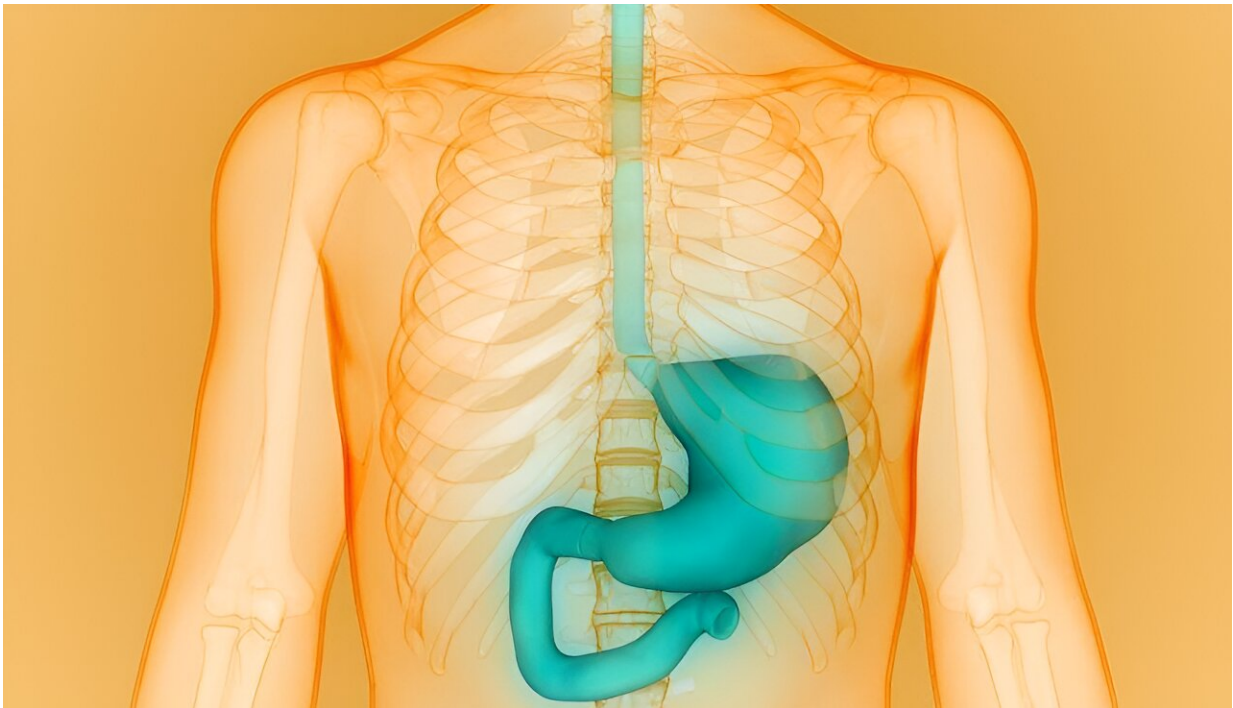


# AACR: Cadonilimab plus chemo beneficial for gastric adenocarcinoma

April 8 2024, by Elana Gotkine

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For patients with gastric/gastroesophageal junction (G/GEJ) adenocarcinoma, cadonilimab plus chemotherapy is associated with improved overall survival and progression-free survival, according to a study presented at the annual meeting of the American Association for Cancer Research, held from April 5 to 10 in San Diego.

Jiafu Ji, M.D., Ph.D., from the Gastrointestinal Cancer Center at Peking University Cancer Hospital & Institute in Beijing, and colleagues conducted a randomized, placebo-controlled trial involving adults with untreated, unresectable, locally advanced, or metastatic G/GEJ adenocarcinoma, regardless of PD-L1 expression. Patients from 76 study centers were randomly assigned to cadonilimab plus [chemotherapy](#) or placebo plus chemotherapy (305 patients to each group), with a median follow-up of 18.69 months.

The researchers found [median overall survival](#) to be longer in the cadonilimab versus the [placebo group](#) (15.0 versus 10.8 months; hazard ratio, 0.62). At all prespecified combined positive score cutoffs, overall survival benefits were consistently observed, especially in patients with low PD-L1 expression. The cadonilimab group had longer [progression-free survival](#) (median, 7.0 versus 5.3 months; hazard ratio, 0.53). Grade  $\geq 3$  treatment-related adverse events occurred in 71.8 and 60.5 percent of patients who received cadonilimab and placebo, respectively; there were no new safety events reported.

"These findings may change the current practice of gastric cancer treatment," Ji said in a statement. "Cadonilimab combined with chemotherapy could become a new standard of care in first-line treatment of gastric cancer, even for patients with low PD-L1 expression."

**More information:** [Press Release](#)

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