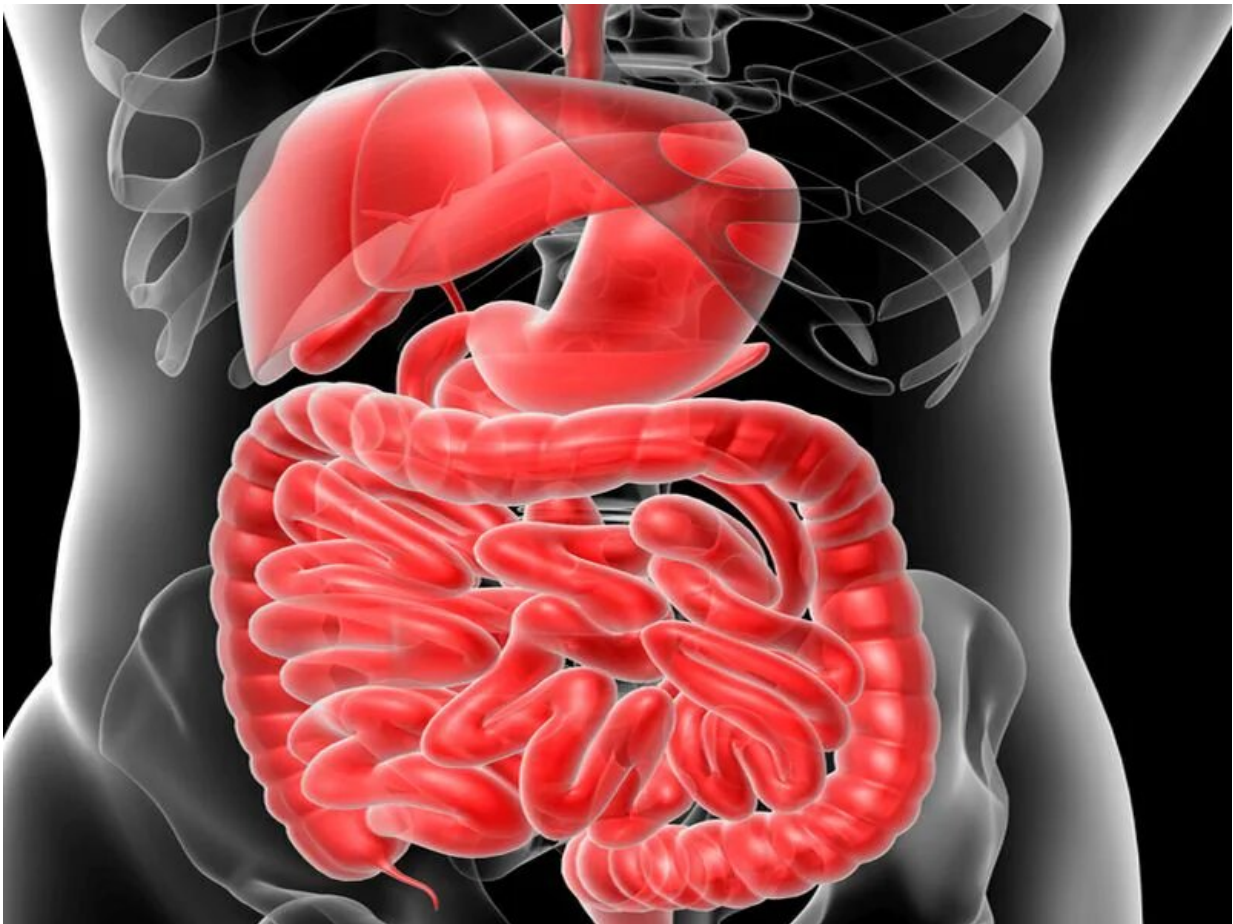


Quality of life extended with atezolizumab and bevacizumab in liver cancer

January 29 2020



(HealthDay)—For patients with unresectable hepatocellular carcinoma,

the combination of atezolizumab and bevacizumab is associated with longer time to deterioration of patient-reported quality of life (QOL); and decline in patient-reported QOL is delayed in metastatic colorectal cancer (mCRC) treated with triplet encorafenib, binimetinib, and cetuximab (ENCO+BINI+CETUX) and doublet ENCO+CETUX, according to two studies presented at the American Society of Clinical Oncology annual Gastrointestinal Cancers Symposium, held from Jan. 23 to 25 in San Francisco.

Peter R. Galle, M.D., Ph.D., from the University Medical Center in Mainz, Germany, and colleagues examined patient-reported outcomes for adults with unresectable hepatocellular carcinoma randomly assigned to atezolizumab + bevacizumab versus sorafenib. The researchers found that atezolizumab + bevacizumab delayed time to deterioration (TTD) of patient-reported QOL versus sorafenib (median TTD, 11.2 versus 3.6 months; hazard ratio, 0.63) and delayed declines in physical functioning (median TTD, 13.1 versus 4.9 months; hazard ratio, 0.53) and role functioning (median TTD, 9.1 versus 3.6 months; hazard ratio, 0.62).

Scott Kopetz, M.D., Ph.D., from the MD Anderson Cancer Center in Houston, and colleagues examined QOL for patients with *BRAF* V600E mCRC randomly assigned to a triplet regimen of ENCO+BINI+CETUX or doublet ENCO+CETUX versus the investigator's choice of irinotecan + CETUX or FOLFIRI+CETUX (224, 220, and 221 [patients](#), respectively). The researchers found that for QOL deterioration, there was a reduction in risk in the EORTC QOL Questionnaire and the Functional Assessment of Cancer Therapy Colon Cancer assessments in favor of the triplet regimen versus control (hazard ratios, 0.55 and 0.56, respectively). For the doublet regimen versus the control, the corresponding reductions were 0.54 and 0.57, respectively.

"The findings highlight that with these novel targeted therapy regimens, not only was disease controlled longer, but patient-reported [quality of](#)

[life](#) was maintained longer," Kopetz said in a statement.

The Galle study was funded by F. Hoffmann-La Roche. The Kopetz study was funded by Pfizer.

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Citation: Quality of life extended with atezolizumab and bevacizumab in liver cancer (2020, January 29) retrieved 17 April 2024 from <https://medicalxpress.com/news/2020-01-quality-life-atezolizumab-bevacizumab-liver.html>

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