

Adding bevacizumab improves overall survival in NSCLC

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(HealthDay)—The addition of bevacizumab to carboplatin/pemetrexed is associated with improved overall survival among patients with advanced non-small cell lung cancer (NSCLC), according to a study published in the May issue of the *Journal of the National Comprehensive Cancer Network*.

Stephen J. Bagley, M.D., from the Perelman School of Medicine at the University of Pennsylvania in Philadelphia, and colleagues conducted a retrospective cohort study of patients diagnosed with NSCLC who received one or more cycle of [carboplatin](#)/pemetrexed ± bevacizumab as initial systemic therapy for stage IV or metastatic/recurrent disease. Data were included for 4,724 patients, of whom 58 percent received carboplatin/pemetrexed and 42 percent received carboplatin/pemetrexed/bevacizumab.

The researchers found that median overall survival was 12.1 and 8.6 months in the group receiving carboplatin/pemetrexed/bevacizumab and the

group receiving carboplatin/pemetrexed, respectively. In a multivariate model, bevacizumab use remained associated with improved [overall survival](#) (hazard ratio, 0.80). The effect of bevacizumab was unchanged in a secondary analysis involving 539 patients at a single academic institution and additional adjustment for presence of brain metastases, hemoptysis, and anticoagulation (hazard ratio, 0.75).

"It is unlikely that a randomized controlled trial to address this question will ever be performed due to the size and cost that such a trial would entail," the authors write. "Results of our real-world study provide essential information that can be incorporated into the complex clinical decision-making necessary for this large population of patients with cancer."

Several authors disclosed financial ties to Roche/Genentech, the manufacturer of [bevacizumab](#), and Eli Lilly.

More information: [Abstract/Full Text](#)

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