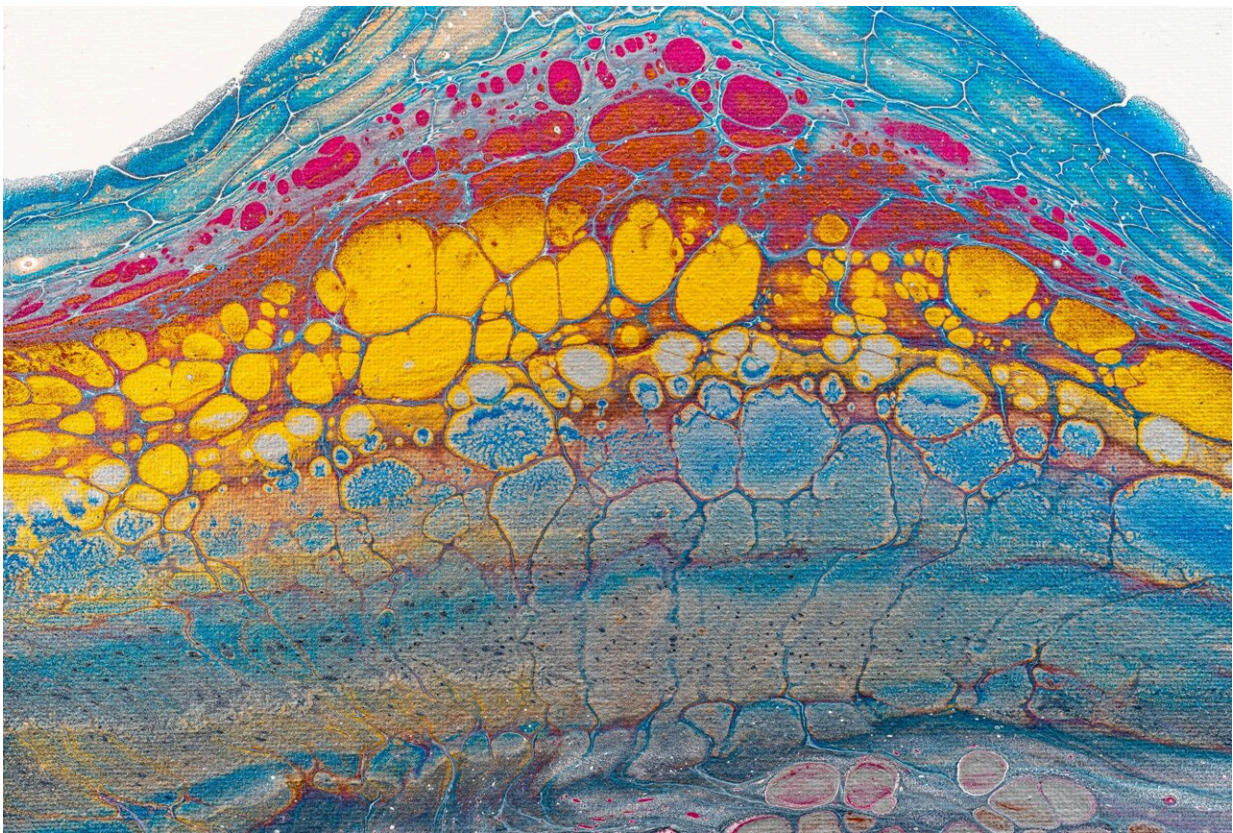


# Immunotherapy plus chemotherapy for advanced lung cancer not only prolongs life but also improves its quality

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A recent clinical trial showed that the drug combination of cemiplimab plus platinum chemotherapy can prolong survival in patients with

advanced lung cancer when compared with placebo plus platinum chemotherapy. Now an analysis published by Wiley online in *Cancer*, a peer-reviewed journal of the American Cancer Society, indicates that cemiplimab plus platinum chemotherapy also affects quality of life compared to chemotherapy alone.

The multinational phase 3 EMPOWER-Lung 3 trial had shown that the addition of cemiplimab to [platinum-based chemotherapy](#) was associated with improved survival in patients with advanced stage non-[small cell lung cancer](#) compared to chemotherapy alone. Because [quality of life](#) is also an important parameter for treatment benefit, investigators examined how cemiplimab plus platinum affected symptoms in comparison to chemotherapy alone for patients enrolled into this trial using the EORTC QLQ-C30 and QLQ-LC13 questionnaires.

Patients who received cemiplimab plus chemotherapy experienced significant improvements in pain, dyspnea, constipation, nausea, and vomiting compared to those who received placebo plus chemotherapy. Patients enrolled in the cemiplimab arm also had a significant delay in the clinically meaningful deterioration of symptoms including cough, hemoptysis, and dysphagia.

"The findings support the concept that the superior efficacy and favorable safety profile of cemiplimab plus chemotherapy translate to better patient-reported outcomes compared with chemotherapy alone in [patients](#) with advanced non-small cell lung cancer," said corresponding author Tamta Makharadze, MD, of LTD High Technology Hospital Med Center in Batumi, Georgia.

**More information:** Quality of Life With Cemiplimab Plus Chemotherapy for First-Line Treatment of Advanced Non-Small Cell Lung Cancer: Patient-Reported Outcomes From Phase 3 EMPOWER-Lung 3, *Cancer* (2023). [DOI: 10.1002/cncr.34687](https://doi.org/10.1002/cncr.34687)

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