

# Real-world Utilization and Outcomes with PACIFIC Regimen in Stage III Unresectable Non-small Cell Lung Cancer Patients: Results from a Multicenter US Database

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Study sponsored by: Johnson & Johnson

## BACKGROUND

- The PACIFIC-R study (NCT03798535)<sup>1</sup> investigated the real-world use of the PACIFIC regimen (durvalumab after concurrent chemoradiotherapy [cCRT]) in patients with stage III unresectable non-small cell lung cancer (NSCLC) at various centers, primarily across the European Union.
  - However, the study is limited by only including patients who received the PACIFIC regimen as part of the early access program
  - The study may not be fully reflective of the real-world experience, encompassing both academic and community centers.

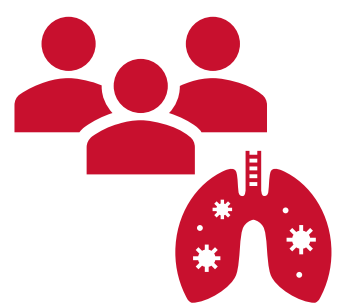
**Objectives:** To evaluate contemporary treatment patterns and outcomes of the PACIFIC regimen across the United States (US).

## METHODS



### Database

COTA, a large-scale real-world US multicenter database



### Inclusion criteria

- Newly diagnosed patients with stage III unresectable NSCLC, and
- Treated with cCRT ± durvalumab from 1/2018 through 7/2023

- Providers self-identified on COTA as academic vs. community practice.

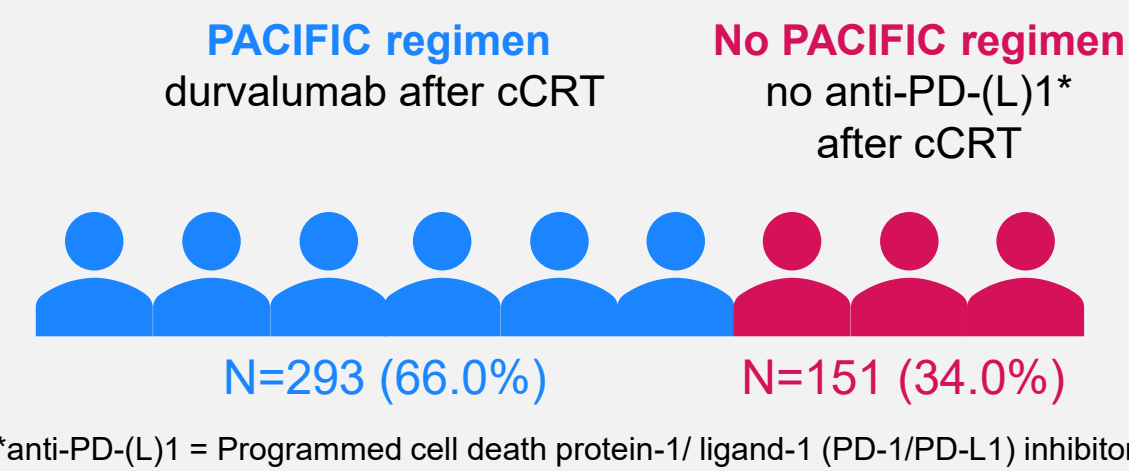
- Successful receipt of the PACIFIC regimen** = initiation of durvalumab after cCRT

### Analyses

- Patient demographics and treatment patterns were analyzed descriptively.
- Treatment characteristics among subgroups were compared using the t-test.
- Overall survival (OS) and progression free survival (PFS) were assessed from durvalumab initiation using the Kaplan–Meier method.
- Patients with progression from cCRT initiation to durvalumab initiation were excluded from treatment pattern and survival analysis (N=5).

## Patient cohort

- 444 patients were identified



## Patient characteristics

Table 1: Patient characteristics

Variables	PACIFIC regimen	No PACIFIC regimen
<b>All, n (%)</b>	<b>293 (100.0)</b>	<b>151 (100.0)</b>
<b>Age, n (%)</b>		
Mean (SD)	68.07 (9.4)	69.82 (9.9)
<65 years	97 (33.1)	40 (26.5)
65-75 years	123 (42.0)	65 (43.1)
>75 years	73 (24.9)	46 (30.5)
<b>Gender, n (%)</b>		
Male	163 (55.6)	89 (58.9)
Female	130 (44.4)	62 (41.1)
<b>Race, n (%)</b>		
White	217 (74.1)	112 (74.2)
Black or African American	37 (12.6)	18 (11.9)
Other/Unknown	39 (12.3)	21 (13.9)
<b>Histology, n (%)</b>		
Squamous	133 (45.4)	74 (49.0)
Non squamous	128 (43.7)	56 (37.1)
Other/Unspecified	32 (10.9)	21 (13.9)
<b>Type of setting, n (%)</b>		
Community	154 (52.6)	75 (49.7)
Academic	71 (24.2)	42 (27.8)
Not Specified	68 (23.2)	34 (22.5)
<b>Stage, n (%)</b>		
IIIA	151 (51.5)	79 (52.3)
IIIB	109 (37.2)	61 (40.4)
IIIC	21 (7.2)	7 (4.6)
III (unknown)	12 (4.1)	4 (2.7)

Note: There were no statistical differences in baseline characteristics between the two groups.

- The proportion of patients receiving the PACIFIC regimen was similar between community and academic centers (67.2% vs. 62.8%, respectively;  $P=0.41$ ).

## RESULTS

### Treatment patterns

- Carboplatin with paclitaxel was the most commonly used chemotherapy regimen (88.1%).
- Patients not receiving the PACIFIC regimen received a subtherapeutic dose of radiation (<54 Gy) more frequently than those receiving the PACIFIC regimen (15.2% vs. 3.4%;  $P=0.0001$ ).
- Median time from last dose of cCRT to durvalumab initiation was 36 days (**Figure 1**).
- Median duration of durvalumab use was 260.5 days (**Figure 2**).

Figure 1: Time from last cCRT to durvalumab initiation (N=288)

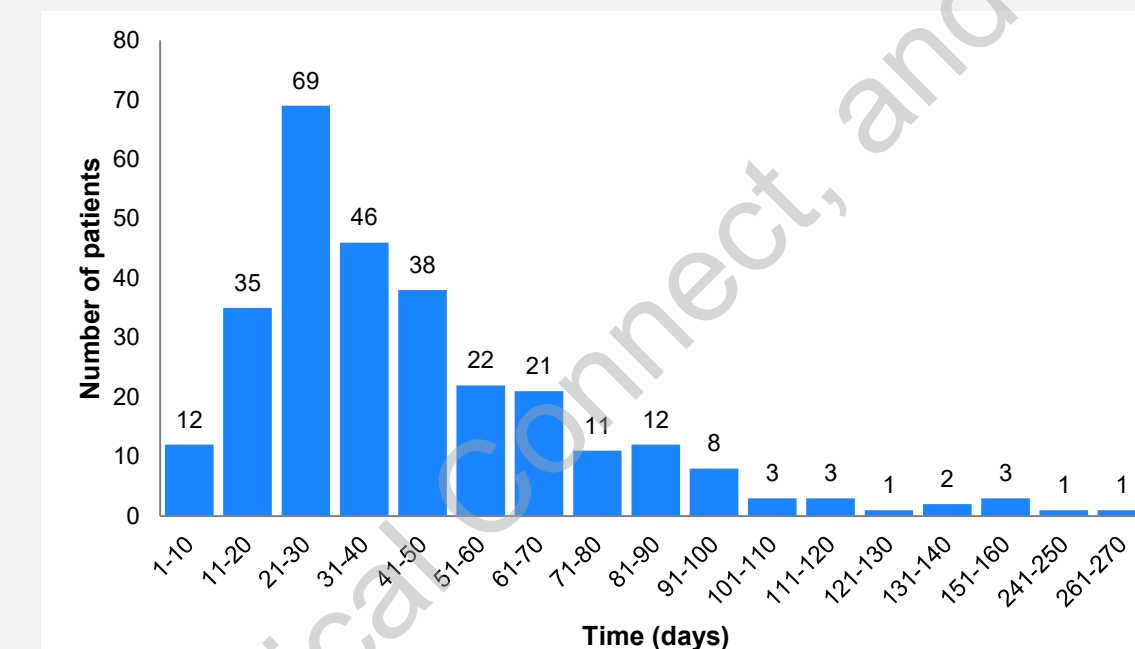
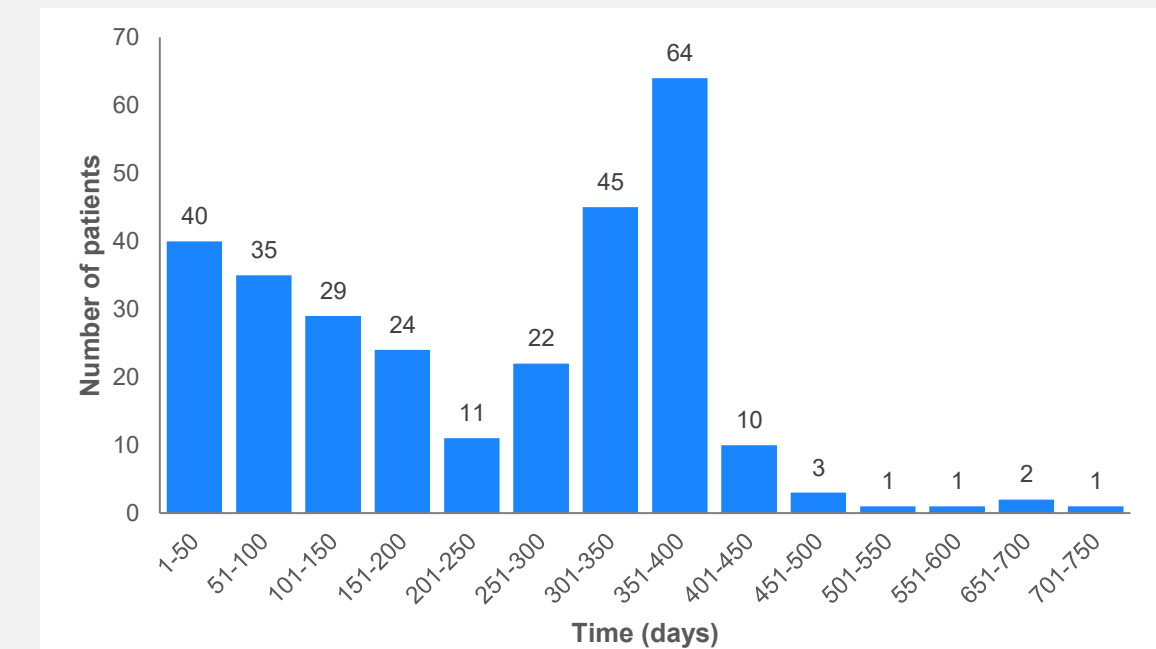


Figure 2: Durvalumab duration (N=288)



### Survival outcomes

- Median OS and PFS among patients that received the PACIFIC regimen were 42.6 and 21.3 months, respectively (**Figures 3 and 4**).
- OS and PFS stratified by time from cCRT to durvalumab initiation did not appear to differ (**Figures 5 and 6**).

Figure 3: OS among patients treated with PACIFIC regimen

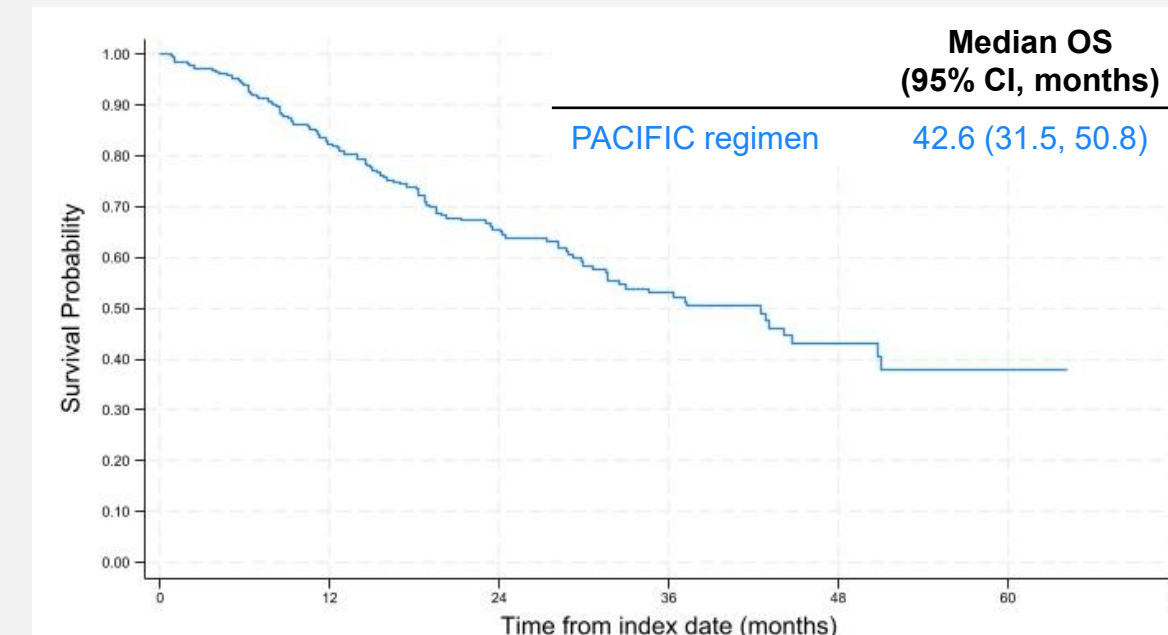


Figure 4: PFS among patients treated with PACIFIC regimen

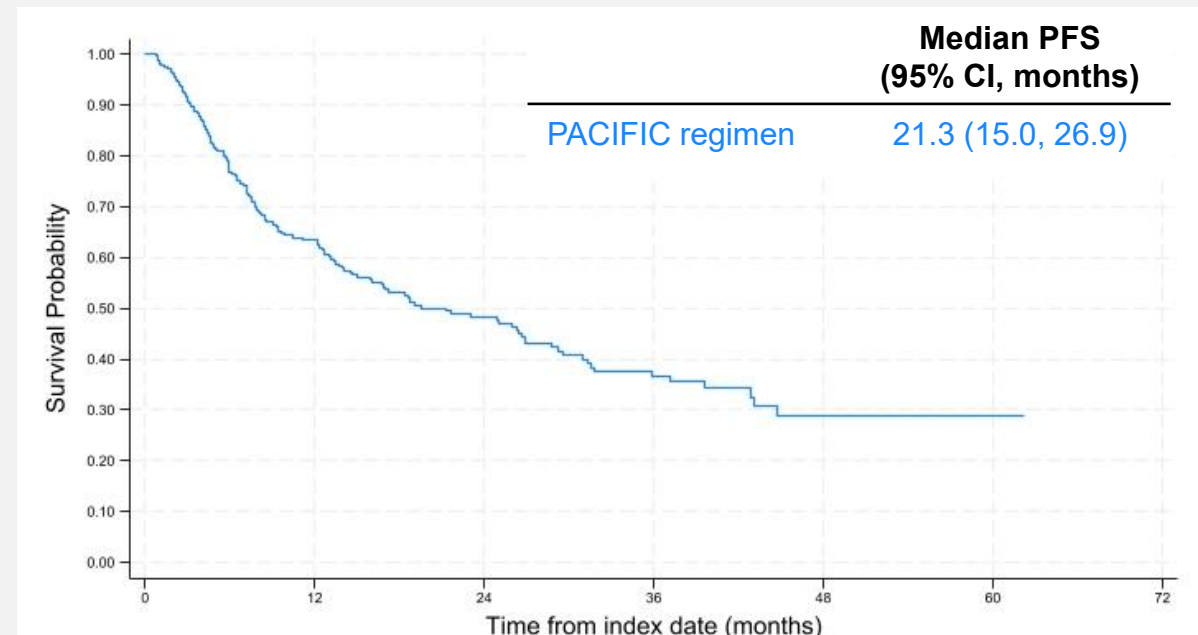


Figure 5: OS among patients treated with PACIFIC regimen stratified by time from cCRT to durvalumab initiation

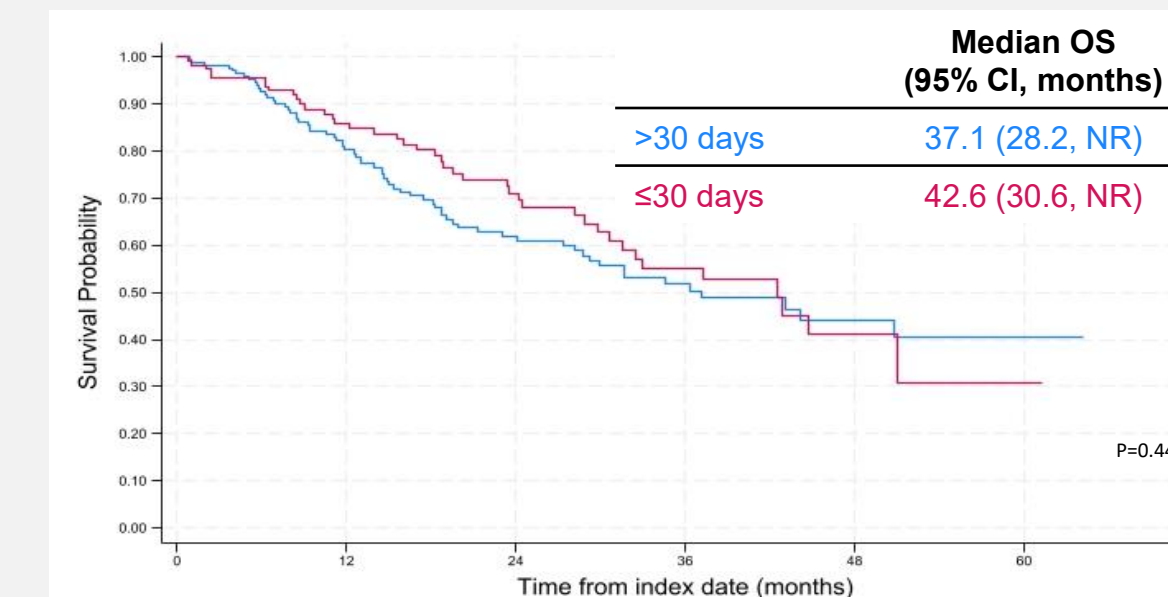
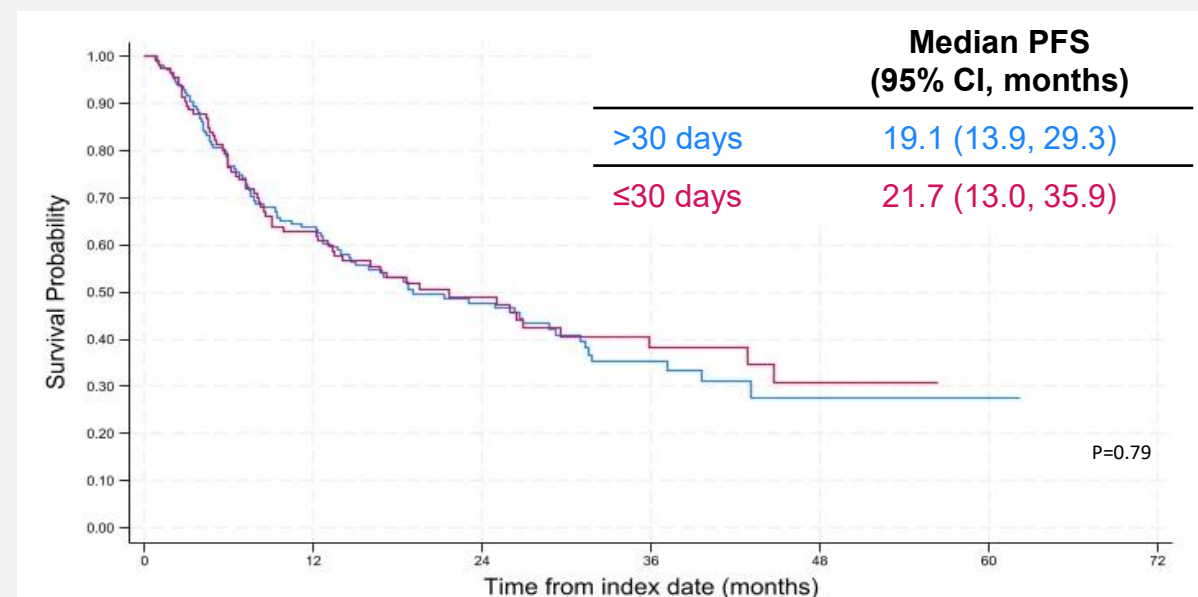


Figure 6: PFS among patients treated with PACIFIC regimen stratified by time from cCRT to durvalumab initiation



## CONCLUSIONS

- In this multicenter, real-world study, over one-third of stage III unresectable NSCLC patients did not receive the PACIFIC regimen.
- With a median OS of <4 years, there remains an unmet need to further improve outcomes in patients with stage III unresectable NSCLC.

**DISCLOSURES:** Authors MEM and DG are consultants to Johnson & Johnson. MZ, SR, QH, KD, BL, RLD, and IK are employees of Johnson & Johnson.

**ACKNOWLEDGMENTS:** The authors thank Adyasha Das, Jagatheeshwari, Suraj Sharma, and Harsharan U from Mu Sigma Inc. for their analytical support for this poster. The authors thank SciVoc Consulting Inc., Toronto, Canada for providing editorial and design assistance for the poster.

European Society for Medical Oncology (ESMO) Congress 2025  
October 17-21, 2025 | Berlin, Germany

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