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GYNAECOLOGICAL CANCER

Survival benefit and quality of life

Women who are diagnosed with advanced-stage cervical cancer and who have no access to health-care resources have few treatment options. The Gynecologic Oncology Group (GOG) has conducted a phase III, randomized study (GOG 240), which showed the addition of the antiangiogenic agent bevacizumab to doublet chemotherapy significantly improved overall survival from 13.3 months to 17.0 months. Nevertheless, in women with advanced-stage disease, it is important to identify therapies that not only prolong life, but also do not increase toxicities; thus, a major aim of GOG 240 was to assess patient-reported outcomes.

Importantly, the latest results from the GOG 240 study showed that the addition of bevacizumab to chemotherapy was not associated with deterioration in health-related quality fo life (QoL). Lead author of the study, Richard Penson, elaborates: "Reported improvement in overall survival attributed to bevacizumab did not come at the cost of a significant deterioration in QoL. This observation represents the crux of why the overall survival gain of 3.7 months is not only statistically significant, but also clinically important."

Penson comments on the future of trials in this area and the importance of QoL measures: "Conducting large randomized clinical trials is becoming prohibitively expensive. One popular option is to use randomized phase II clinical trials that measure clinical benefit and surrogate signals of an overall survival advantage. Measuring health-related QoL in these studies is not appropriate without the power to detect statistically significant and clinically meaningful differences."

Lisa Hutchinson

Original article Penson, R. T. *et al*. Bevacizumab for advanced cervical cancer: patient-reported outcomes of a randomised, phase 3 trial (NRG Oncology-Gynecologic Oncology Group protocol 240). *Lancet Oncol*. doi:10.1016/S1470-2045(15)70004-5