EGFR-Targeted Therapy Improves Survival In Pancreatic And Non-Small Cell Lung Cancers

FDA Approves New Treatment For Pancreatic Cancer Patients

(NAPSA)—Pancreatic cancer is a devastating disease, with an average life expectancy at diagnosis of only 12 to 24 weeks, making it the fourth leading cause of cancer death. These are alarming statistics, but a new treatment option shown to improve survival is now available for pancreatic cancer patients and represents a step forward in this difficult disease.

Tarceva®, an EGFR-targeted therapy, was recently approved by the FDA for use in combination with gemcitabine chemotherapy to treat locally advanced, inoperable or metastatic pancreatic cancer in patients who have not received any previous chemotherapy. In a major study, 24 percent of patients taking Tarceva plus chemotherapy were alive after one year, compared to only 19 percent of patients who only received the chemotherapy. Tarceva, a pill that is taken once a day, is designed to block the epidermal growth factor receptor (EGFR) 1, which is a signal for cell growth in pancreatic and non-small cell lung cancers (NSCLC), two of the most difficult-to-treat cancers.

"Pancreatic cancer is incredibly deadly with most patients not surviving past one year," said Julie Fleshman, president and CEO of the Pancreatic Cancer Action Network (PanCAN). "For years, treatments for pancreatic cancer have lagged behind other cancers, so the availability of Tarceva means patients now have more treatment options as they make informed decisions."

Tarceva is also approved for advanced non-small cell lung cancer patients whose cancer has progressed after previous treatment with chemotherapy. Lung cancer will kill an estimated 160,000 Americans this year—three times as many men as prostate cancer and nearly twice as many women as breast cancer. More than 170,000 new cases of lung cancer are diagnosed in the United States each year and, according to the national Lung Cancer Alliance, about half of the people diagnosed this year quit smoking decades ago.

In a major clinical trial, patients with non-small cell lung cancer who took Tarceva had a median survival of 6.7 months, compared to 4.7 months in patients who received a placebo.

"Our knowledge about lung cancer is increasing. With targeted treatment options, we are finally making progress in treating the nation's No. 1 cancer killer," said Dr. Karen Kelly, associate professor, University of Colorado at Denver Health Sciences Center.

Tarceva Safety

Tarceva has a well-established safety profile. In the Phase III study in pancreatic cancer, the most common adverse reactions in patients receiving Tarceva were fatigue, rash, nausea, anorexia and diarrhea. The most common side effects in patients with NSCLC receiving Tarceva monotherapy were mild to moderate rash and diarrhea. When receiving Tarceva therapy, women should be advised against becoming pregnant or breastfeeding. In addition, severe and potentially fatal adverse events included interstitial lung disease-like complications, myocardial infarction or ischemia, cerebrovascular accident and microangiopathic hemolytic anemia with thrombocytopenia.

For more information about Tarceva, including full prescribing and patient information, please call 1-877-TARCEVA or visit www.tarceva.com.