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## LATEST ONCOLOGY UPDATES

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**Title:** Outcomes of Second-Line Chemotherapy in Patients with Relapsed Extensive Small Cell Lung Cancer

### **Background:**

- Extensive stage SCL cancer is characterized by initial chemosensitivity but short median survival (7-11 months). While platinum-based chemotherapy is effective in the first line setting, the value of further chemotherapy at relapse/progression is more contentious. Oncologists often try to distinguish those with chemosensitive disease (variably defines as relapse/progression more than 2, 3, or 6 months after initial chemotherapy), and those with chemoresistant disease. Most would consider second line chemo for the chemosensitive patients and either retreat with the platinum or use a non-platinum regimen. The value of further chemotherapy in those with platinum resistant disease is less clear.

### **Study design (research question, population):**

- This was a retrospective, single center (Ottawa) review of all patients seen between Jan 1, 1999 and Dec 31, 2003 with extensive stage SCL cancer who received at least 1 cycle of initial chemotherapy.

### **Study results:**

- 274 patients were initially seen with ED-SCL cancer. Of these, 192 completed first line chemotherapy and 169 were available for second line chemotherapy. Of the 169 patients available for second line chemotherapy, only 62 (37%) received it. These patients were younger (64 years versus 69 years) and better PS. 41/62 patients receiving second line chemotherapy had chemosensitive disease.
- Median survival for the patients receiving at least one cycle of first line chemo was 7.8 months, 6.2 months for those receiving first line only and 11.4 for those receiving both first and second line therapy. For the 169 patients available for second line chemo, the median survival from relapse was 1.5 months for those receiving only first line therapy and 5.2 months for those receiving second line therapy.
- In both the chemosensitive and chemoresistant groups, survival from relapse was longer for those receiving second line chemotherapy. In multivariate analysis, receipt of second line therapy was an independent predictor of survival.

### **Study commentary:**

The authors suggest that despite the retrospective nature of this report, it supports the notion that second line chemotherapy is of benefit in ED-SCL cancer. Furthermore, their analysis suggests that patients with both chemosensitive and chemoresistant disease might benefit from second line treatment. They acknowledge that only 37% of patients available for second line chemo actually received it. Age, PS and response to initial

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treatment were selection factors for second line therapy. They suggest that closer follow up of patients after initial therapy may allow detection of relapse/progression when patients have better PS and more likely to be offered further treatment.

**Bottom-line for Canadian medical oncologists:**

Although this article primarily focuses on second line therapy, and suggests a potential benefit in patients with both chemo-sensitive and chemo-resistant disease, it paints a bleak picture for patients with ED-SCL cancer treated with our best available therapies (median survival < 8 months). It highlights the need for better therapies for these patients and more importantly the focus on prevention of lung cancer.

[Website link to source](#)

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