

New therapy is tolerable in lung cancer

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A promising new therapy for the most common form of lung cancer appears to produce largely manageable side effects, and an ongoing clinical trial is determining whether the compound treats tumors more effectively than what's on the market, according research that scientists at Fox Chase Cancer Center will present at the 49th Annual Meeting of the American Society of Clinical Oncology on Saturday, June 1.

"We're very excited about this drug," says Hossein Borghaei, DO, chief of thoracic [medical oncology](#) at Fox Chase. "I think if we learn how to use it appropriately, and manage the side effects effectively, it will be a good drug to have in our armamentarium."

[Lung cancer](#) is the number one cause of death from cancer. Currently, patients with a metastatic form of the most common form of lung cancer—non-small cell lung cancer ([NSCLC](#))—are treated with a combination of various [chemotherapy drugs](#). If that fails, they are typically treated with a single agent. "We're trying to find a new option," says Borghaei, also the director of Lung Cancer Risk Assessment at Fox Chase.

The drug, known as nivolumab, is a monoclonal antibody that targets the [immune system](#)'s response to cancer. Specifically, it acts on the pathway that protects the tumor from the efforts of the immune system to destroy it. Treatment with nivolumab is like taking the brakes off the immune system, says Borghaei—"it allows the body's own immune system to recognize the tumor as foreign and attack it." A similar drug, [ipilimumab](#), has been approved for melanoma.

Because nivolumab acts on the immune system, Borghaei explains, he and his colleagues have noted different side effects than what often occur with standard chemotherapy. These side effects, reported on other studies with this drug, include thyroid inflammation or inflammation of the colon.

The drug's seller, Bristol-Myers Squibb, has sponsored other research that suggests nivolumab may have some effect on lung cancer—in a previously published phase 1 trial in patients with NSCLC, 33% responded to the treatment.

To test the drug's effects further, Borghaei and his colleagues are conducting two phase III trials of nivolumab, comparing its effectiveness to another commonly used chemotherapy drug—docetaxel—in patients with NSCLC of different histologies who have already failed previous treatments.

The trials, which is ongoing, aims to enroll several hundred people worldwide, and will likely be complete in a few years. Fox Chase alone has enrolled approximately 10 people so far, says Borghaei. "We're going to keep going until we're told to stop."

He encourages patients with NSCLC who think they may benefit from trying nivolumab to discuss the option with their doctors. "Every drug patients get now was once experimental," he says. "There are a lot of new drugs for lung cancer being investigated, so a lot of reason to feel hopeful that new therapies are on the horizon. But the only way this will happen is if patients participate in experimental trials."

Provided by Fox Chase Cancer Center

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