

عنوان مقاله:

Lung Cancer Therapy; 2018 and Beyond

محل انتشار:

اولین همایش بین المللی و سومین همایش سراسری سرطان های ریه و اقدامات مداخله ای ریوی (سال: 1397)

تعداد صفحات اصل مقاله: 2

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خلاصه مقاله:

Iran The utilization of targeted immunotherapy in cancer treatment has dramatically improved both the progression of disease and overall survival in patients, especially in patients with non-small cell lung carcinomas (NSCLC). The advent of identifying specific gene mutations, so that opportunities to use targeted therapy are uncovered, has transformed the way in which physicians approach disease prognosis. By understanding the intricate mechanics of the immune system and the way in which cancer cells alter those mechanisms, cancer therapy can have a more focused course. One of the reasons that cancer cells can successfully evade the immune system is due to its ability to initiate an inhibitory signaling cascade. Immune-modulating biologics, such as CTLA-4 inhibitors and both PD-1 and PD-L1 inhibitors, have successfully weakened the inhibitory effects of cancer cells on the immune system. These positive responses to therapy are most apparent in patients who display PDL1 expression on their tumor cells. Therefore, it is important for NSCLC patients to undergo PD-L1 testing in order to recognize whether they would greatly benefit from the use of these new immunotherapies. In addition, extensive research on therapeutic options for specific gene mutations, such as EGFR and ALK, has altered front-line therapy protocols. Many NSCLC patients are in advanced stages and present with metastases to the CNS. The introduction of a 3rd generation EGFR tyrosine kinase inhibitor (TKI), osimertinib, and 2nd generation ALK inhibitor (alectinib) has shown to improve both progression free survival and overall survival rates in these patient populations, while also limiting adverse effects in comparison to both older generation TKIs and ALK inhibitors and chemotherapy. These alterations in front-line therapies are demonstrative of the advancements and therapeutic benefits in identifying genetic disposition for NSCLC patients. Although immunotherapies have shown to be more efficacious than standard chemotherapy regimens in these patient populations, there are always adverse side effects from immunomodulation that must be continually monitored and corrected by the medical provider. The management of these toxicities is integral in the overall well-being of the patient, as outweighing the risks versus benefits of therapies is a dynamic process in patient care.

کلمات کلیدی:

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