Discussion LBA 20-21

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RELEVANCE

NORDIC 7

Large scale R phase III N=600

Impact on practice:

- cetuximab 1st line
- Duration of CT

HH GDC-0449

R phase II N = 200

Impact on drug development:

go no-go in CRC

The results: NORDIC (n = 566)

	RR	PFS	OS	TOX
FLOX	41	7.9	20.4	
FLOX CET	49	8.3	19.7	more
maintenance	47	7.3	20.3	

no better outcome in the K-RAS wt population !!!

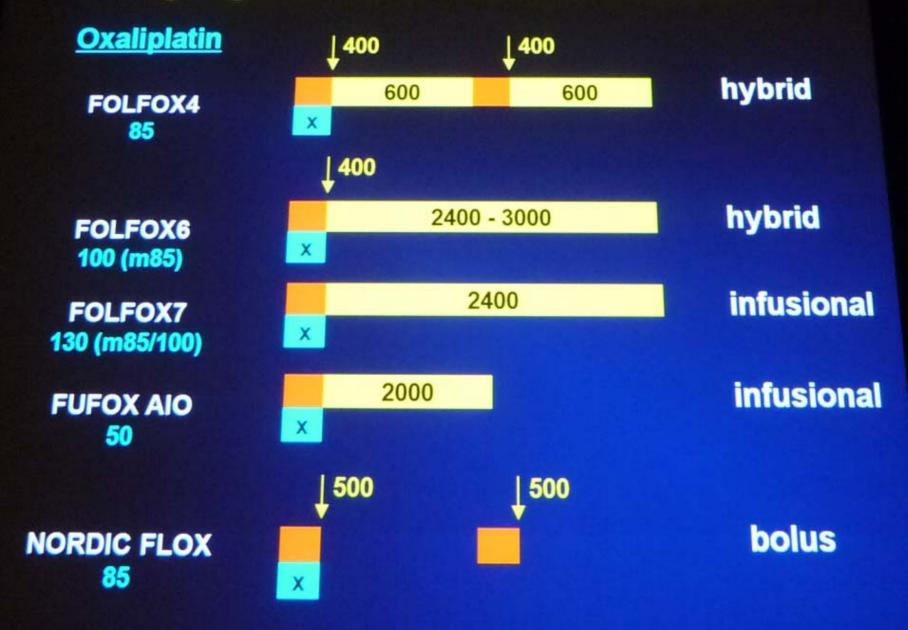
NORDIC major findings

- Efficacy results: overall, negative
- K-RAS wt : no benefit
- Concept of intermittent CT reinforced

NORDIC

- Underpowered for K-RAS
- Backbone CT regimen

The jungle of FU LV OX combinations



Why

- 1. Bias
- 2. Chance
- 3. True interaction

K-RAS STORY: NORDIC AGAINST ALL?

 Only NORDIC reported lower RR and PFS in K-RAS wt than in mut out of 11 trials

 49% RR is the highest ever reported for K-RAS mut

K-RAS results : Just chance ?

	OR	95% C.I.
• RR • ITT 566 • Wt 303	1.35 0.96	0.9 2.02 0.55 1.69
• Mut 195	1.44	0.72 2.90
	HR	95% C.I.
• PFS		
• ITT 566	0.89	0.7 1.11
• Wt 194	1.07	0.79 1.45
• Mut 130	0.71	0.5 1.03

True negative interaction between cetuximab and FU + oxaliplatin?

The fact that the results in the K-Ras wt population are no better than ITT reinforces the possibility of a true negative interaction:

- With bolus FU?
- With oxaliplatin?

Does the administration mode of fluoropyrimidines play a role? (PFS) K-RAS wt population

R. Mariaetta	CT	CT + bio	HR	P
Continous in	usion FU			
CRYSTAL	8.4	9.9	0.67	0.001
OPUS	7.2	8.3	0.57	0.006
PRIME	8.0	9.6	0.80	0.02
Bolus FU				
NORDIC VII	8.7	7.9	1.07	0.66

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COIN MdG	n.a	n.a	0.77	0.056
COIN xelox	n.a	n.a	1.06	0.5
Bolus FU				
ORDIC VII	8.7	7.9	1.07	0.66

Is Irinotecan a better partner for cetuximab than oxali in 1st line?

		FOLFOX plus cetuximab	FOLFIRI plus cetuximab
CELIM ¹ ITT (n=106)	RR	68%	57%
CALGB 80203 ²	RR	60%	44%
ITT (n=108)	PFS	8.2	10.6
CECOG (RAS wt	RR	56%	50%
n=62)	PFS	9.1	8.4

¹ Folprecht et al., Lancet Oncol 2010; 11: 38-47

² Venook et al, ASCO 2006, oral presentation, abstract no.3509

³ Ocvirk et al., World J Gastroenterol 2010; 16:3133-3143

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Direct comparison very weak -> whole story

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(n=62)	PFS	9.1	8.4
	ALC: UNKNOWN		

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IRINOTECAN

- III line ++ BOND (MLE)
- Il line ++ EPIC
- I line +++ CRYSTAL

No detrimental effect mut

OXALIPLATIN

- III line no data
- Il line little data
- I line ++ OPUS
 - + COIN
 - NORDIC
- Adjuvant NO146
- Detrimental effect in mut

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Very solid

shaky

Why

- 1. Bias
- 2. Chance
- 3. True interaction

no...

hmm...

likely

CONCLUSIONS

- NORDIC
 - Impact on practice : yes
 - Iri-based CT should be the partner of cet
 - Another piece of evidence against continuing CT untill progression
- HH GDC-0449
 - Impact on drug development in CRC: yes
 - no-go