

Tobacco smoking declines in Australia

Smoking prevalence in Australia dropped by 15% between 2010 and 2013, according to newly released figures from the Australian Institute of Health and Welfare (AIHW). The time period covers the introduction of the 2011 Tobacco Plain Packaging Act. Australia was the first country to introduce such legislation, which mandates standardised packaging for tobacco products. The measure seems to have worked. The proportion of Australians older than 14 years smoking cigarettes on a daily basis has fallen from 15.1% to 12.8%. "This means the daily smoking rate has halved since 1991", points out AIHW spokesperson Geoff Neideck.

"The decline in smoking prevalence in Australia since 2010 is slightly higher than the longer term trend (0.76% per year for any smoking versus 0.6%) and is primarily in take-up of smoking", notes Robert West

from University College London, London, UK. "The figures are very much in line with the projections when plain packaging was being proposed", he added. They would also seem to support the notion that standardised packaging deters youngsters from taking up the habit. Britain, France, Ireland, and New Zealand have pledged to pass similar legislation. The tobacco industry has taken note, challenging Australia at the World Trade Organisation. "The industry has been demanding these figures—they were saying that plain packaging wasn't going to make much difference", explains Amanda Sandford (Action on Smoking and Health, London, UK). But they are unlikely to give up the fight. "They are certainly not going to hold back, they'll continue trying to undermine and challenge legislation", predicted Sandford.

Support for tobacco control in Australia remains staunch, with large majorities in favour of making it more difficult to buy tobacco in shops. 2010–13 also saw falls in the average number of cigarettes smoked every week (from 111 to 96), and an increase of almost 2 years in the average age at which Australians first try cigarettes (from 14.2 years to 15.9 years). More than three-quarters of 14–24 year olds in the country have never smoked. Australia introduced the first in a series of sharp tax hikes on tobacco products in December, 2013. The increases amount to 12.5% every year for 4 years; the second rise will occur in September, 2014. All of which means that Australia's next set of tobacco use statistics is likely to be every bit as impressive as the current batch.

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For the Australian Government announcement see <http://www.aihw.gov.au/media-release-detail/?id=60129548108>

Lanreotide delays progression of neuroendocrine tumours

The somatostatin analogue lanreotide can prolong progression-free survival in patients with advanced enteropancreatic neuroendocrine tumours (NETs), according to the findings of the CLARINET study.

Although NETs of the pancreas, midgut, and hindgut are rare, patients commonly present with advanced stages of disease. Somatostatin analogues are often used to ameliorate symptoms that might occur as a result of tumour overproduction of hormones. To determine the effect of the analogue lanreotide on disease progression in patients with enteropancreatic NETs, the international placebo-controlled, double-blind, CLARINET phase 3 study was conducted (NCT00353496). 204 patients were enrolled with metastatic enteropancreatic NETs that were grade 1 or 2 (Ki-67 staining value <10%); most participants (84%) were treatment-

naive, and 33% had hepatic tumour volumes that exceeded 25%.

Participants were randomly assigned to receive either lanreotide in an extended-release, aqueous-gel form (120 mg) or placebo (sodium chloride). After 2 years of treatment, the median progression-free survival in patients in the lanreotide group had not been reached, whereas it was 18 months (95% CI 12.1–24.0) for participants in the placebo group ($p < 0.001$). The risk of disease progression was reduced with lanreotide compared with placebo (progression or death hazard ratio 0.47, 95% CI 0.30–0.73). Overall survival and quality of life did not differ significantly between groups.

First author Martyn Caplin (Royal Free Hospital, London, UK) said, "The CLARINET study demonstrated not only significant anti-tumour effect of lanreotide autogel in both intestinal and pancreatic NET cohorts but also

demonstrated impressive results in patients with grade 2 NETs and in patients who had more than 25% of their liver replaced by tumour metastases." Caplin added, "In the treatment algorithm lanreotide may now be considered a potential first-line anti-tumour agent in treatment of grade 1 and 2 enteropancreatic NETs."

"This is an important study", Matthew Kulke (Dana-Farber Cancer Institute, Boston, MA, USA) told *The Lancet Oncology*. "It adds an important treatment option for patients with this disease, who, at present, have relatively few options." Kulke added, "This study will change practice. Somatostatin analogues will increasingly be used for control of tumour growth—they have the advantage of being effective and are also very well tolerated."

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