



Durvalumab Consolidation after Chemoradiation Therapy for Patients with LS-SCLC in China: A Multicentre, Observational Study

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STUDY AIM

This study aims to

- 1) Provide the first prospective real-world insights into the effectiveness and safety of durvalumab consolidation after cCRT or sCRT in a broad, real-world patient population.
- 2) Explore clinical outcomes across different CRT modalities (cCRT and sCRT) and subsequent treatment patterns after progression.

STUDY POPULATION

DREAM (NCT07161388) is a prospective, multicentre, observational study that will enroll approximately 200 patients with LS-SCLC from about 40 sites across China. Patients who received platinum-based cCRT/sCRT followed by durvalumab consolidation as first line treatment at the discretion of physicians will be enrolled.

STATISTICAL METHODS

- Comprehensive data on patient demographics, disease characteristics, treatment exposure, and clinical outcomes collected prospectively.
- The analyses of effectiveness and safety will be descriptive.

ACKNOWLEDGEMENTS & DISCLOSURES

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BACKGROUND

- Small-cell lung cancer (SCLC) represents about 15% of all lung cancers ¹; approximately one third of SCLC patients are diagnosed at the limited stage.
- Standard of care has long been platinum-etoposide-based concurrent CRT (cCRT), but outcomes remain poor.
- ADRIATIC ² showed durvalumab consolidation post-cCRT significantly improved OS (median 55.9 vs 33.4 months; HR 0.73, P=0.01) and PFS (median 16.6 vs 9.2 months; HR 0.76, P=0.02) vs placebo.
- Real-world evidence remains limited, especially for patients receiving different CRT regimens and modalities including sequential CRT (sCRT).

STUDY DESIGN

A prospective, multicentre, observational study assessing the effectiveness and safety of durvalumab as consolidation therapy in patients with LS-SCLC who have not progressed following CRT



Key inclusion criteria

- Able to provide informed consent
- Age ≥ 18 years
- Histologically or cytologically documented LS-SCLC
- ECOG PS 0–2 (prior to the first dose of durvalumab after CRT)
- Received platinum-based cCRT/sCRT* followed by Durvalumab# consolidation as 1st-line treatment at the discretion of physicians

Key exclusion criteria

- CRT only (no durvalumab consolidation)
- Concurrent anti-PD-1/PD-L1 therapy with CRT
- Concurrent interventional LS-SCLC trial
- Prior immune checkpoint inhibitor therapy
- Unsuitable for study participation (investigator judgment)



Sample Size:
N=200

Follow-up will continue until approximately 60% rwPFS maturity is achieved

❖ **Clinical Trial Identification :**
NCT07161388



Primary endpoint

- Real-world progression-free survival (rwPFS) (defined from 1st dose of Durvalumab)

Secondary endpoints

- Time to treatment discontinuation
- Overall survival

Safety endpoints

- TRAE
- SAE
- irAEs
- AEs leading to discontinuation

Exploratory endpoints

- The time to initiation of subsequent therapy (TFST)
- Patterns of progression and post-progression therapy
- rwPFS in subgroups
- Baseline characteristics of patients who received prior cCRT and sCRT

*: CRT modalities and regimens depend on physicians' decisions.

#:No disease progression following cCRT/sCRT: Patients who started prior durvalumab no more than 3 months ahead of enrolment in the study are allowed.