

Amivantamab-lazertinib ups survival in EGFR-mutated advanced lung cancer

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For patients with EGFR-mutated advanced non-small cell lung cancer (NSCLC), amivantamab-lazertinib yields improved progression-free survival compared with osimertinib as first-line treatment, according to a study [published](#) online June 26 in the *New England Journal of Medicine*.

Byoung C. Cho, M.D., Ph.D., from the Yonsei Cancer Center in Seoul, South Korea, and colleagues conducted a phase 3 trial involving patients with previously untreated EGFR-mutated, locally advanced or metastatic NSCLC randomly allocated to receive amivantamab-lazertinib (open-label), osimertinib (blinded), or lazertinib (blinded) in a 2:2:1 ratio (429, 429, and 216 patients, respectively).

The researchers found that the median [progression-free survival](#) was significantly longer in the amivantamab-lazertinib group than in the osimertinib group (23.7 versus 16.6 months; hazard ratio for [disease progression](#) or death, 0.70). An objective response was observed in 86 and 85% of patients in the amivantamab-lazertinib and osimertinib groups, respectively; among patients with a confirmed response, the median response duration was 25.8 and 16.8 months, respectively.

The hazard ratio for death did not differ significantly in a planned interim overall survival analysis of amivantamab-lazertinib versus osimertinib. EGFR-related toxic effects were the predominant adverse events. The incidence of discontinuation of all agents due to treatment-related adverse events was 10 and 3% with amivantamab-lazertinib and osimertinib, respectively.

"We found that progression-free survival was significantly improved with amivantamab-lazertinib as compared with osimertinib as first-line treatment for EGFR-mutated advanced NSCLC," the authors write.

Several authors disclosed ties to biopharmaceutical companies, including Janssen, which manufactures amivantamab and lazertinib and funded the study.

More information: Byoung C. Cho et al, Amivantamab plus Lazertinib in Previously Untreated EGFR -Mutated Advanced NSCLC, *New England Journal of Medicine* (2024). [DOI:](#)

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