

### 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-nscl/keys-to-successful-maintenance-therapy-for-advanced-nscl/11165/>

### ReachMD

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

---

## Keys to Successful Maintenance Therapy for Advanced NSCLC

Announcer:

Welcome to *Closing the Gaps in Non-Small Cell Lung Cancer* on ReachMD, sponsored by Lilly.

On today's program, we'll hear from Dr. Michael Shafique, who's an Assistant Professor of Thoracic Oncology at the Moffitt Cancer Center in Tampa, Florida. Dr. Shafique joins us to share his keys to success for using maintenance therapy in advanced non-small cell lung cancer. Let's hear what he has to say now.

Dr. Shafique:

So, I think maintenance therapy in advanced lung cancer has made the most notable gains and has improved the outcomes of patients most clearly in stage 3 local advanced and unresectable lung cancers. The treatment paradigm for the longest time was concurrent chemotherapy and radiation, which, um, really had about a 15%, 5-year, uh, survival rate in those patients. And so, um, and even over many decades of, of trying to improve the outcomes of these patients, we, we really, uh, were lacking adequate therapies in order to consolidate and maintain their responses.

However, uh, recently in the last two or three years, we've been employing a, um, maintenance therapy after concurrent chemotherapy and radiation by giving immunotherapy immediately following the chemotherapy and radiation treatments.

This has improved not just the progression-free survival, but, uh, the overall survival in the vast majority of, uh, stage 3 lung cancer patients. We have, at this time, three-year survival data which looks very promising, and I think in the coming years, we'll hopefully see an improvement in our ability to cure patients with stage 3 lung cancer and really improve the five-year survival rates.

I think the most important take-home points for maintenance therapy in this setting is that for patients who complete the chemotherapy and radiation treatment, it's important to, um, then move these patients to the maintenance therapy with immunotherapy as, as quickly as possible. It's been shown that patients that begin the immunotherapy consolidation or maintenance therapy sooner enjoy better outcomes.

Announcer:

That was Dr. Michael Shafique shedding light on what we need to consider when approaching maintenance therapy. To revisit any part of this discussion and to access other episodes in this series, visit [ReachMD.com/NSCLC](https://ReachMD.com/NSCLC), where you can Be Part of the Knowledge. Thanks for listening!