

# New drugs may make a dent in lung, ovarian cancer

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In this Sept. 5, 2013 file photo, an infusion drug to treat cancer is administered to a cancer patient via intravenous drip at Duke Cancer Center in Durham, N.C. According to a study that was discussed Saturday, May 31, 2014, at a cancer conference in Chicago, Eli Lilly and Co.'s experimental drug Cyramza has extended the life of patients with advanced lung cancer who relapsed after standard chemotherapy. (AP Photo/Gerry Broome, File)

New drugs are making a dent against some hard-to-treat cancers, but

some results raise fresh questions about whether the benefit is worth the cost.

For the first time in a decade, an [experimental drug](#) has extended the lives of patients with advanced [lung cancer](#) who relapsed after standard chemotherapy. But the [drug](#) used in the study gave patients just six extra weeks of life on average, and costs \$6,000 per infusion as currently sold to treat a different form of [cancer](#).

Eli Lilly and Co.'s drug, Cryamza, was discussed Saturday at a cancer conference in Chicago, where other studies showed:

—The drug Imbruvica, sold by Pharmacyclics Inc. and Janssen Biotech, substantially improved survival and could set a new standard of care for relapsed [chronic lymphocytic leukemia](#), or CLL, the most common leukemia in adults. Doctors say the pill more precisely targets cancer and is a good option for older people who can't tolerate standard chemotherapy infusions.

—Two experimental pills from AstraZeneca PLC worked much better than one alone against [ovarian cancer](#) that resisted or came back after standard chemo. The drugs significantly prolonged the time women lived without their disease worsening.

## LUNG CANCER

Cyramza is sold now to treat stomach cancer and fights the formation of blood vessels that feed tumors. French researchers led a study with 1,253 patients who relapsed after initial treatment of advanced lung cancer, a more common disease.

All were given the chemo drug docetaxel and half also received Cyramza infusions every three weeks. Median overall survival was 10.5 months

for those on the combo and 9 months for the others; there were significantly more side effects with the combo.

"I don't think a six-week increment is that impressive" for survival, said Dr. Derek Raghavan, an independent expert and president of the Levine Cancer Institute at Carolinas HealthCare System in Charlotte, North Carolina. He also is on a task force on value in cancer care for the American Society of Clinical Oncology, the group hosting the conference.

The fact that it prolonged survival at all suggests it is worth testing earlier in the course of the disease to see whether those patients fare better, he said. But for people whose lung cancer has come back, he said, "I'd try something else that's cheaper" first.

Other doctors were more positive.



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"It's exciting to see progress in this disease where the steps are small but cumulative," said Dr. Gregory Masters of the Helen F. Graham Cancer Center in Newark, Delaware, and an ASCO spokesman.

## LEUKEMIA

The value of another expensive drug seemed clearer, doctors said. Imbruvica won approval earlier this year for treating chronic lymphocytic leukemia based on a small study that found it delayed the time until the disease got worse.

Ohio State University's Dr. John C. Byrd led a more definitive study in nearly 400 patients who did not respond or had a relapse after standard chemo. They were given Imbruvica or Arzerra, a GlaxoSmithKline drug often used in such cases.

One-year survival was 90 percent for those on Imbruvica and 81 percent for those originally assigned to get Arzerra. Imbruvica also reduced the chances of the disease getting worse by 78 percent.

The results were especially impressive because patients on Arzerra were allowed to switch to Imbruvica early in the study once its benefit became apparent. Treatment costs \$8,200 a month.

The drug "may transform the treatment of CLL," said Masters, the oncology society spokesman.

## OVARIAN CANCER

Ovarian cancer usually is treated with surgery and chemo but about 80 percent of patients relapse, said Dr. Joyce Liu of the Dana-Farber Cancer Institute in Boston.

She led a federally funded study of 90 such women to test cediranib, a drug that blocks tumor blood vessel formation, plus olaparib, part of a new class of experimental drugs called PARP inhibitors, which keep cancer cells from repairing damage to their DNA.

The ovarian cancer study was the first time these two drugs had been

tested together. The combo delayed by more than eight months the time it took for the disease to get worse compared to olaparib alone.

It's too soon to know whether the combo will prolong survival; participants are still being tracked.

Cediranib seemed headed for the scrap heap after failing studies on lung and colon cancer, but this is the second study to suggest it works against ovarian cancer. AstraZeneca said it may seek the drug's approval for ovarian cancer later this year.

The price of either drug has not been set.

Study participant Ann Marie McEnelly, 61, of Brockton, Massachusetts, said the combo eliminated several of her tumors and dramatically shrank some others. Her cancer had spread from her ovaries to lymph nodes and her abdominal wall.

"It's amazing. My husband and I are thrilled to be part of the study," she said. "I'm able to work full time. I play golf, do things, watch my grandkids, pretty much do everything I did before."

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