Lonsurf® (trifluridine/tipiracil) – Expanded indication

- On August 3, 2023, Taiho Oncology and Taiho Pharmaceutical announced the FDA approval of Lonsurf (trifluridine/tipiracil), as a single agent or ***in combination with bevacizumab***, for the treatment of adult patients with metastatic colorectal cancer previously treated with fluoropyrimidine-, oxaliplatin- and irinotecan-based chemotherapy, an anti-VEGF biological therapy, and if RAS wild-type, an anti-EGFR therapy.
    - Lonsurf was previously approved for this indication as a single agent.
- Lonsurf is also approved for the treatment of adult patients with metastatic gastric or gastroesophageal junction adenocarcinoma previously treated with at least two prior lines of chemotherapy that included a fluoropyrimidine, a platinum, either a taxane or irinotecan, and if appropriate, HER2/neu-targeted therapy.
- The approval of Lonsurf for the expanded indication was based on SUNLIGHT, a randomized, open label study in 492 patients with previously treated metastatic colorectal cancer. Patients were randomized to receive Lonsurf with or without bevacizumab until disease progression or unacceptable toxicity. The major efficacy outcome was overall survival (OS), and an additional efficacy outcome measure was progression-free survival (PFS).
    - Median OS was 10.8 months for Lonsurf plus bevacizumab vs. 7.5 months with Lonsurf monotherapy (hazard ratio [HR] 0.61, 95% CI: 0.49, 0.77; $p < 0.001$).
    - Median PFS was 5.6 months for Lonsurf plus bevacizumab vs. 2.4 months with Lonsurf monotherapy (HR 0.44, 95% CI: 0.36, 0.54; $p < 0.001$).
- The most common adverse reactions or laboratory abnormalities (≥ 20%) with Lonsurf use in combination with bevacizumab were neutropenia, anemia, thrombocytopenia, fatigue, nausea, increased aspartate transferase (AST), increased alanine transaminase (ALT), increased alkaline phosphatase, decreased sodium, diarrhea, abdominal pain, and decreased appetite.
- The recommended dosage of Lonsurf as a single agent or in combination with bevacizumab is 35 mg/m^2 up to a maximum of 80 mg per dose (based on the trifluridine component) orally twice daily on days 1 through 5 and days 8 through 12 of each 28-day cycle until disease progression or unacceptable toxicity. The dose should be rounded to the nearest 5 mg increment.
    - Refer to the drug label for bevacizumab dosing information.