Second-line nintedanib + docetxel for patients with lung adenocarcinoma after failure on first-line immune checkpoint inhibitor combination therapy: efficacy and safety results from VARGADO Cohort C

INTRODUCTION

Treatment of advanced non-small cell lung cancer (NSCLC) has undergone significant changes, with immune-directed treatments (ICIs) altering the conventional treatment approach of chemotherapy and radiation therapy in patients with metastatic non-small cell lung cancer (NSCLC). Aiming to achieve durable, long-term disease control, re-challenge with ICIs is a priority in patients with an ongoing immune microenvironment.

In the VARGADO study, Nintedanib is an oral, triple angiokinase inhibitor that targets VEGF receptors 1–3, VEGF-C, and VEGF-D and is used to treat idiopathic pulmonary fibrosis and advanced-stage, unresectable HCC. The VARGADO study (NCT02788240) is an ongoing prospective, non-interventional study designed to evaluate the clinical profile of patients with NSCLC after first-line chemo-immunotherapy (ICI). The current analysis of the VARGADO study in Cohort C assessed the efficacy and safety results of nintedanib plus docetaxel combination therapy in patients with refractory NSCLC after prior chemotherapy and ICI therapy, to help inform clinical decision-making in the current treatment landscape.

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MATERIALS AND METHODS

The VARGADO study is an ongoing, non-interventional, prospective, multi-center, multinational, observational study monitoring patients with NSCLC after first-line chemo-immunotherapy treatment with ICI. Patients with NSCLC after first-line chemo-immunotherapy treatment with ICI were enrolled in Cohort A (N=200), Cohort B (N=200), and Cohort C (N=200) at 53 centers in 20 countries (Figure 2).

Inclusion criteria for Cohort C were:
- Patients with previously treated NSCLC
- Relapsed or refractory NSCLC
- Prior chemotherapy plus ICI treatment

Approximately 90% of patients had an Eastern Cooperative Oncology Group (ECOG) performance status of 0–1. The primary endpoint was progression-free survival (PFS) compared with placebo plus docetaxel, and overall survival (OS).

Between March 15, 2015 and April 6, 2021, 528 patients were enrolled in centers in 20 countries (Figure 2). Patients were followed for up to 24 months after the start of treatment (first-line and second-line ICI therapy).

RESULTS

Characteristics and previous treatments for patients in Cohort C are shown in Table 1.

The overall time on treatment (including first-line and second-line treatment) and best overall response data were available for 57 patients who received prior treatment with first-line pembrolizumab/pemetrexed/platinum-based chemotherapy.

- The DCR was 40/59 (67.8%)
- The ORR was 22/59 (37.3%)
- Median PFS was 4.4 months (95% confidence interval [CI]: 2.6–6.6; n=100)

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CONCLUSIONS

- The VARGADO study is an ongoing prospective, non-interventional study designed to evaluate the clinical profile of patients with NSCLC after first-line chemo-immunotherapy (ICI).
- The current analysis of the VARGADO study in Cohort C assessed the efficacy and safety results of nintedanib plus docetaxel combination therapy in patients with refractory NSCLC after prior chemotherapy and ICI therapy.
- The data support the need for new and active strategies in the treatment of patients with refractory NSCLC.

REFERENCES

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