

Non-Small Cell Lung Cancer: Update Bulletin [Jan 2016]

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Abstracts

Gain new KOL insights on the latest events that have the potential to shape the targeted treatment of Non-Small Cell Lung Cancer (NSCLC). Topics covered include opinions about Tagrisso (osimertinib; AstraZeneca) as a newly approved second-line treatment for EGFR T790M mutation-positive NSCLC, the approval of Portrazza (necitumumab; Eli Lilly) for first-line squamous NSCLC therapy, and the expansion of the label for Xalkori (crizotinib; Pfizer) to include the first-line treatment of patients in the EU with ALK-positive NSCLC and patients in the US with ROS1-positive advanced NSCLC. KOLs also discuss Alecensa (alectinib; Roche) following its approval as a second-line treatment for ALK-positive metastatic NSCLC, and assess topline KEYNOTE-010 trial data for Keytruda (pembrolizumab; Merck & Co.) in the second-line treatment of PD-L1 positive advanced NSCLC.

Key Questions Answered in this Update Bulletin:

Will the safety and efficacy of AstraZeneca's Tagrisso prove sufficient to position it as the second-line treatment of choice for EGFR T790M mutation-positive NSCLC?

Is the overall survival (OS) advantage shown by Eli Lilly's Portrazza over chemotherapy likely to justify its cost as a first-line therapy for squamous NSCLC?

If approved, how widespread is the use of Pfizer's Xalkori as a first-line treatment for ALK-positive advanced NSCLC, in the EU, likely to be?

As Xalkori awaits approval for the treatment of ROS1-positive metastatic

NSCLC in the US, how successful do KOLs think the agent will be in this setting?

Can the favourable toxicity profile and significant CNS activity of Roche's Alecensa help it to secure a role as standard treatment for second-line ALK-positive metastatic NSCLC?

To what extent will the OS advantage shown by topline KEYNOTE-010 data impact the use of Merck's Keytruda as a second-line treatment for PD-L1 positive advanced NSCLC?

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