In the News

FROM ASCO 2017

Between the 2nd and 6th of June, more than 30,000 delegates descended on Chicago for the 53rd ASCO meeting. This meeting is an annual forum for discussion of recent clinical advances, which are testament to the dedication of the oncology community, not least the critical and selfless contributions of the patients themselves. Patients should always be placed front and centre, and the importance of patient-reported outcomes in guiding clinical practice is increasingly recognized. This paradigm was emphasized most elegantly by the finding that, compared with standard clinical practice, the use of a web-based tool for real-time reporting of symptoms to clinicians was associated with improved quality of life in patients undergoing chemotherapy for advanced-stage cancer, and, strikingly, prolonged survival by 5.1 months. Notably, this overall survival benefit is greater than that of many approved therapies.

In other news, the LATITUDE and STAMPEDE studies revealed that adding abiraterone to ADT for metastatic prostate cancer reduces the risk of death by ~37%. Docetaxel plus ADT has been associated with similar results, raising questions regarding treatment selection and novel combinations. For HER2-positive breast cancer, in the APHINITY trial, addition of pertuzumab to adjuvant trastuzumab and chemotherapy had more-modest benefits: <1% improvement in invasive-disease-free survival at 3 years, rising to ~2% for node-positive disease. Longer follow-up study is required to clarify the value of this regimen. With regard to hormone-receptor-positive metastatic breast cancer, addition of the CDK4/6 inhibitor abemaciclib to fulvestrant therapy prolonged progression-free survival by 7.1 months in the MONARCH 2 study.

In the NAVIGATE basket trial, the TRK inhibitor larotrectinib had encouraging therapeutic activity against paediatric and adult cancers with TRK fusions, independent of histology. The objective response rate was 76%, with 79% of responses ongoing at 1 year.

Unsurprisingly, immunotherapy continued to dominate the agenda; immune-checkpoint inhibitors were reported to have promising activity in relapsed mesothelioma (MAPS-2 trial), gastric cancer (KEYNOTE-059), subtypes of sarcoma (SARC028 trial), and brain metastases from melanoma (CheckMate 204). In addition, anti-BCMA chimeric antigen receptor T-cell therapy for multiple myeloma was reported to have an impressive 100% objective response rate, and a 94% remission rate.

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