

PRESS RELEASE

ESMO 2024 – Proffered Paper Session

Villejuif, 13 September 2024

NEW HOPE IN THE TREATMENT OF THYMUS GLAND CANCERS

Thymus gland tumours, thymomas, and thymic carcinomas, are very rare. Every year, around 150 cases are diagnosed in France, which is approximately one or two cases per million inhabitants. This rare disease is often diagnosed late, at the metastatic stage, and chemotherapy is then the most appropriate strategy. However, since it is a rare disease, the search for new treatment options is more limited compared to other types of tumours. Dr. Jordi Remon, an oncologist at Gustave Roussy on the thoracic pathology committee, presents to the ESMO congress the very encouraging results of a clinical trial evaluating innovative management, oral treatment with lenvatinib, combined with infusion immunotherapy in thymus gland cancers.

Late breaking abstract no. 83 presented orally by Dr Jordi Remon on Friday 13 September at 3:05 pm.



[Watch the video online.](#)

The thymus is a small gland involved in the immune system and located in the upper part of the chest, between the lungs. It regresses after adolescence but may nevertheless undergo a malignant transformation. Faced with the rarity of these cancers, the national RYTHMIC network dedicated to thymus gland tumours was set up in France. This multidisciplinary group meets every 15 days to reflect on the management of each patient in a homogeneous manner following the same management guidelines and to coordinate any clinical trials.

When the tumour is diagnosed early, treatment is based on surgery, usually organ-saving. Unfortunately, this is not the most common case, especially for thymic carcinomas. Most patients present with non-specific symptoms: chest pain, cough, fatigue, etc. The only condition that may suggest these thymus gland tumours is myasthenia gravis, a rare autoimmune disorder associated in 30% of cases with a thymus gland-like tumour.

Standard treatment for patients with advanced or metastatic type B3 thymoma and thymus carcinoma is based on chemotherapy and in particular a combination with platinum salts. When the disease becomes resistant, there is no standard second line of treatment. In this context, recent trials have shown some activity of lenvatinib (a tyrosine kinase receptor inhibitor) and pembrolizumab (an immunotherapy drug).

Dr. Jordi Remon coordinated the PECATI clinical trial to evaluate the efficacy and safety of a combination of lenvatinib and pembrolizumab in patients with an advanced form of type B3 thymoma or thymic carcinoma, who have already received a first-line treatment. This international trial involves France, Spain and Italy.

Between September 2021 and February 2024, 43 patients aged 57 years on average were included in this trial. They received lenvatinib (20 mg *per os* daily) in combination with pembrolizumab (200 mg intravenous infusion once every 3 weeks) until disease progression or unacceptable toxicity and a maximum of 2 years of treatment. The primary endpoint is progression-free survival.

The initial results presented at the ESMO congress reveal that for more than 80% of patients, after 5 months of treatment, there is no progression of the disease. After 12 months of follow-up, the disease did not progress in more than 50% of patients. Side effects (diarrhoea, hypertension, liver damage) affected 34% of patients. No treatment-related deaths were observed.

"These results are positive when compared to disease progression in historical series for patients no longer receiving treatment," concludes Dr. Jordi Remon. Lenvatinib in combination with pembrolizumab is a potential standard treatment for advanced and already treated type B3 thymoma and thymic carcinoma. The toxicity profile is manageable, but close monitoring is recommended".

Late breaking abstract no. 83

PECATI: A phase 2 trial to evaluate the efficacy and safety of lenvatinib in combination with pembrolizumab in pretreated advanced B3-thymoma and thymic carcinoma.

Friday 13 September 2024 | 3:05 pm.

About Gustave Roussy

Ranked first in France, first in Europe and fourth in the world, Gustave Roussy is a centre of global expertise entirely dedicated to patients living with cancer. The Institute is a founding pillar of the Paris-Saclay Cancer Cluster. Source of therapeutic innovations and diagnostic breakthroughs, the Institute welcomes nearly 50,000 patients each year, including 3,500 children and adolescents, and develops an integrated approach combining research, care and teaching. An expert in rare cancers and complex tumours, Gustave Roussy treats all cancers

The image shows a blue and green gradient background with a silhouette of a city skyline. In the center, there are two overlapping rounded rectangular boxes. The left box is dark blue with white text: 'GUSTAVE/ROUSSY' in large letters, 'CANCER CAMPUS GRAND PARIS' in smaller letters below it, and a stylized 'A' logo. The right box is white with blue text: 'ESMO' in large letters and '2024' below it. There are also several white-outlined rounded rectangles scattered around the central boxes.

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at all stages of life. It offers its patients personalised care that combines innovation and humanity, taking into account both care and the physical, psychological and social quality of life. With 4,100 employees at two sites, Villejuif and Chevilly-Larue, Gustave Roussy brings together the expertise essential for high-level cancer research; 40% of treated patients are included in clinical studies. To find out more about Gustave Roussy and follow the Institute's news: <https://www.gustaveroussy.fr/en> [X](#), [Facebook](#), [LinkedIn](#), [Instagram](#).

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