

Trials Included in the Analysis

Trial	Treatment Arms	Patients included	
		Female	Male
BR.10	Chemotherapy vs. observation	79	152
BR.14	Gem/Cis vs. Gem/Vin vs. Vin/Cis	35	57
BR.18	Carbo/Taxol + BMS-275291 or placebo	206	561

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Baseline Demographics

1090 treated patients were analyzed, 320 (29%) were women

Variable		Female	Male	p-value
Pathological subtype	Adenoca.	223 (69.7 %)	338 (43.9 %)	<0.0001
	Squamous	32 (10.0 %)	246 (32.0 %)	
Baseline Hemoglobin	Grade 0	226 (70.9 %)	346 (45.1 %)	<0.0001
	≥ Grade 1	93 (29.2 %)	421 (54.9 %)	
BSA	< 2	305 (95.3 %)	581 (75.5 %)	<0.0001
	≥ 2	15 (4.7 %)	189 (24.6 %)	

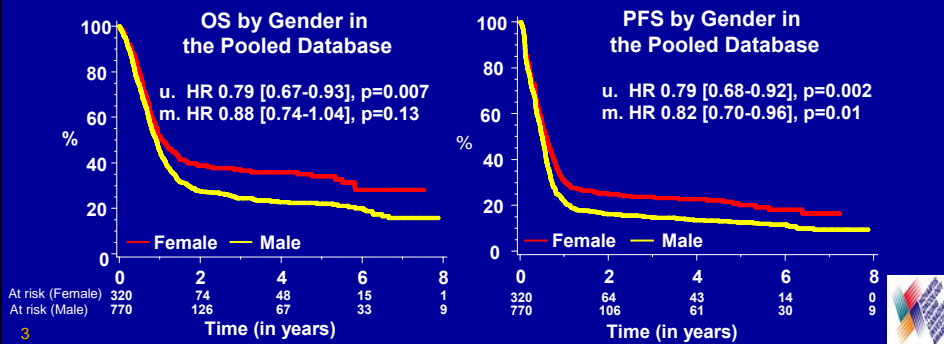
- The groups were well matched for age and stage
- Men were more likely to have co-morbidities such as diabetes, chronic airways disease or hypertension

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Response and Survival

Response	Female	Male	p-value
CR + PR	57 (27.4%)	170 (31.2%)	0.4
Stable	111 (53.4%)	257 (47.2%)	
Progression	32 (17.8%)	100 (20.0%)	



Toxicity, Dose Delivery and Quality of Life

Grade	Toxicity	Female	Male	p
Hematological toxicity				
≥ 1	Hb	91%	98%	<.0001
	Neuts	86%	82%	.14
≥ 3	Hb	9%	10%	.85
	Neuts	65%	61%	.18
	Febrile n.	7%	8%	.42
Non-hematological toxicity				
≥ 1	Stomatitis	22%	18%	.17
	N + V	78%	66%	.0004
	Infection	30%	28%	.53
≥ 3	Stomatitis	1%	1%	.84
	N + V	10%	6%	.08
	Infection	6%	9%	.20
Toxic deaths		1%	2%	NS

- No difference in dose intensity between sexes
- No difference in global quality of life between sexes

Conclusions

- Women in these NSCLC chemotherapy studies have modestly longer PFS than men
- While there was no significant difference in OS, the hazard ratio of 0.88 favoring women is similar to other recent analyses
- No major differences in response rate, DI, severe toxicity or QoL were observed
- Reasons women may have a small survival advantage remain unclear

