Cervical Cancer Advances

A checkpoint inhibitor combination and an antibody-drug conjugate may offer new treatment options.

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Two experimental checkpoint inhibitors and an antibody-drug conjugate showed promising activity in people with relapsed or metastatic cervical cancer, researchers reported at the ESMO Virtual Congress 2020.

Balstilimab is a new PD-1 checkpoint blocker that restores T-cell activity against tumors. Zalifrelimab is an experimental CTLA-4 blocker that promotes T-cell multiplication. In two mid-stage trials with more than 300 participants, balstilimab alone demonstrated an overall response rate of 14%, while the combo shrank tumors in 22%.

“Advances in these agents offer renewed hope for patients who have limited treatment options,” says David O’Malley, MD, of the Ohio State University Comprehensive Cancer Center in Columbus. “This is especially important because this disease disproportionately affects younger women.”

Another Phase II study tested tisotumab vedotin, which uses a monoclonal antibody to deliver a potent chemotherapy drug directly to cancer cells. Among 101 people with advanced cervical cancer, the overall response rate was 24%, including seven with complete remission. The median overall survival time was 12.1 months.

Although these results are promising, it is best to prevent cervical cancer in the first place. Caused by the human papillomavirus (HPV), this malignancy can be prevented with a vaccine. A recent study in Sweden showed that the risk of cervical cancer among women vaccinated before age 17 dropped by nearly 90%.
