Three-year Overall Survival Update from the PACIFIC Trial

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**PACIFIC study design**

- Unresectable, Stage III NSCLC without progression after definitive platinum-based cCRT (≥2 cycles)
- 18 years or older
- WHO PS score 0 or 1
- If available, archived pre-cCRT tumor tissue for PD-L1 testing*

All-comers population (i.e. irrespective of PD-L1 status)
N=713 randomized

1–42 days post-cCRT

**Durvalumab**
10 mg/kg q2w for up to 12 months
N=476

2:1 randomization, stratified by age, sex, and smoking history

**Placebo**
10 mg/kg q2w for up to 12 months
N=237

**Primary endpoints**
- PFS by BICR using RECIST v1.1†
- OS

**Key secondary endpoints**
- ORR, DoR and TTDM by BICR
- PFS2 by investigator
- Safety
- PROs

*Using the Ventana SP263 immunohistochemistry assay.†Defined as the time from randomization until the date of objective disease progression or death by any cause in the absence of progression. BICR, blinded independent central review; cCRT, concurrent chemoradiotherapy; DoR, duration of response; NSCLC, non-small-cell lung cancer; ORR, objective response rate; OS, overall survival; PD-L1, programmed death ligand 1; PFS, progression-free survival; PFS2, time to second objective disease progression; PRO, patient-reported outcome; q2w, once every 2 weeks; R, randomization; RECIST, Response Evaluation Criteria in Solid Tumors; TTDM, time to death or distant metastasis; WHO PS, World Health Organization performance status.
Updated OSS in the ITT Population

<table>
<thead>
<tr>
<th>Treatment</th>
<th>No. of events/total no. of patients (%)</th>
<th>Median OS (95% CI) months</th>
<th>12-month OS rate (95% CI) %</th>
<th>24-month OS rate (95% CI) %</th>
<th>36-month OS rate (95% CI) %</th>
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<td>Durvalumab</td>
<td>210/476 (44.1)</td>
<td>NR (58.4–NR)</td>
<td>85.1 (79.4–86.2)</td>
<td>66.3 (61.8–70.4)</td>
<td>57.0 (52.3–61.4)</td>
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<tr>
<td>Placebo</td>
<td>154/237 (65.5)</td>
<td>29.1 (22.1–35.1)</td>
<td>74.6 (68.5–79.7)</td>
<td>55.3 (48.6–61.4)</td>
<td>43.5 (37.0–49.9)</td>
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Stratified hazard ratio for death: 0.69 (95% CI, 0.55–0.86)
Stratified hazard ratio for death, from the primary analysis: 0.68 (95% CI, 0.53–0.87)

No. at risk

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NR, not reached
Conclusions

- The updated OS results, approximately 3 years from LPI, are consistent with the previously reported OS outcomes\(^8\)

- Improvements in median OS, as well as OS rates at the 12-, 24-, and 36-month landmarks, with durvalumab relative to placebo were reported
  - Importantly, >50% of patients receiving durvalumab were alive at 36 months (specifically, 57.0% on durvalumab versus 43.5% on placebo)

- All secondary outcomes examined showed improvements consistent with previous analyses

- These results demonstrate the long-term survival benefit with durvalumab following cCRT and further establish the PACIFIC regimen as the SoC in patients with unresectable, Stage III NSCLC who do not progress on cCRT