

EA5181 Clinical Trial Results Summary

Comparing Two Approaches to Using Antibody Therapy to Treat Stage 3 Non-Small Cell Lung Cancer Which Cannot Be Removed by Surgery

What did this trial involve and who was it for?

EA5181 was for people with stage 3 non-small cell lung cancer (NSCLC) that could not be treated with surgery. The usual treatment for this type of lung cancer includes:

- Chemotherapy and radiation therapy given together (called chemoradiation or CRT), followed by
- An immunotherapy drug such as durvalumab afterward.

Durvalumab is a human monoclonal antibody, a type of immunotherapy that helps your immune system recognize and attack cancer cells. Previous studies have shown that giving durvalumab after CRT improves survival for patients with NSCLC, so the Food and Drug Administration (FDA) approved its use after CRT. However, more research is needed to confirm if this is the most effective timing.

The purpose of EA5181 was to see if adding durvalumab during CRT (in addition to afterward) would help patients to live longer without their cancer worsening. A total of 662 people with previously untreated stage 3 NSCLC participated in the study. Participants were randomly assigned by a computer to one of two treatment groups:

1. The current standard treatment: CRT followed by one year of durvalumab, or
2. The experimental approach: durvalumab given both during CRT and afterward for one year.

What are the results?

- The two approaches worked about the same overall:
 - Patients who received durvalumab during and after CRT had a median survival time of 41.5 months, compared with 39.4 months for those who received it only after CRT.
- The time before the cancer worsened was also similar:
 - 16.8 months for the standard treatment group, compared with 15.5 months for the group who received durvalumab both during and after CRT.

What do the results mean for patients?

- Giving durvalumab during CRT did not help patients with inoperable stage 3 NSCLC to live longer or delay their cancer from worsening compared with the usual approach.
- The results confirm that durvalumab after CRT remains the best standard of care for people with inoperable stage 3 NSCLC.

For more information, go to:

- United States National Institutes of Health (NIH) Library of Medicine: <https://clinicaltrials.gov/study/NCT04092283>
- International Association for the Study of Lung Cancer: <https://www.iaslc.org/iaslc-news/press-release/ea5181-phase-3-trial-finds-no-os-benefit-concurrent-and-consolidative>

About ECOG-ACRIN

This trial was led by the ECOG-ACRIN Cancer Research Group (ECOG-ACRIN). ECOG-ACRIN is a membership-based scientific organization that designs and conducts cancer research involving adults who have or are at risk of developing cancer. ECOG-ACRIN is a component of the National Cancer Institute's National Clinical Trials Network. Learn more at www.ecog-acrin.org.

To all the patients that participated in this trial, thank you. Your participation, and that of other patients like you, made this research possible.