

MULTIDISCIPLINARY MANAGEMENT IN STAGE III NSCLC

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Stage III NSCLC is a very heterogenous disease requiring combined multimodality treatment. Here, we present the case of a 55 year old female patient in an excellent general performance status who was diagnosed with a left sided central adenocarcinoma in clinical stage cT4 cN2 cM0. PD-L1 expression was 100% and molecular testing did not reveal any treatment relevant mutations. On the basis of an individual tumorboard-recommended treatment decision she initially received a definitive chemo/immuno-radiotherapy consisting of 66 Gy of radiation concurrent with 4 cycles of cisplatin, pemetrexed and pembrolizumab. Re-staging imaging after completion of initial treatment revealed a major response and the patient underwent subsequent complete tumor removal by pneumonectomy. Pathological examination of the resection specimen revealed an avital necrosis of the previous adenocarcinoma with complete pathological response. The surgery was well tolerated and currently, 3 years after initial diagnosis, the patient is still tumor-free.