Quality of life for people taking vorasidenib

About the INDIGO Study

The INDIGO trial[1] - a rigorous international study involving 331 patients across 92 hospitals in 11 countries and conducted between 2020 and 2022, followed patients with IDH-mutant glioma for a median of 20 months to carefully evaluate the benefits and safety of vorasidenib. The results of a follow up study[2] just published (Oct 29 2025) report the effect of vorasidenib on tumour growth rate, health-related quality of life (HRQOL), neurocognitive function and seizure control. These results are the focus of this article and reflect 6 months of additional data, from Sept 6, 2022 to unblinding March 7, 2023.

Living with a low-grade glioma diagnosis brings uncertainty and difficult decisions. For people living with IDH-mutant gliomas, the journey often involves careful monitoring after surgery, with the knowledge that additional treatments like radiation or chemotherapy may be needed in the future. This research offers encouraging news about vorasidenib that could help delay tumour growth while preserving the quality of life that matters most to people living with IDH-mutant glioma.

What this research means

People taking vorasidenib went much longer without their tumour progressing:

- The median time without progression was 11.4 months for those on placebo
- For those on vorasidenib, the median hadn't even been reached yet meaning most patients were still doing well at the end of the study period.

Perhaps even more importantly, people on vorasidenib waited substantially longer before needing their next treatment intervention, giving them more time living their lives without the side effects of radiation or chemotherapy.

One of the most reassuring findings from this study is what *didn't* happen. Many people and their families worry that cancer treatments will affect their thinking, memory, and overall wellbeing. The researchers carefully measured these concerns and found:

1. Quality of life remained high

People on vorasidenib maintained their quality of life throughout the study. Their scores on comprehensive wellness assessments stayed strong from the beginning of treatment

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[1] Mellinghoff IK, van den Bent MJ, Blumenthal DT, Touat M, Peters KB, Clarke J, Mendez J, Yust-Katz S, Welsh L, Mason WP, Ducray F, Umemura Y, Nabors B, Holdhoff M, Hottinger AF, Arakawa Y, Sepulveda JM, Wick W, Soffietti R, Perry JR, Giglio P, de la Fuente M, Maher EA, Schoenfeld S, Zhao D, Pandya SS, Steelman L, Hassan I, Wen PY, Cloughesy TF; INDIGO Trial Investigators. Vorasidenib in IDH1- or IDH2-Mutant Low-Grade Glioma. N Engl J Med. 2023 Aug 17;389(7):589-601. doi: 10.1056/NEJMoa2304194. Epub 2023 Jun 4. PMID: 37272516; PMCID: PMC11445763.

[2] Cloughesy TF, van den Bent MJ, Touat M, Blumenthal DT, Peters KB, Ellingson BM, Clarke JL, Mendez J, Yust-Katz S, Welsh L, Mason WP, Ducray F, Umemura Y, Nabors B, Holdhoff M, Hottinger AF, Arakawa Y, Sepulveda JM, Wick W, Soffietti R, Perry J, Giglio P, de la Fuente M, Maher E, Bottomley A, Tron AE, Yi D, Zhao D, Pandya SS, Steelman L, Hassan I, Wen PY, Mellinghoff IK; INDIGO trial investigators. Vorasidenib in IDH1-mutant or IDH2-mutant low-grade glioma (INDIGO): secondary and exploratory endpoints from a randomised, double-blind, placebo-controlled, phase 3 trial. Lancet Oncol. 2025 Oct 29:S1470-2045(25)00472-3. doi: 10.1016/S1470-2045(25)00472-3. Epub ahead of print. PMID: 41175888.

through to the end, matching those on placebo. This means the medication didn't interfere with daily activities, emotional wellbeing, or social connections.

2. Thinking and memory were preserved

Cognitive function tests showed no negative effects on:

- Memory and learning
- Attention and focus
- Problem-solving abilities
- Mental processing speed
- Working memory

This is particularly important because radiation therapy, while effective, can sometimes affect thinking and memory over time, especially with long-term follow-up. Having a treatment option that controls tumour growth without these effects is significant.

3. An unexpected benefit: fewer seizures

Seizures are often one of the most distressing aspects of living with a grade 2 glioma. They can interfere with daily life, affect your ability to drive and therefore loss of independence, and create anxiety about when the next one might occur.

The study found something remarkable: people taking vorasidenib experienced significantly fewer seizures than those on placebo - about one-third the rate. This benefit was especially pronounced for people with oligodendrogliomas. While everyone in the study needed to have their seizures reasonably controlled to participate, many people still experienced breakthrough seizures. The medication appeared to provide extra protection against these events.

How vorasidenib works differently

Unlike traditional chemotherapy that tries to kill rapidly dividing cells, vorasidenib works by targeting a specific mutation in the tumour's metabolism. Tumours with IDH mutations produce an abnormal substance called 2-hydroxyglutarate, which helps the tumour grow. Vorasidenib blocks this process.

The effects develop gradually over time:

- In the first 6 months, tumours essentially stop growing
- Over 12-24 months, many tumours actually began to shrink modestly
- This is different from the continuous growth seen in patients on placebo

This gradual effect reflects a fundamentally different mechanism than traditional cancer treatments - one that appears to work with your body rather than causing the dramatic but harsh effects of cytotoxic therapies.

The safety profile

No medication is without side effects, and it's important to understand what to expect:

- Elevated liver enzymes (which were monitored regularly)
- The frequency of these side effects remained stable or decreased over time—there was no accumulation of toxicity with longer treatment

It is important to note that:

- Very few patients (less than 5%) had to stop treatment due to side effects
- There were no treatment-related deaths
- The safety profile remained consistent throughout the study with no new concerns emerging over time

What this means for treatment decisions

This research suggests that vorasidenib could offer:

1. More time before needing radiation or chemotherapy
2. Slower tumour growth or even gradual shrinkage
3. Maintained quality of life and cognitive function
4. Potentially better seizure control
5. A manageable side effect profile.

This could mean more time working, spending time with family, pursuing hobbies, and living life, without the immediate need for treatments that might affect energy levels, thinking, or overall wellbeing.

Looking forward

The study is ongoing, and researchers continue to follow patients to understand the long-term effects, particularly on overall survival. Given that grade 2 gliomas typically grow slowly, it will take years to fully understand this impact, but the early signals are promising.

The future of glioma treatment is increasingly moving toward precision medicine: treatments targeted to the specific characteristics of the tumour. This research represents an important step in that direction, offering hope not just for more time, but for better time, time lived fully, with preserved function and quality of life.