A new publication by Yale Cancer Center highlights recent breakthrough therapies developed to treat non-small cell lung cancer (NSCLC). The goal of the study is to provide views on how basic science advances will impact clinical research areas to help influence how NSCLC will be
managed over the coming decade. The perspective is published online today in the journal *Nature Medicine*.

"Worldwide, lung cancer is the most common cause of cancer-related death," said Meina Wang, Ph.D., associate research scientist at Yale Cancer Center and lead author of the perspective. "There have been many advances in the treatment NSCLC over the past two decades, but we need to keep the focus on new therapies to continue to make progress and treat this deadly disease."

In the report, authors show molecular targeted therapies and immunotherapies for NSCLC have improved outcomes; however, most advanced NSCLC cases become resistant to current treatments and eventually progress. In the perspective, researchers discuss these recent breakthrough therapies and combinations developed for NSCLC to combat the problem and detail the current understanding of mechanisms of resistance and the importance of incorporating genomic analyses into clinical studies. The authors underscore the importance of the future role of neoadjuvant and maintenance combination therapy approaches to potentially cure early-stage disease. Researchers also note a major challenge to the successful development of rational combination therapies will be the application of robust predictive biomarkers for a clear-cut strategy for each patient.

"The biggest impact on long-term outcome for NSCLC could be the use of rational combination therapies tackling early disease, to maximize tumor eradication," said Chris Boshoff, MD, Ph.D., Chief Development Officer, Oncology, Pfizer Global Product Development, and senior author of the perspective. "We provide our prospective on the latest insights into the management of lung cancer and emphasize the potential of personalized combination immunotherapy-based regiments to improve outcomes further."
"We expect a continued trajectory of improved outcomes for NSCLC and lung cancer in general," said Roy S. Herbst, MD, Ph.D., Chief of Medical Oncology at Yale Cancer Center and Smilow Cancer Hospital, Disease Program leader at Yale, and co-senior author of the study. "But expansion and further investment in collaborative research using big data sets between industry, academia, government, and other non-profit organizations are essential to continue our promising journey towards a cure."


Provided by Yale University


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