Tivantinib in Combination With Erlotinib vs Erlotinib Alone for EGFR Mutant NSCLC: Subgroup Results From the Phase 3 MARQUEE Study

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INTRODUCTION

Objectives

To evaluate the safety and efficacy of tivantinib when combined with erlotinib for treatment of patients with mutant EGFR adenocarcinoma of non-small-cell lung cancer (NSCLC), and to include in this subgroup analysis. Patients in the treatment arms were stratified by country, gender, and overall survival (OS) in a 2:1 ratio.

METHODS

Inclusion criteria

1. Patients with stage IIIB or IV NSCLC.
2. Patients with estrogen receptor-negative, HER2-negative, and EGFR-mutant adenocarcinoma.
3. Patients with OS ≥ 12 weeks.

Exclusion criteria

1. Patients with brain metastases.
2. Patients with prior radiotherapy to the brain.

Patient Population and Disposition

The study included 1048 patients from 71 centers in 15 countries. The median (range) age was 59.5 (34–84) years, and the median (range) age was 65.0 (38–82) years. Men contributed 47.2% of the population. Patients were randomly assigned to receive tivantinib + erlotinib (n = 56), or placebo + erlotinib (n = 86).

RESULTS

Conclusion

Tivantinib combined with erlotinib was well tolerated and increased the efficacy of erlotinib for EGFR mutant NSCLC. Exploratory analysis.

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REFERENCES


CONCLUSIONS

Tivantinib combined with erlotinib was well tolerated and increased the efficacy of erlotinib for EGFR mutant NSCLC. Exploratory analysis.

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