

EFFICACY AND SAFETY OF ATEZOLIZUMAB PLUS BEVACIZUMAB COMBINED WITH CISPLATIN-BASED HEPATIC ARTERIAL INFUSION CHEMOTHERAPY FOR HEPATOCELLULAR CARCINOMA: A MULTICENTER RANDOMIZED CONTROLLED TRIAL

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Poster

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A multicenter randomized controlled trial found that adding cisplatin-based hepatic arterial infusion chemotherapy to atezolizumab plus bevacizumab nearly doubled the objective response rate in unresectable hepatocellular carcinoma compared to atezolizumab plus bevacizumab alone.

KEY POINTS

- The study randomized 67 patients with unresectable HCC to receive either atezolizumab plus bevacizumab alone (control, n=34) or combined with cisplatin-based hepatic arterial infusion chemotherapy (intervention, n=33).
- Objective response rate was 52.2% in the combination group versus 28.0% in the control group, while disease control rate was 82.6% versus 68.0%.
- Adverse event incidence was comparable between groups at approximately 60 percent, with all events consistent with known safety profiles.
- Cisplatin-based hepatic arterial infusion chemotherapy is widely used in Japan but not commonly adopted for HCC treatment outside Japan.
- The authors note that long-term outcomes require further investigation and the combination warrants additional validation.

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