

GASTRIC CANCER

New biologic therapy effective as second-line treatment in gastric cancer

Ramucirumab—a monoclonal antibody that targets vascular endothelial growth factor receptor-2 (VEGFR-2)—has now been shown to prolong survival in patients with advanced gastric cancer whose cancer has progressed after first-line chemoradiotherapy, according to findings now published in *The Lancet*.

Charles Fuchs and colleagues from the REGARD (ramucirumab monotherapy for previously treated advanced gastric or gastro-oesophageal junction adenocarcinoma) trial conducted a phase III study including 355 patients with advanced gastric or gastro-oesophageal junction adenocarcinoma from 29 countries worldwide. Only patients whose cancer progressed after first-line chemoradiotherapy were included in the study. Patients were randomly assigned to receive either ramucirumab ($n = 238$) or placebo ($n = 117$) at 8 mg/kg intravenously once every 2 weeks.

The median overall survival was significantly greater in the ramucirumab

group than the placebo group (5.2 months versus 3.8 months, respectively; $P = 0.047$).

Of note, the rate of hypertension was higher in the ramucirumab group than in the placebo group (16% versus 8%, respectively), but the rates of other adverse events were similar across the two groups.

The trial investigators state that their findings validate VEGFR-2 signalling as an important therapeutic target in advanced gastric cancer. Indeed, according to the researchers, ramucirumab is the first biologic treatment given as a single drug that has survival benefits in patients with advanced gastric cancer or gastro-oesophageal junction adenocarcinoma progressing after first-line treatment.

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Original article Fuchs, C. S. *et al.* Ramucirumab monotherapy for previously treated advanced gastric or gastro-oesophageal junction adenocarcinoma (REGARD): an international, randomised, multicentre, placebo-controlled, phase 3 trial. *Lancet* doi:10.1016/S0140-6736(13)61719-5