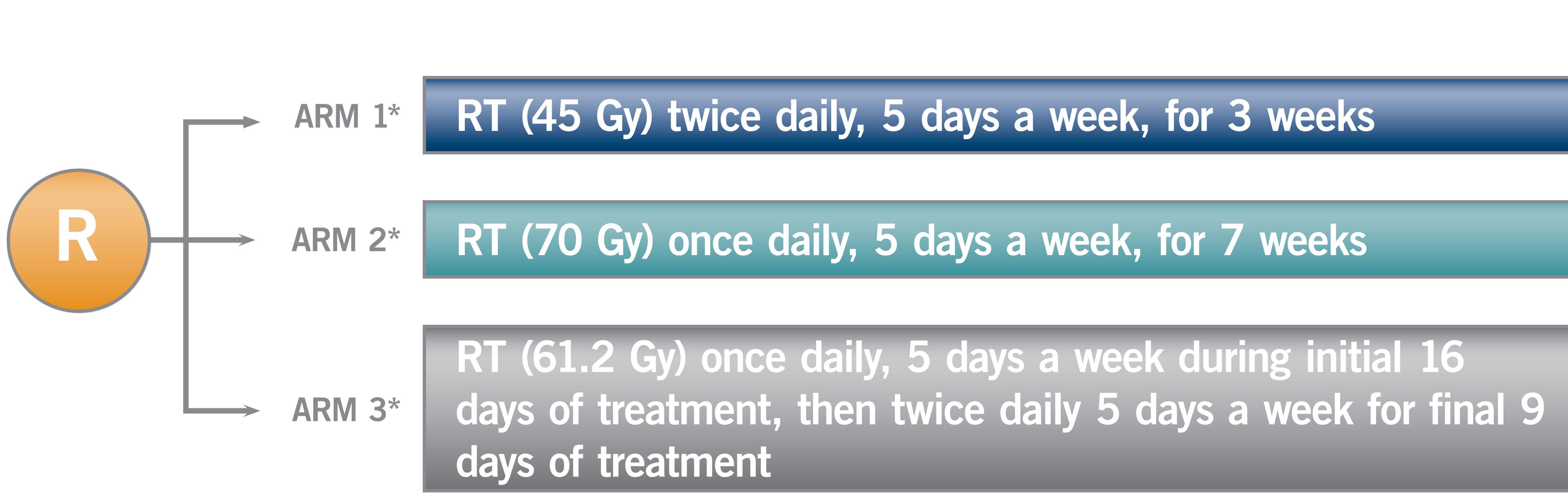
A Phase III trial comparing 3 different radiation therapy (RT) regimens as treatment for patients with limited-stage small cell lung cancer (SCLC) receiving cisplatin and etoposide • Estimated primary completion: June 2023 (Target N = 712) • Eligibility: Measurable SCLC restricted to 1 hemithorax with regional lymph node metastases



ClinicalTrials.gov Identifier: NCT00632853



- * Patients also receive cisplatin and etoposide q3wk x 4.
- Study Chairs: Jeffrey A Bogart, MD and Ritsuko U Komaki, MD, FACR

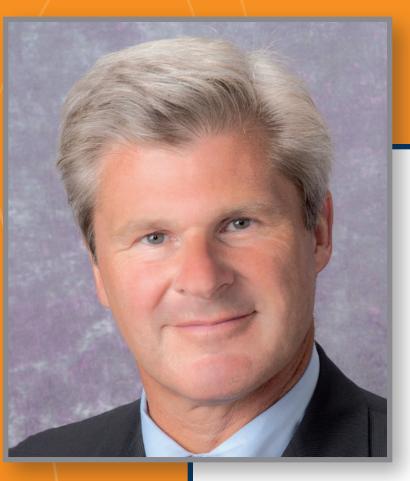




DR GOVINDAN

This study is asking some interesting radiation therapyspecific questions, but the

problem with small cell lung cancer is systemic relapse. I believe that studies such as this one have only a modest chance of improving outcomes and we should be looking for better systemic therapy agents. That said, I do enroll patients on this study.



DR SOCINSKI

We have done nothing in medical oncology to improve the cure rates of limited-stage

small cell lung cancer. We're still using cisplatin/etoposide, which I used as a fellow in the late 1980s. All the gains we have made in limited-stage small cell lung cancer have been from radiation therapy. The study evaluates 3 different radiation therapy regimens that are fairly aggressive. However, in limited-stage small cell lung cancer the paradigm is "No pain, no gain." This is a potentially curable cancer, and aggressive radiation therapy is important. Unfortunately, this study has not been accruing as well as it should, and I would love for physicians to enroll patients on this trial.

