

Immunotherapy of Lung Cancer: Current status in metastatic and non metastatic NSCLC

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The introduction of checkpoint inhibitor to the treatment of advanced metastatic non oncogenic driven non-small cell lung cancer (NSCLC) has completely revolutionized treatment opportunities for this “difficult to treat” disease.

Following the confirmation of efficacy in pretreated patients meanwhile checkpoint inhibitors alone or in combination with chemotherapies have been implemented as standard of care in first-line treatment for the most patients with advanced NSCLC generating unprecedented improvements in long term survival.

However, selection between different therapies is based on clinical decisions and there is an urgent need for validated predictive biomarker. Assessment of circulating tumor DNA (ct-DNA) or other circulating marker might be a promising tool in this area.

Moving from metastatic NSCLC to non-metastatic NSCLC consolidation treatment with immunotherapy after chemoradiotherapy of locally advanced has confirmed efficacy and meanwhile perioperative strategies with immunotherapies will rise the bar for cure rate of patients with resectable NSCLC. Again, circulating markers might be of great help to select benefitting patients from these innovative strategies.

In conclusion the integration of immunotherapies in several treatment strategies of NSCLC has significantly contributed to the “chronification” of advanced NSCLC. Novel biomarker will be essential for the most effective usage of these novel treatment opportunities.