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Industry Spotlight

Possible Kidney Cancer Treatment; Alpha Blockers in Kidney Stones

Recent news of a new kidney cancer treatment in early studies and insight into when to use alpha blockers to treat kidney stones top recent industry developments.

A new kidney cancer investigational medication has had good results in a phase 1 study. The compound CB-839, developed by Calithera Biosciences in South San Francisco, targets glutaminase, an enzyme involved in the conversion of glutamine to glutamate, a nutrient that cancer cells need to survive, the researchers noted. "Glutaminase is a very interesting target, and previous work in the lab has shown that CB-839 is effective at inhibiting it in renal cell cancers and that it enhances the anti-tumor efficacy of everolimus (another renal cell cancer drug)," said Funda Meric-Bernstam, MD, chair of the department of investigational cancer therapeutics at the University of Texas MD Anderson Cancer Center in Houston.

In the 15-patient study, all but one of the patients with clear cell and papillary renal cell cancers exhibited tumor control from the regimen, with a median time without cancer growth of 8.5 months, Meric-Bernstam reported in a news release from the European Organisation for Research and Treatment of Cancer. Calithera Biosciences funded the study.

In other news, a review of the medical literature suggests when to use alpha blockers such as tamsulosin (Flomax) to treat kidney stones, according to a report in *The BMJ*.

First author John M. Hollingsworth, MD, associate professor of urology at the University of Michigan Medical School, and his team evaluated a total of 55 randomized controlled trials comparing alpha blockers to placebo or control. They also considered stone size and location in the 5990 study participants, to determine if either was a predominant factor for successfully passing a stone.

They found a 57% higher chance of stone passage for larger stones with an alpha blocker, but no benefit for smaller stones. Location and type of alpha blocker did not make a difference, the researchers noted.

"If we can facilitate kidney stone passage without surgery, it allows our patients to avoid extra pain and risks that come with a surgical procedure," Hollingsworth said.

"It's important not to discount low-risk options for patients who may benefit from them," said senior author Philipp Dahm, MD, professor of urology at the University of Minnesota Medical School. ●

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