

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/project-oncology/patient-care-alk-positive-nscl/49139/>

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Patient-Centered Care in ALK+ Non-Small Cell Lung Cancer

Announcer:

Welcome to *Project Oncology* on ReachMD. On this episode, Dr. Jorge Nieva, an Associate Professor of Clinical Medicine at Keck Medicine of USC, will share his perspective on patient-centered treatment decisions in ALK-positive non-small cell lung cancer. Let's hear from him now.

Dr. Nieva:

I think a lot of the characteristics are the preference of the patient. You want to be able to describe the drugs, their anticipated toxicities, and their risks and benefits. And ultimately, I think we should be able to do that in a way that lets the patient ultimately decide which is the right drug for them. These patients are generally young. There's lots of great information out there available to the patients. They're the ones who are going to have to take this drug, and they're going to take the drug for years and years. They really need to know what they're getting into from the standpoint of toxicity and efficacy, and I think each patient can make the choice that's right for them.

With proper management, safety risks should not be a huge concern. You can dose reduce these drugs, and these drugs overall on balance are all much safer than taking chemotherapy. So for a typical oncologist who's used to prescribing drugs that really have a lot of toxicity, these drugs really have much less. And many people taking second-generation agents experience very little, if any, toxicity from those classes of drugs. They really are quite well-tolerated. I think the third-generation agent lorlatinib can have more neurocognitive toxicity, personality changes, and hyperlipidemia, which is not so much of a big deal; it just means that sometimes you have to take some cholesterol-lowering drugs with it.

But I think the personality changes that can occur are the ones that are most difficult to manage, not because the decision of the clinician is difficult since you can always reduce the dose of the drug to make the neurocognitive toxicity less; I think it's managing the expectations of the family and the spouse and so forth that really can be the hardest part about some of the cognitive changes that we see in patients who are taking lorlatinib.

Announcer:

That was Dr. Jorge Nieva discussing patient-centered decision-making strategies in ALK-positive non-small cell lung cancer. To access this and other episodes in this series, visit *Project Oncology* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!