



Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/closing-gaps-nsclc/latest-guidelines-bring-change-for-nsclc-care/10282/

ReachMD

www.reachmd.com info@reachmd.com (866) 423-7849

Latest Guidelines Bring Change for NSCLC Care

Announcer:

This is ReachMD, and you're listening to Closing the Gaps in NSCLC, sponsored by Lilly.

Dr. Birnholz:

From the ReachMD studios, I'm Dr. Matt Birnholz. And on this episode, we hear from Dr. Christine Bestvina, oncologist and Assistant Professor of Medical Oncology at the University of Colorado. While reviewing the NCCN guidelines, Dr. Bestvina examines how recent updates have impacted care for non-small cell lung cancer patients. Here's what she had to say.

Dr. Bestvina:

So, I have to commend the NCCN collaborative team for really doing a quick turnaround from recent data that we've had presented and that has come available to modifying the guidelines so that this new and important information can be incorporated more quickly into patients' line of care. So, changes that have been made for non-small cell lung cancer, we're seeing immunotherapy incorporated into patients' care earlier in their treatment course, and so what that looks like is for patients who have Stage IV non-small cell lung cancer, immunotherapy is now being incorporated into frontline therapy. Particularly for patients who have adenocarcinoma, they're receiving carboplatin/pemetrexed and pembrolizumab, the triplet therapy in the frontline setting. For patients who have high levels of PD-L1, or a protein, those patients are also able to receive pembrolizumab monotherapy in the frontline setting. So, this is quite a dramatic change from just a few years ago. We're also seeing changes in frontline therapy that's recommended for patients who have specific targetable mutations, primarily patients who have adenocarcinoma. The last big update that we're seeing is for patients who have Stage III disease, as opposed to the Stage IV patients we just discussed. Patients who are treated with a combination of chemotherapy and radiation are now eligible to receive a year of consolidation therapy based off of the results of the PACIFIC trial where patients are experiencing an improved both progression-free survival as well as overall survival benefit.

<u>Dr. Birnholz:</u>

Thank you Dr. Bestvina for providing an overview of the recent update to the NCCN guidelines. For ReachMD, I'm Dr. Matt Birnholz, thanks for listening.

Announcer:

The preceding program was sponsored by Lilly. Content for this series is produced and controlled by ReachMD. This series is intended for healthcare professionals only. To revisit any part of this discussion and to access other episodes in this series, visit ReachMD.com/NSCLC. Thank you for listening to ReachMD. Be Part of the Knowledge.