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## Emerging Developments in Immunotherapy & Targeted Therapies: Key Data on Lung Cancer Highlighted at ASCO 2021

### Announcer:

You're listening to Project Oncology on ReachMD. On this episode, sponsored by Lilly, we're going to hear from Dr. Fred R. Hirsch, who's the Executive Director at the Center for Thoracic Oncology and Associate Director of Biomarker Discovery at The Tisch Cancer Institute at Mount Sinai and the Joe Lowe and Louis Price Professor of Medicine at the Icahn School of Medicine at Mount Sinai. Dr. Hirsch joins us to discuss key data from the upcoming American Society of Clinical Oncology Annual Meeting. Here's Dr. Hirsch now.

### Dr. Hirsch:

ASCO 2021 had many studies in lung cancer many updates from previously reported results. If I should pick a few of them, the one that got my attention, first of all, was EMPOWER 10, which is a study in adjuvant settings for non-small cell lung cancer, stage IB to IIIA. This study compared immunotherapy in this case atezolizumab with the best supportive care and showed clearly significant disease-free survival for atezolizumab with a hazard ratio of 0.66. The study also showed an association to PDL1 expression for patients with high PDL1 expression more than 50 percent, the hazard ratio was 0.43, I think. Which is remarkable. I think this is a first large study with immunotherapy in adjuvant setting. This will raise clearly interest for immunotherapy in early-stage disease.

The other study which I would mention was an early phase development study of a HER3 targeted drug patritumab deruxtecan is a phase 1 study. But it showed high-risk response rate in patients with EGFR mutation who have progressed on osimertinib. This is a space where we need new therapies; it has been a big question mark, how to treat patients after osimertinib resistance. Of course, this is a phase 1 study, needs to be verified in the larger phase 2, eventually, phase 3 studies. But on this stage, very encouraging results in a space where we need a new treatment opportunities.

The clinical impact of those data which I mentioned, I will probably focus on the large phase 3 study on immunotherapy in adjuvant setting. I don't know, of course, on this stage what FDA, how they will interpret the data in terms of approval. But my immediate belief is that this could change the landscape and become a clinical practice in the future. Of course, we are still missing overall survival data. We are still missing quality of life data. I will say data are very encouraging and might lead to a new standard of practice for patients early-stage disease.

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