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| Title | Treatment of Inoperable Advanced Non-small-cell Lung Cancer: Regimens with or without Taxane |
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Aim

To compare the clinical efficacy of taxane-containing regimens (TRs) with regimens not containing taxanes (NTRs) in the treatment of inoperable advanced non-small-cell lung cancer (NSCLC) with respect to four outcomes: response, survival, toxicity, and quality of life.

Conclusions and results

Nineteen trials with 7433 patients were selected for review. Meta-analysis showed pooled odds ratios and 95% confidence intervals for response rate and 1-year mortality of 1.34 (1.09, 1.66) and 0.94 (0.83, 1.05) respectively. For inoperable, advanced NSCLC, TRs produced a statistically significant effect on response rate when compared to NTRs. However, TRs did not statistically significantly alter 1-year survival when compared to NTRs. The pooled results of this review should be viewed cautiously because the drug combinations used in treatment regimens varied across trials. Toxicity profiles varied considerably across the different studies, hindering valid comparison. Only 6 trials reported on quality of life (QoL); based on these limited data, TRs and NTRs appeared to be similar in terms of overall impact on QoL.

Methods

Published and unpublished reports were identified by three methods: a) searching electronic databases and websites; b) hand searching the bibliographies of selected papers and conference proceedings; and c) contacting drug manufacturers and content experts. Reviewers considered only randomized controlled trials whose participants had advanced NSCLC with inoperable tumors. Eligible trials reported data on 1-year survival rate, response rate, toxicity, or QoL. Selected trials included at least one intervention with a taxane and one without a taxane. Two reviewers extracted study information independently.

Further research/reviews required

More randomized trials using uniform drug combinations are needed to allow valid comparisons between TRs and NTRs. Also, to enable meaningful QoL comparisons, researchers should make an effort to collect sufficient data on QoL.