Iniciativa científica de:

GECP lung cancer research

# Lung Cancer UPDATES

## WCLC HIGHLIGHTS

12 - 15 **SEPTIEMBRE** 2026

Seoul, Republic of South Korea



#WCLCUPDATES

Iniciativa científica de:

GECP lung cancer research

Lung Cancer UPDATES

WCLC HIGHLIGHTS

12 - 15 SEPTIEMBRE 2026

Seoul, Republic of South Korea

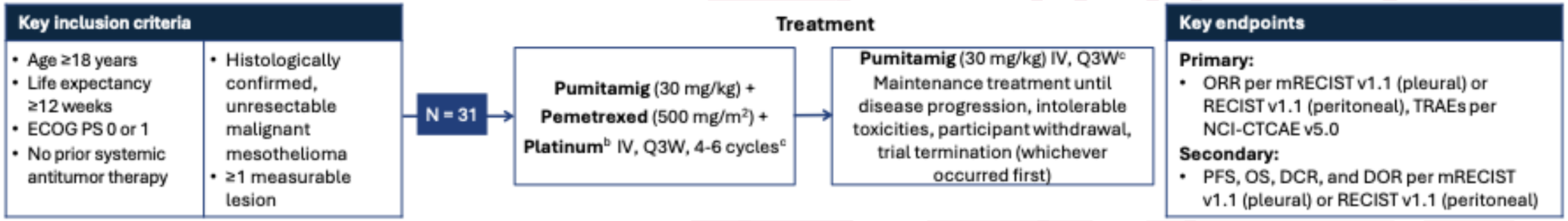
# Mesotelioma y otros tumores torácicos

Enric Carcereny i Costa, MD, MS
Coordinator of Thoracic, Brain and Sarcoma tumors Group
Catalan Institute of Oncology (ICO Badalona); B-ARGO/CARE-IGTP

# Mesotelioma y otros tumores torácicos

*MOO4.09: Haifeng Liu et al First-line Pumitamig (PD-L1 × VEGF-A bsAb) Plus Chemotherapy inUnresectable Malignant Mesothelioma: Long-term PFS and OS*

## Study design




## Patients characteristics

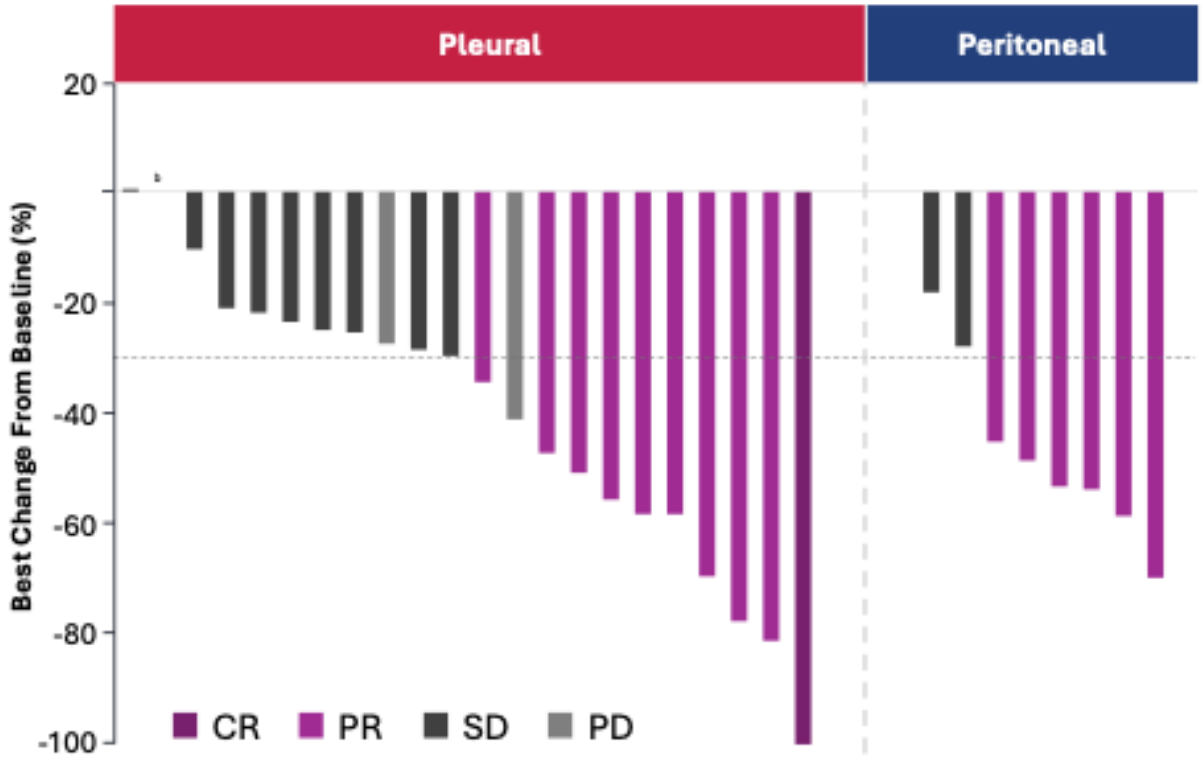
| Baseline characteristics | | Pleural (n = 23) | Peritoneal (n = 8) | Total (N = 31) |
|---|---|---|---|---|
| **Age**, median (range), years | | 56.8 (43–71) | 60.0 (48–70) | 57.6 (43–71) |
| **Sex**, n (%) | Male | 11 (47.8) | 5 (62.5) | 16 (51.6) |
| | Female | 12 (52.2) | 3 (37.5) | 15 (48.4) |
| **ECOG PS**, n (%) | 0 | 6 (26.1) | 1 (12.5) | 7 (22.6) |
| | 1 | 17 (73.9) | 7 (87.5) | 24 (77.4) |
| **Histology**, n (%) | Epithelioid | 13 (56.5) | 6 (75.0) | 19 (61.3) |
| | Non-epithelioid | 10 (43.5) | 2 (25.0) | 12 (38.7) |
| **Metastatic sites**, n (%) | 0 | 2 (8.7) | 1 (12.5) | 3 (9.7) |
| | 1 | 2 (8.7) | 0 | 2 (6.5) |
| | 2 | 8 (34.8) | 5 (62.5) | 13 (41.9) |
| | >2 | 11 (47.8) | 2 (25.0) | 13 (41.9) |
| **Metastases**, n (%) | Liver | 1 (4.3) | 1 (12.5) | 2 (6.5) |
| | Lung | 7 (30.4) | 1 (12.5) | 8 (25.8) |
| **Smoker**, n (%) | Never smoker | 17 (73.9) | 6 (75.0) | 23 (74.2) |

# Mesotelioma y otros tumores torácicos

*MOO4.09: Haifeng Liu et al First-line Pumitamig (PD-L1 × VEGF-A bsAb) Plus Chemotherapy inUnresectable Malignant Mesothelioma: Long-term PFS and OS*

## Tumor responses (cORR, DCR, mDOR)

| | | Pleural | | Peritoneal | | Total N = 31 |
|---|---|---|---|---|---|---|
| | | Overall n = 23 | Epithelioid[a] n = 13 | Overall n = 8 | Epithelioid[a] n = 6 | |
| **BOR**, n (%) | CR | 1 (4.3) | 1 (7.7) | 0 | 0 | 1 (3.2) |
| | PR | 9 (39.1) | 3 (23.1) | 6 (75.0) | 5 (83.3) | 15 (48.4) |
| | SD | 10 (43.5) | 7 (53.8) | 2 (25.0) | 1 (16.7) | 12 (38.7) |
| | PD | 2 (8.7) | 1 (7.7) | 0 | 0 | 2 (6.5) |
| **cORR**, % (95% CI) | | **43.5** (23.2–65.5) | **30.8** (9.1–61.4) | **75.0** (34.9–96.8) | **83.3** (35.9–99.6) | **51.6** (33.1–69.8) |
| **DCR**, % (95% CI) | | **91.3** (72.0–98.9) | **92.3** (64.0–99.8) | **100** (63.1–100) | **100** (54.1–100) | **93.5** (78.6–99.2) |
| **mDOR**, months (95% CI) | | **9.7** (5.6–17.8) | **11.1** (6.3–NA) | **16.3** (4.8–NA) | **11.4** (4.8–NA) | **11.1** (5.8–17.8) |



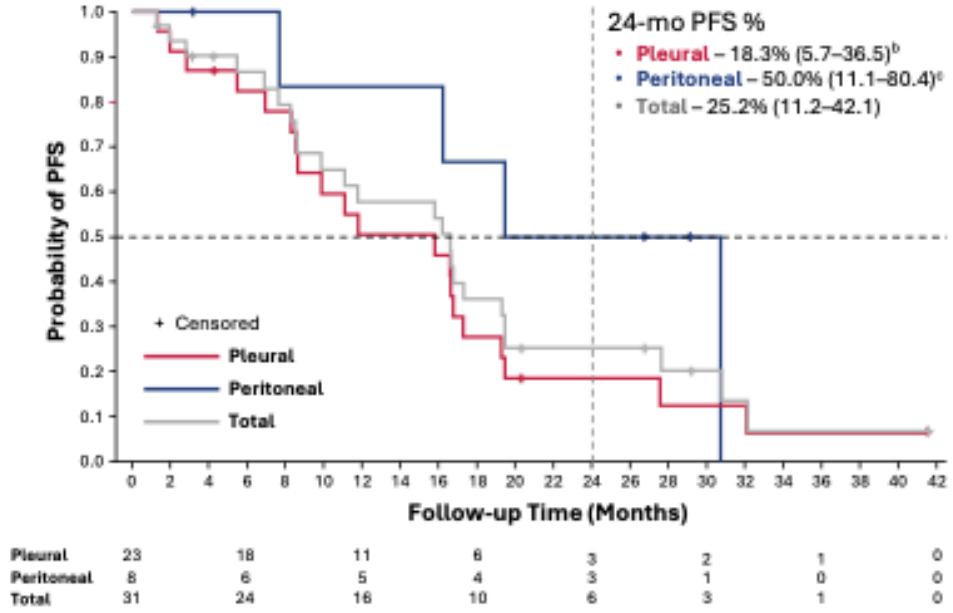
# Mesotelioma y otros tumores torácicos

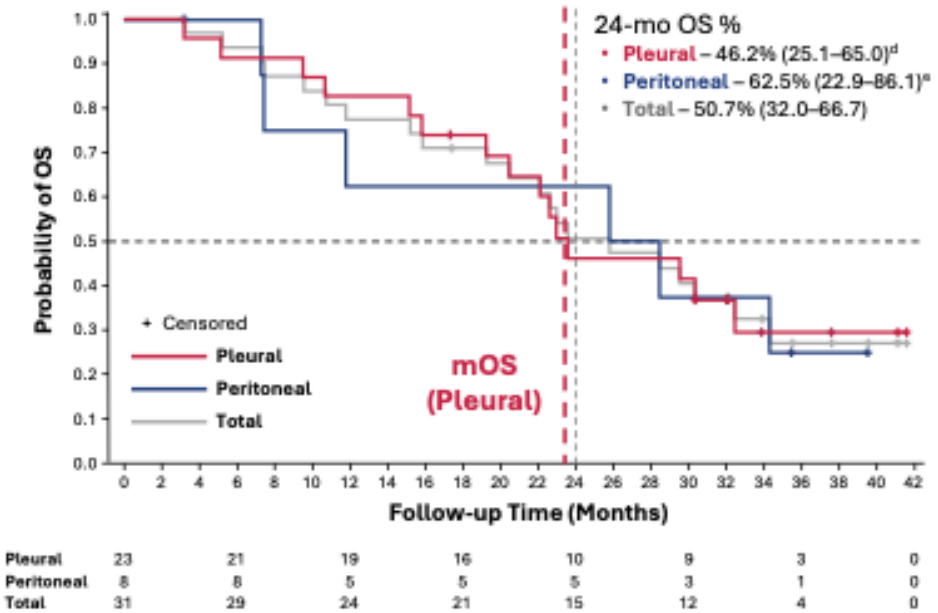
*MOO4.09: Haifeng Liu et al First-line Pumitamig (PD-L1 × VEGF-A bsAb) Plus Chemotherapy inUnresectable Malignant Mesothelioma: Long-term PFS and OS*

## Long-term survival outcomes (PFS and OS)

| PFS | Pleural | | Peritoneal | | Total |
|---|---|---|---|---|---|
| | All n = 23 | Epithelioid[a] n = 13 | All n = 8 | Epithelioid[a] n = 6 | N = 31 |
| **mPFS**, mo (95% CI)<br>Events, n (%) | **15.8** (8.3–17.3)<br>20 (87.0) | **15.8** (5.5–19.3)<br>12 (92.3) | **25.1** (7.7–NE)<br>4 (50.0) | **19.5** (7.7–NE)<br>4 (66.7) | **16.6** (8.6–19.3)<br>24 (77.4) |

| OS | Pleural | | Peritoneal | | Total |
|---|---|---|---|---|---|
| | All n = 23 | Epithelioid[a] n = 13 | All n = 8 | Epithelioid[a] n = 6 | N = 31 |
| **mOS**, mo (95% CI)<br>Events, n (%) | **23.5** (19.2–NE)<br>15 (65.2) | **23.5** (10.7–NE)<br>9 (69.2) | **27.1** (7.3–NE)<br>6 (75.0) | **27.1** (7.4–NE)<br>5 (83.3) | **25.8** (19.2–32.4)<br>21 (67.7) |



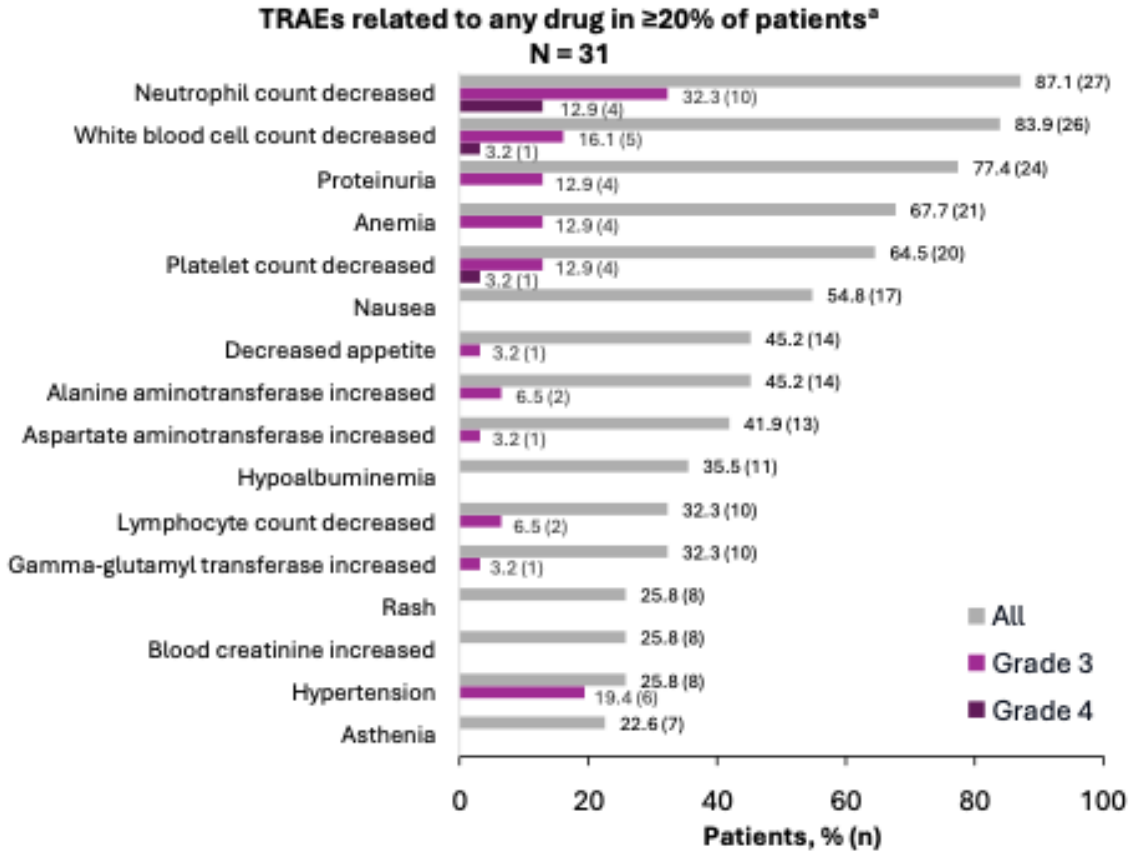
# Mesotelioma y otros tumores torácicos

*MOO4.09: Haifeng Liu et al First-line Pumitamig (PD-L1 × VEGF-A bsAb) Plus Chemotherapy inUnresectable Malignant Mesothelioma: Long-term PFS and OS*

## Safety summary

The median duration of treatment was 62.1 weeks (range, 6.0–140.1)

| Events, n (%) | Total N = 31 |
|---|---|
| Any TRAE[a]<br>Grade ≥3 TRAEs | 31 (100)<br>29 (93.5)[b] |
| TRAEs leading to dose discontinuation | 5 (16.1) |
| TRAEs leading to death | 0 |
| Any immune-mediated AEs<br>Grade ≥3 immune-mediated AEs | 12 (38.7)<br>2 (6.5)[b] |
| Any VEGF-related AEs<br>Grade ≥3 VEGF-related AEs | 28 (90.3)<br>10 (32.3)[b] |
| Any hemorrhage/bleeding events<br>Grade ≥3 hemorrhage/bleeding AEs | 5 (16.1)[c]<br>0 |

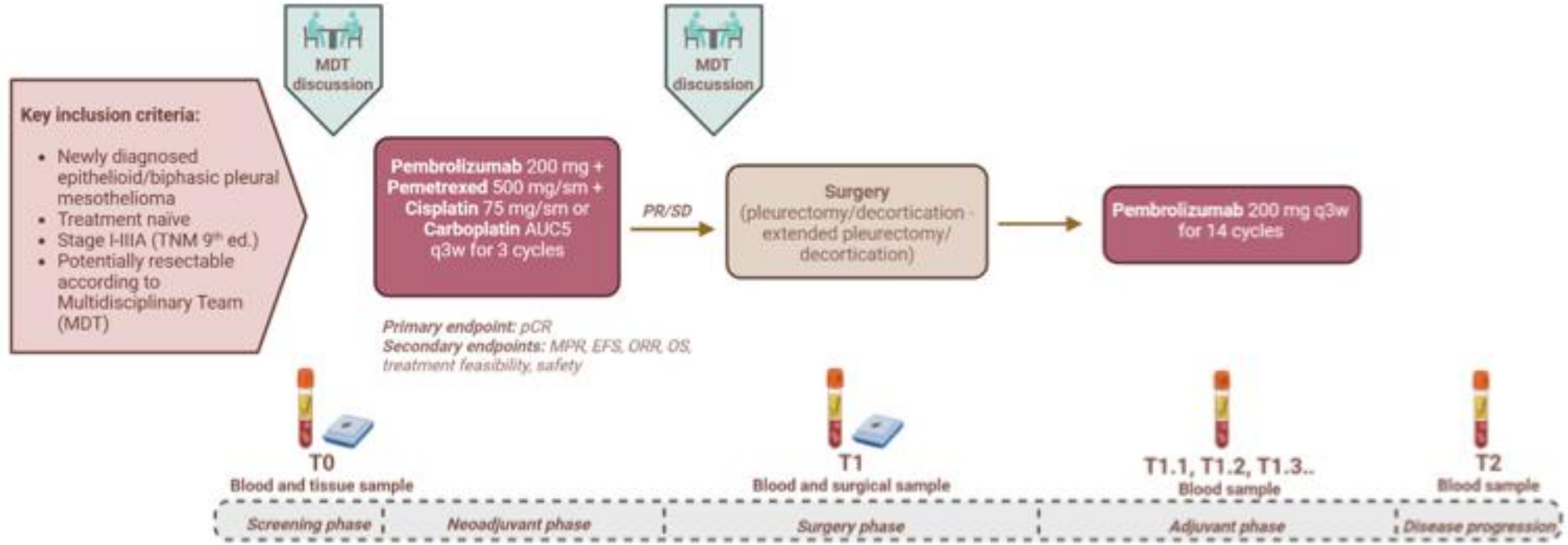



**Manageable safety profile, with only 6.5% grade ≥3 immune-mediated AEs, low number of discontinuations, and no treatment-related deaths. No new safety signals were identified**

# Mesotelioma y otros tumores torácicos

*MO04.07: Giulia Pasello et al Phase II Study of Perioperative Pembrolizumab plus Neoadjuvant Platinum-Pemetrexed in Resectable Pleural Mesothelioma (CHIMERA Study)*

## Study design



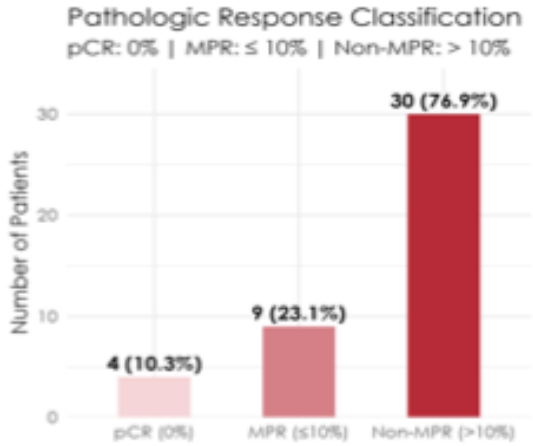

The primary endpoint is the **pCR** rate (0% residual viable tumor cells in the primary tumor and sampled lymph nodes), reviewed centrally.

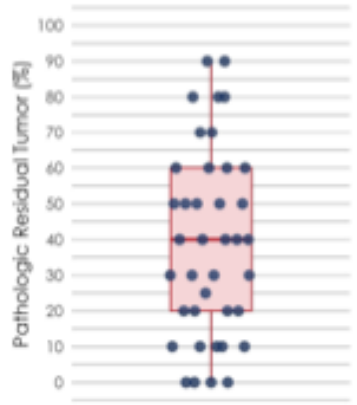
# Mesotelioma y otros tumores torácicos

*MOO4.07: Giulia Pasello et al Phase II Study of Perioperative Pembrolizumab plus Neoadjuvant Platinum-Pemetrexed in Resectable Pleural Mesothelioma (CHIMERA Study)*

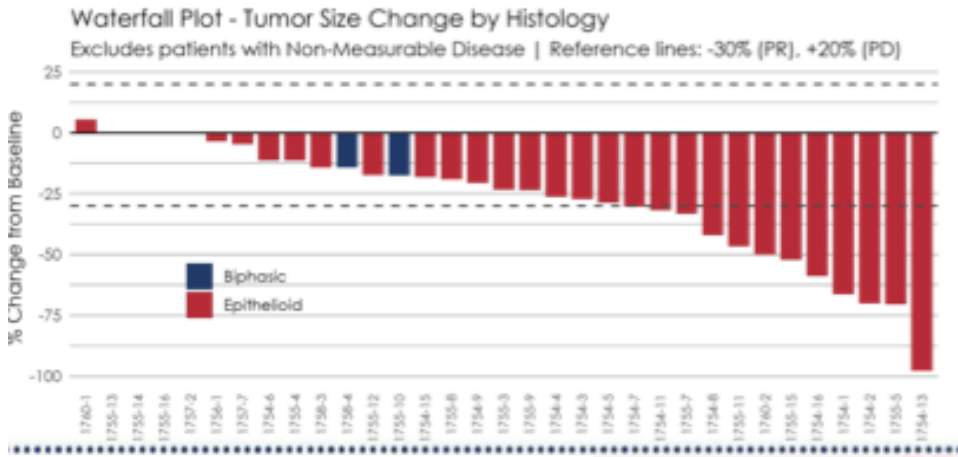
## Pateints characteristics and activity endpoints

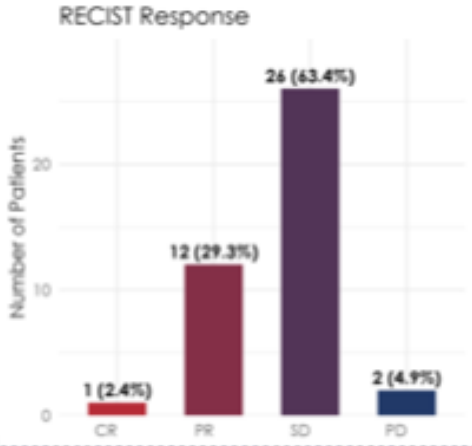
| Characteristic | N = 41 |
|---|---|
| Median Age (Q1, Q3) | 68 (60, 72) |
| Male Gender | 27 (66%) |
| ECOG PS 0 | 33(81%) |
| Smoke exposition | 24 (59%) |
| Asbestos exposition | 19 (46%) |
| Professional exposition | 15/19 (74%) |
| Symptoms at diagnosis | 15 (37%) |
| Epithelioid | 38 (93%) |

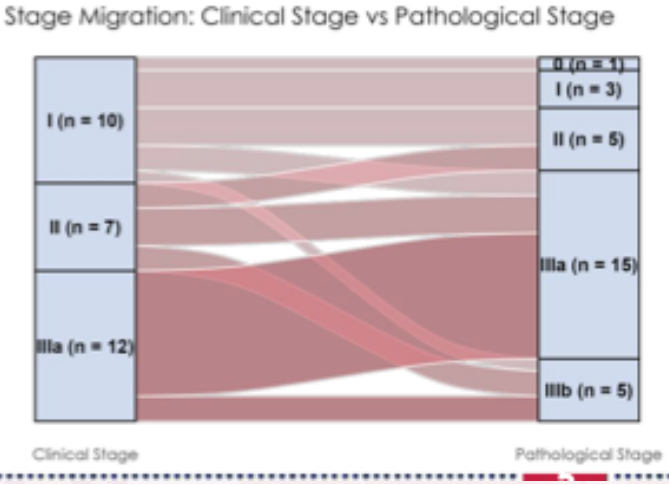



Complete macroscopic resection was performed in 39 patients (95.1%); 2 patients (4.9%) dropped out to surgery due to PD



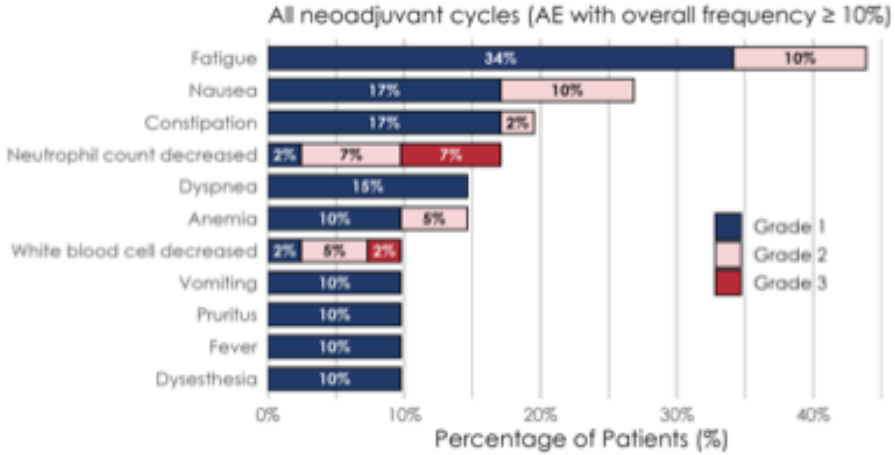



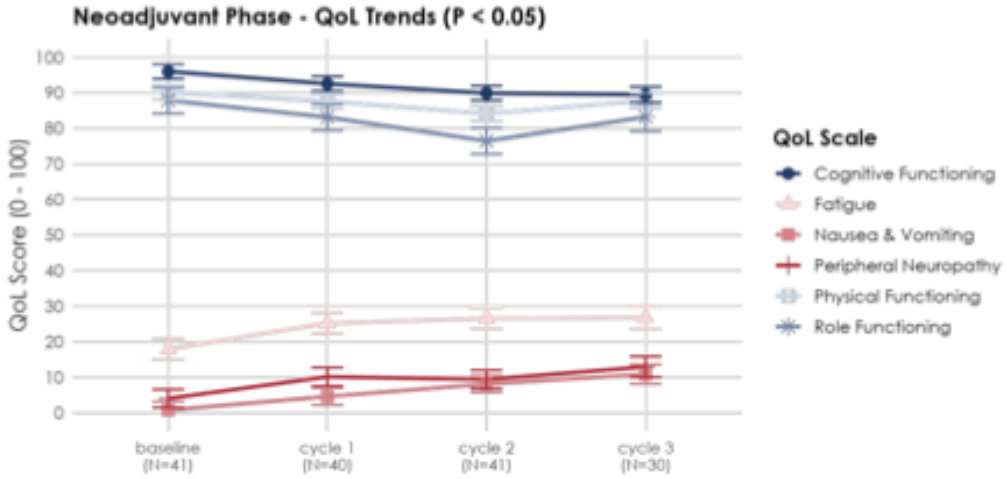
# Mesotelioma y otros tumores torácicos

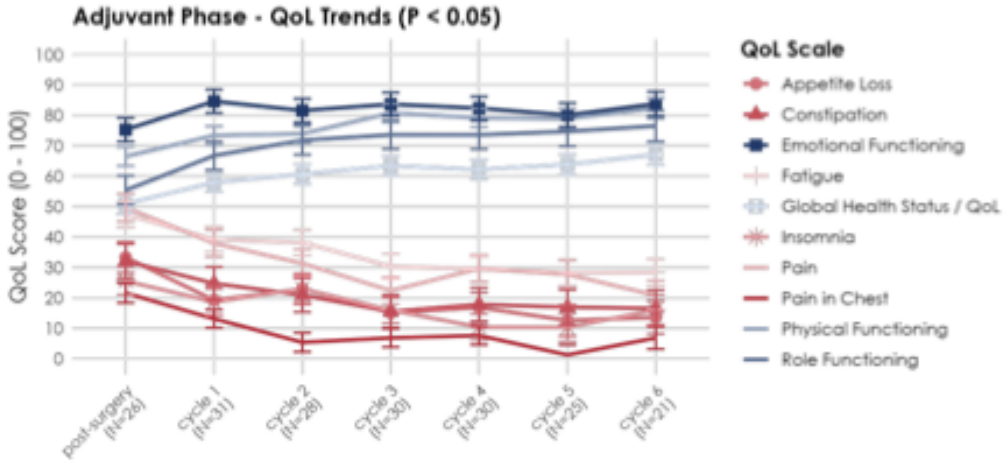
*MO04.07: Giulia Pasello et al Phase II Study of Perioperative Pembrolizumab plus Neoadjuvant Platinum-Pemetrexed in Resectable Pleural Mesothelioma (CHIMERA Study)*

## Safety summary and quality of life

| | Patients |
|---|---|
| **Grade ≥ 3 AE** | 4 (10%) |
| *- Febrile neutropenia/White blood cell decreased* | 1 |
| *- Neutrophil count decreased* | 3 |
| **SAE** | 8(20%) |
| **Treatment interruption** | 0 (0%) |
| **Treatment delay** | 4 (10%) |



# Mesotelioma y otros tumores torácicos

*PT2.05.01 R. Wan et al  Efficacy and Safety of HLX43, a PD-L1-Targeting ADC, in Pretreated Advanced Thymic Squamous Cell Carcinoma: Results From a Phase I Trial Author Block*

## Background & Design

- TSCC: rare, aggressive malignancy with poor prognosis
- Limited options after first-line platinum-based chemotherapy failure
- HLX43: novel PD-L1-targeting antibody-drug conjugate (ADC)
- Doses: 2.0 / 2.5 / 3.0 mg/kg Q3W; primary endpoint: ORR

## Patient Characteristics

- N = 34 enrolled; 33 response-evaluable (BICR)
- Median prior therapies: 3.0 (range: 1-7)
- 73.5% received prior immunotherapy

## Efficacy (BICR, RECIST v1.1)

**39.4%**
Overall ORR
(13/33 evaluable)

**84.8%**
Disease Control Rate (DCR)

### Results by Dose

| Dose (mg/kg) | ORR (%) | 6-mo PFS (%) |
|---|---|---|
| 2.0 (n = 11) | 10.0 | 40.0 |
| **2.5 (n = 12)** | **58.3** | **88.9** |
| 3.0 (n = 11) | 45.5 | 85.7 |

*Median PFS, OS, and DOR: not yet reached at data cutoff*

## Safety Profile

- **Grade 3+ TRAEs:** 58.8% of patients (20/34)
- **Most common G3+:** lymphocyte decrease (32.4%), WBC decrease (23.5%), neutrophil decrease (20.6%)
- **TRAE-related discontinuation:** 5.9% (2 patients)
- **Treatment-related SAEs:** 11.8% (4 patients)
- **Treatment-related deaths:** None

### Conclusion

HLX43 demonstrated promising efficacy and manageable safety in previously treated advanced TSCC, addressing a significant unmet clinical need. Further investigation is warranted.

# Mesotelioma y otros tumores torácicos

*PT2.05.02 Y. Liu et al Serplulimab Plus Chemotherapy as First-Line Treatment for Locally Advanced or Metastatic LCNEC: A Phase II Trial*

## Background & Design

- LCNEC: rare, highly aggressive malignancy; poor prognosis with platinum-based chemotherapy alone
- Serplulimab (PD-1 mAb): demonstrated benefit in first-line advanced NSCLC and SCLC
- Regimen: serplulimab 4.5 mg/kg + etoposide 100 mg/m² + carboplatin AUC5 (or cisplatin 75 mg/m²) Q3W x 4 cycles, then serplulimab maintenance

## Patient Characteristics

- N = 39 enrolled; 37 analyzed; median age 65 yrs (40-79)
- 73.0% male; 86.5% metastatic disease
- Most common metastatic sites: bone (29.3%), liver and brain (18.9% each)
- No prior immunotherapy; no active CNS metastases

## Efficacy (RECIST v1.1)

**56.8%**
Overall ORR
(21/37; 95% CI 39.5-72.9)

**86.5%**
Disease Control Rate
(32/37; 95% CI 71.2-95.5)

## Survival Outcomes

| Outcome | Value |
|---|---|
| Median PFS | 5.5 months (95% CI 4.1-8.9) |
| 6-month PFS rate | 45.8% |
| 12-month PFS rate | 15.9% |
| 12-month OS rate | 72.0% (data immature) |
| Median follow-up | 9.5 months; 67.6% progressed |

## Safety Profile

- **Any-grade TRAEs:** 56.8% of patients
- **Grade 3-4 TRAEs:** 18.9% of patients
- **SAEs (any cause):** 16.2% of patients
- **Treatment-related SAEs:** None
- **Treatment-related deaths:** None

### Conclusion

Serplulimab combined with chemotherapy demonstrated encouraging clinical activity (ORR 56.8%) and an acceptable safety profile as first-line treatment for advanced pulmonary LCNEC, supporting further evaluation in this rare and aggressive malignancy.


Gracias