardi Comprehensive Cancer Center (LCCC) at Georgetown University, Washington, DC



Leora Horn, Assistant Professor of Medicine (Haematology/Oncology) and Clinical Director of the Thoracic Oncology Program at Vanderbilt-Ingram Cancer Center, Tennessee

Joan Shiller, Deputy Director of the Simmons Comprehensive Cancer Center and Division Director of Hematology/Oncology, University of Texas-Southwestern Medical Center, Texas

Mark Socinski, Professor of Medicine and Thoracic Surgery, University of Pittsburgh School of Medicine, Pennsylvania

## **KOLs from Europe**

Ahmed Awada, Professor and Head of the Medical Oncology Clinic, Jules Bordet Institute, Brussels & Free Universities, Brussels, Belgium

Federico Cappuzzo, Professor and Director of Medical Oncology, Ospedale Civile di Livorno, Istituto Toscano Tumori-Ospedale Civile, Livorno, Italy

Solange Peters, Head of Thoracic Malignancies Program, Department of Oncology, University of Lausanne, Switzerland

David Planchard, Associate Professor, Department of Medical Oncology (Thoracic Oncology Group), Gustave-Roussy, France

Nick Thatcher, previously held the post of Professor of Medical Oncology at the Christie Hospital NHS Trust in Manchester, England

Anonymous KOL, Germany

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