The current study included 750 patients over the age of 18 who were diagnosed with advanced kidney cancer and were previously untreated for the disease. Half were treated with a six-week cycle of sunitinib, and half were treated with a six-week cycle of IFN-alpha. The median progression-free survival for treatment with sunitinib was 11 months, compared with 5 months following treatment with IFN-alpha. In addition, 31 percent of the patients in the sunitinib arm of the study experienced substantial tumor shrinkage compared with 6 percent of the patients receiving the standard treatment.

Patients in the sunitinib group also reported significantly better health-related quality of life than those in the IFN-alpha group. Most toxicities observed with sunitinib treatment — such as hypertension, hand-foot syndrome, vomiting, and diarrhea — were ameliorated by dose interruption or modification.

Investigators from the following centers also contributed to the current study: Baylor Sammons Cancer Center/Texas Oncology PA, Dallas, TX; Klinika Oncologii Oddzial Chemioterapii, Poznan, Poland; Massachusetts General Hospital, Boston, MA; The Cleveland Clinic Foundation, Cleveland, OH; Hospital Pitie-Salpetriere, Paris, France; Hopital Europeen Georges-Pompidou, Paris, France; Centre Leon Berard, Lyon, France; Military Institute of Medicine, Warsaw, Poland; and City of Hope Comprehensive Cancer Center, Los Angeles, CA. The study was sponsored by Pfizer, Inc.