

Picón, CR¹; Rizzo, MM¹; Puparelli,C²; Castagneris, N³; Martin, C²; Peralta, D²; Tsou, F²; Enrico, D²; Viola, A⁴; Okassova, A⁴; Basbus, L⁵; Ferreira, Y⁵; Lupinacci, L⁵; Berutti, S⁶; Levit, P⁷; Damonte A⁷; Ramos, M⁸; Correa, A⁸; Durand, G⁸; Cáceres, R⁸; Vera, K⁹; Nova, C⁹; Cundom, J¹⁰; Aman, E¹¹; Castillo, C¹²; Amarin, R¹; Minatta, N¹; Brocca, C¹³; Casarini, I¹⁴; Carranza, O¹⁵; Kaen, D¹⁶; Coppola, MP¹⁷; Rueda, D¹⁸; Barboza, H¹⁹; Perfetti, A⁴.

¹Hospital Universitario Austral de Buenos Aires, Pilar, Buenos Aires/AR, ²Instituto Alexander Fleming de Buenos Aires, Buenos Aires/AR, ³Clinica Universitaria Reina Fabiola, Cordoba/AR, ⁴Hospital Universitario CEMIC, Buenos Aires/AR, ⁵Hospital Italiano de Buenos Aires, Buenos Aires/AR, ⁶Hospital Italiano de La Plata, La Plata/AR, ⁷Unidad de Tumores Torácicos de Accord Salud/Union Personal, Buenos Aires/AR, ⁸Hospital Alemán de Buenos Aires, Buenos Aires/AR, ⁹Hospital Británico de Buenos Aires, Buenos Aires/AR, ¹⁰Hospital Lanari de Buenos Aires, Buenos Aires/AR, ¹¹Centro Swiss Medical de Buenos Aires, Buenos Aires/AR, ¹²Instituto CIDO, Chaco/AR, ¹³Hospital Privado Universitario de Córdoba, Córdoba/AR, ¹⁴Hospital Houssay de Mar del Plata, Mar del Plata/AR, ¹⁵Hospital Privado de la Comunidad de Mar del Plata, Mar del Plata/AR, ¹⁶Centro Oncológico Riojano Integral de La Rioja, La Rioja/AR, ¹⁷Sanatorio Las Lomas de Buenos Aires, Buenos Aires/AR, ¹⁸Hospital de Clinicas Jose San Martin de Buenos Aires, Buenos Aires/AR, ¹⁹Instituto Multidisciplinario de Oncología de Viedma, Viedma/AR

INTRODUCTION

Non-small cell lung cancer (NSCLC) is the leading cause of cancer death, with high relapse rates post-surgery. While neoadjuvant chemo-immunotherapy improved pathologic complete response (pCR) and event-free survival (EFS) in trials like CheckMate 816, real-world data in Latin America are scarce. This study evaluates neoadjuvant nivolumab plus chemotherapy in resectable NSCLC in Argentina.

METHODS

- Study design:** Retrospective, multicenter, non-interventional study in adults with resectable NSCLC with neoadjuvant nivolumab plus chemotherapy (July 2022-April 2025, Argentina)
- Exclusion criteria:** *EGFR/ALK* driver mutations, prior systemic therapy, recent immunotherapy, clinical trial participation, or treatment initiation at another institution.

RESULTS

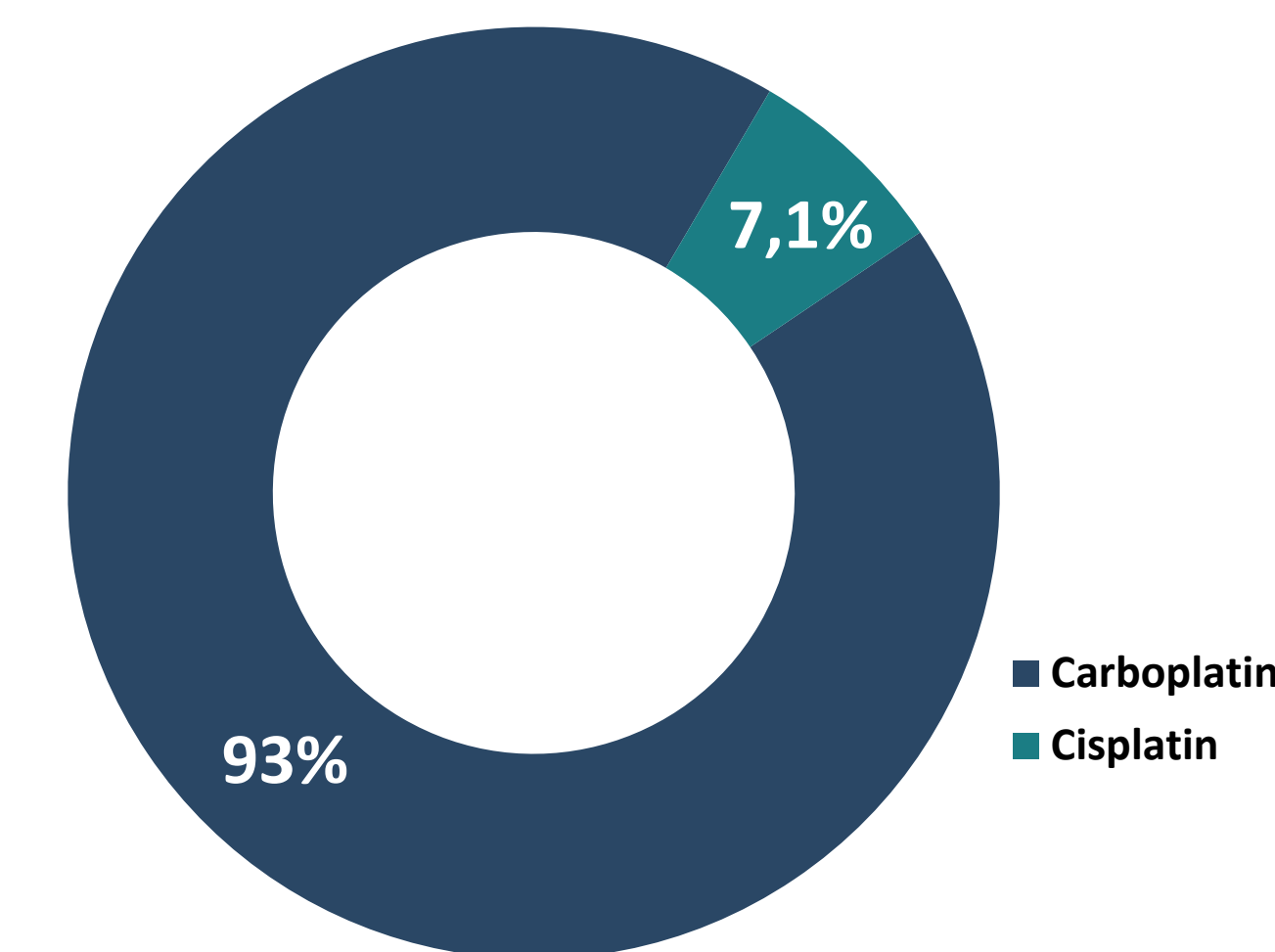
70 patients from 21 centers were analyzed.
At the data cut/off, the median follow-up was 14.5 months

Table 1: Patient Characteristics

Characteristics	N = 70
Age - Median (IQR)	67.5 (62-72)
Male Sex - no. (%)	44 (62.9)
ECOG - no. (%)	
0	39 (55.7)
1	30 (42.9)
≥2	1 (1.4)
History of Tobacco Use - no. (%)	
Current or Former User	61 (87.1)
No history of Smoking	9 (12.9)
Histology - no. (%)	
Adenocarcinoma	48 (68.6)
Squamous	21 (30)
Undifferentiated	1 (1.4)
AJCC 8th Edition TNM Stage - no. (%)	
II	17 (24.3)
IIIA-IIIB	53 (75.7)
PD-L1 Expression, n (%)	
PD-L1 1<%	26 (37.1)
PD-L1 1-49%	20 (28.6)
PD-L1 ≥50%	13 (18.6)
Not reported	11 (15.7)

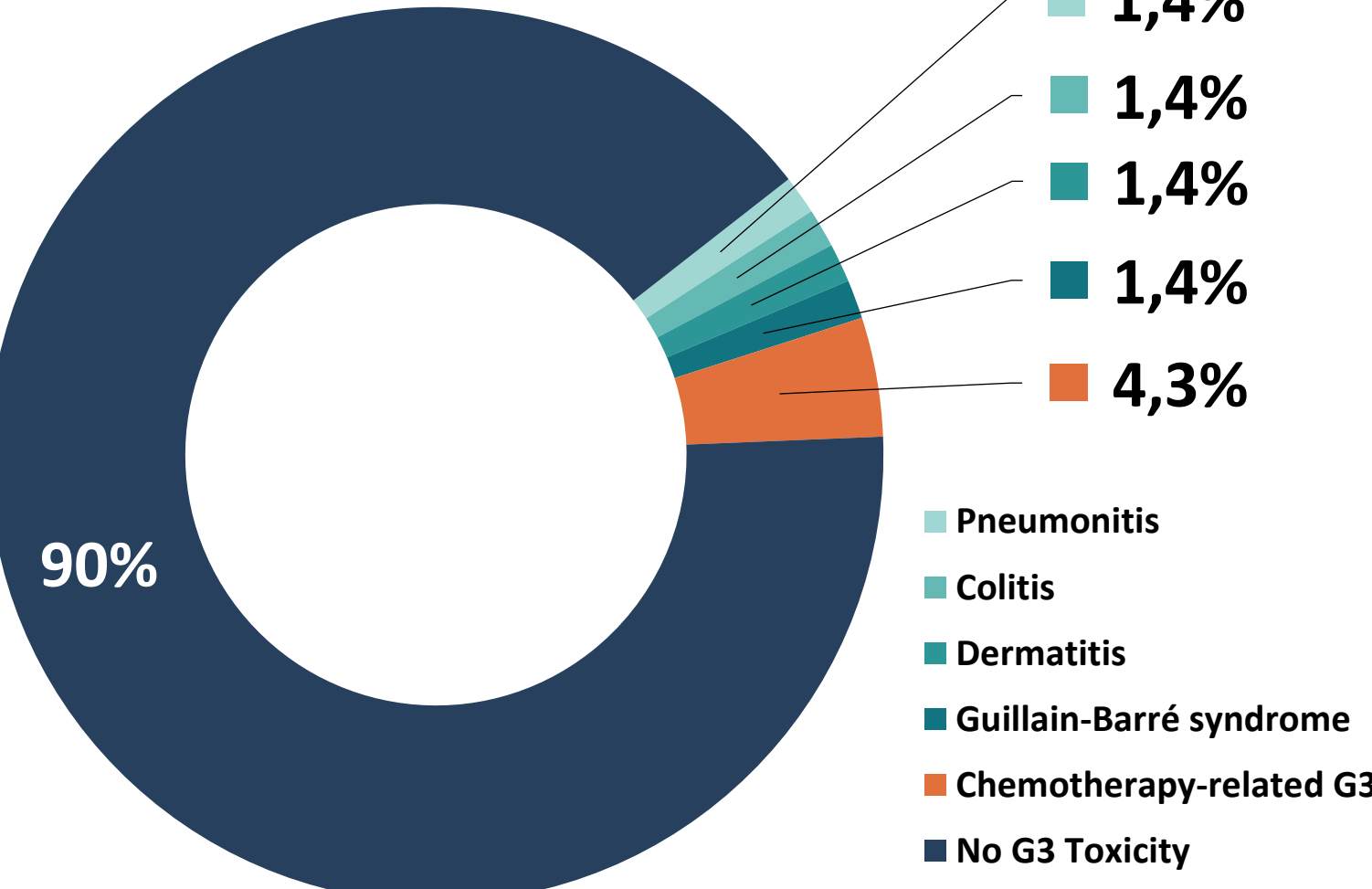
Treatment and Toxicity Summary

A. Carboplatin/Cisplatin Distribution



- Treatment in days, median (IQR): 46.5 (42-65)
- Cycles received (%): 3 cycles 63%, 4 cycles 34%, 2 cycles 1.4%
- Treatment suspension, n (%): 4 (5.7)

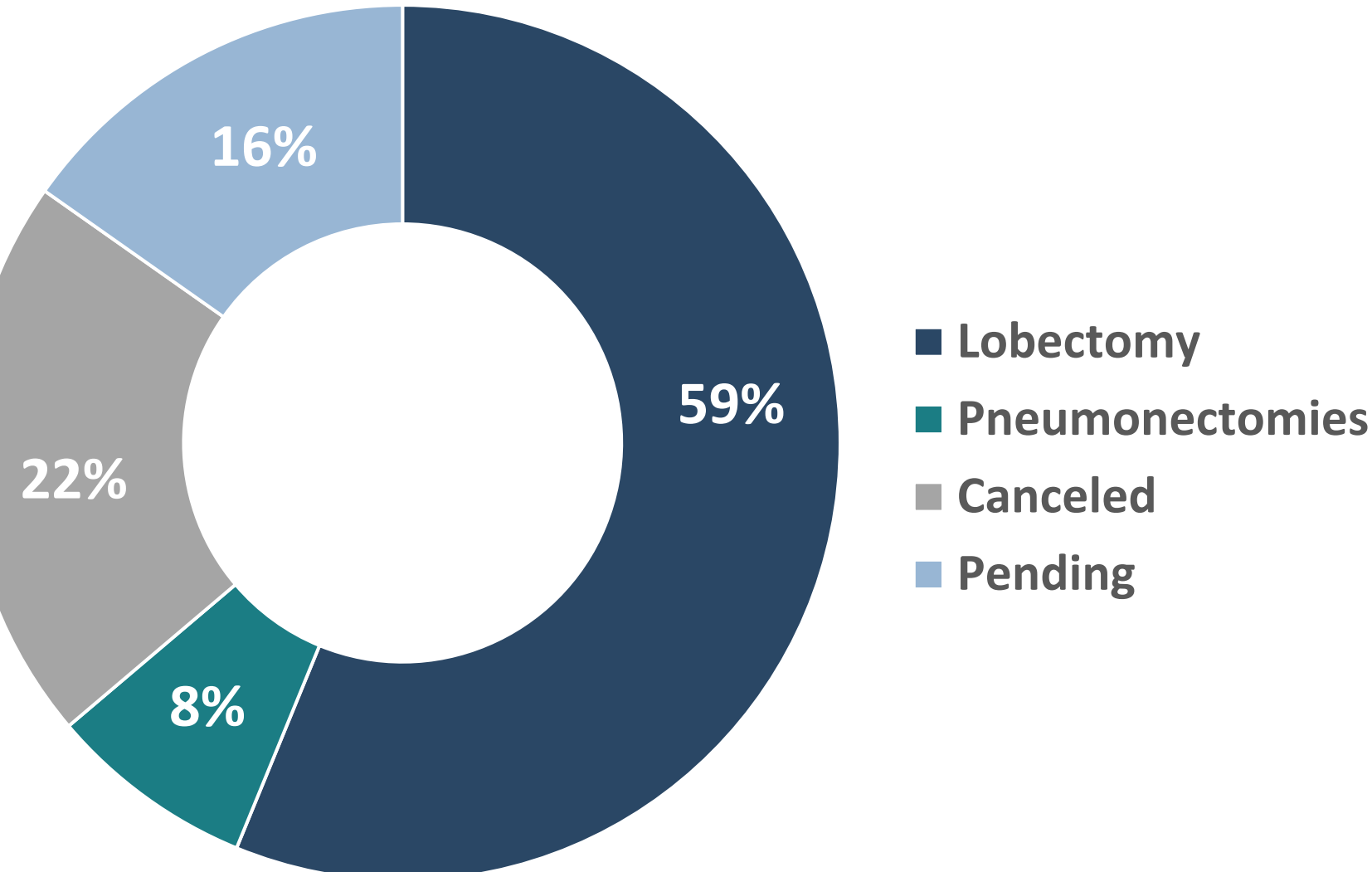
B. Treatment Toxicity Grade 3



- Time to toxicity, median (IQR) days: 84 (59-95)

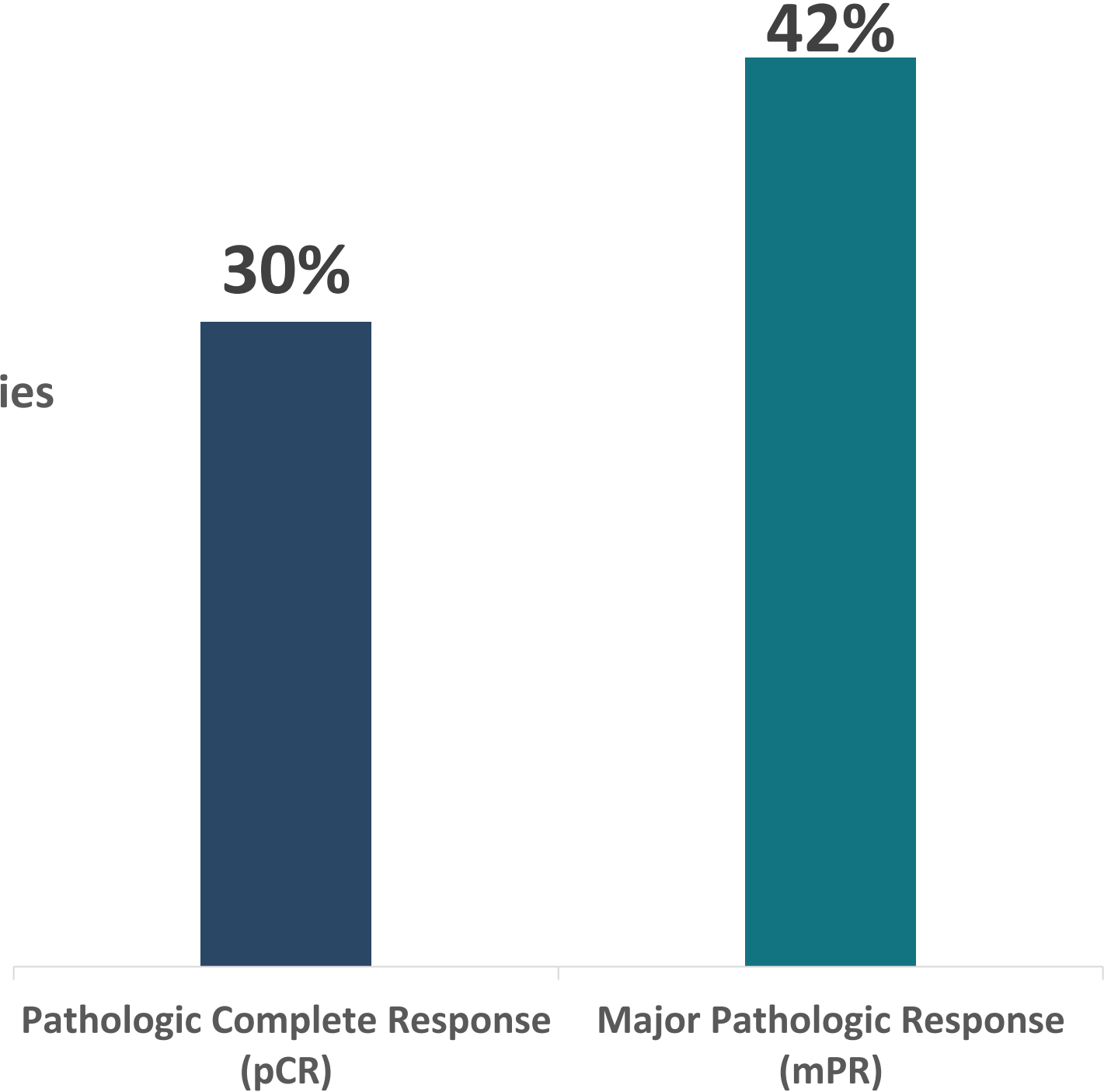
Surgery and Pathologic Outcomes

A. Surgery outcomes

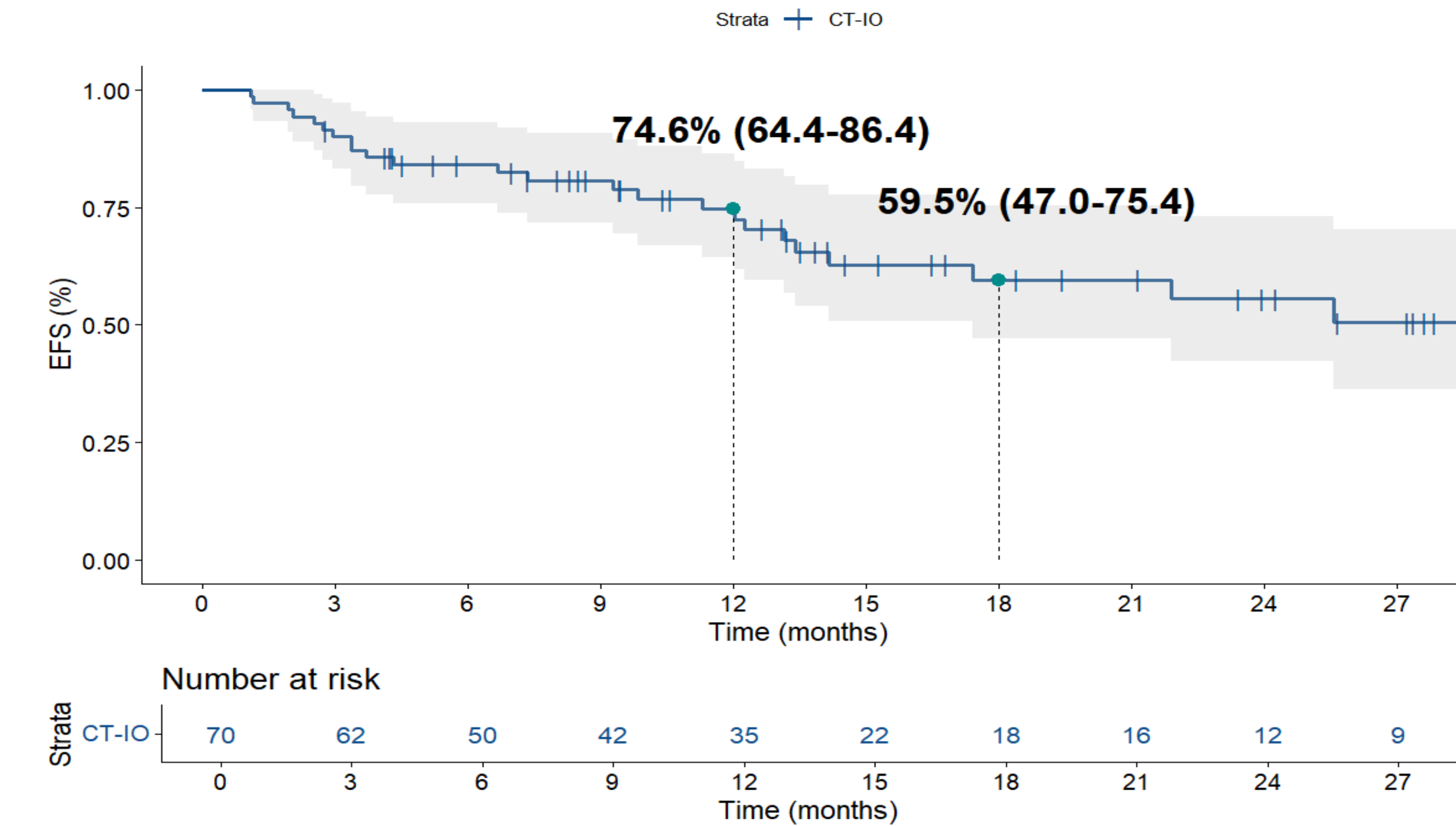


- Days to surgery, median (IQR): 104 (92-118)
- Surgical time (min), median (IQR): 180 (70-240)
- Complete resection (R0), n (%): 49 (96%)
- Canceled/Suspended surgeries, n (%): 16 (22)
 - Unresectability 7%, Toxicity 5%, Progression 5%, Other 5%
- Pending Surgery, n (%): 11 (16)

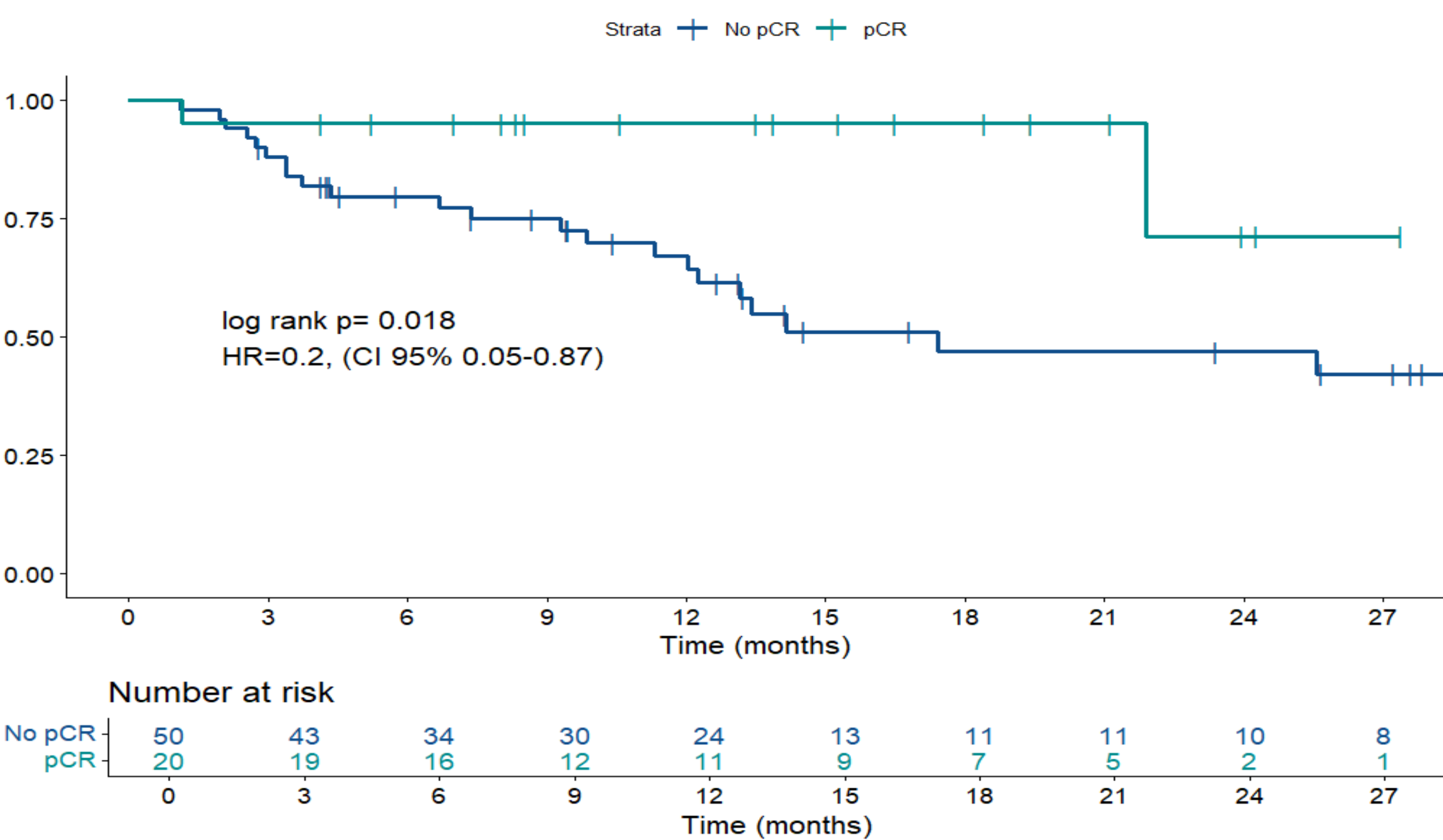
B. Pathological outcomes



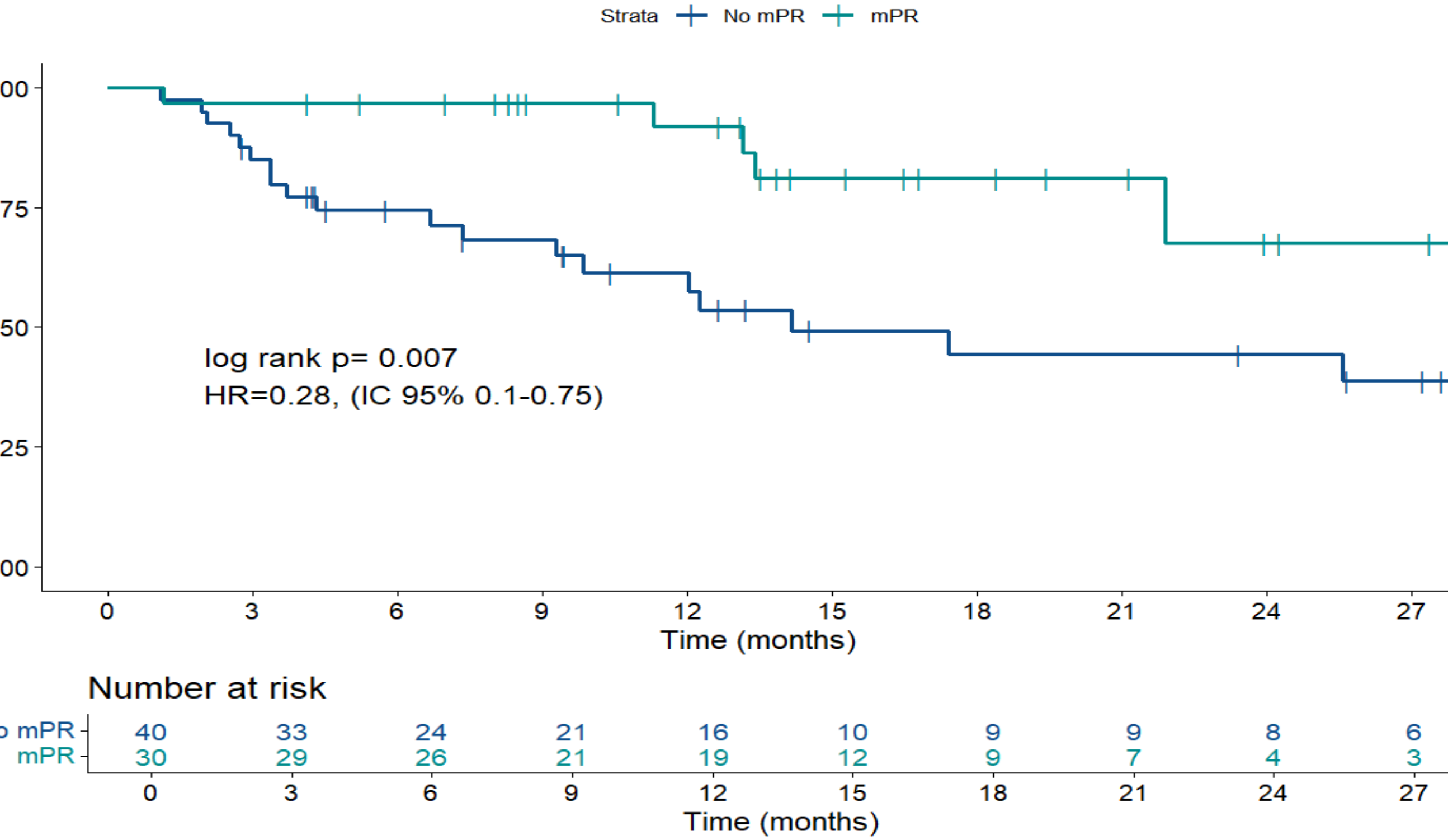
Event-free survival (EFS)



Event-free survival (EFS) by pCR



Event-free survival (EFS) by mPR



SCAN FOR SUPPLEMENTARY DATA

- Swimmer Plot:** patient-level treatment timeline & outcomes
- Sankey diagram:** post-neoadjuvant pathological restaging
- Extended tables:** full safety, surgical & response data
- Study Flow Diagram & Full Abstract**



Scan Me

CONCLUSIONS

- Neoadjuvant nivolumab plus chemotherapy achieved a 30% pCR and a 42% mPR in this preliminary Argentine cohort.
- Achievement of pCR and mPR was significantly associated with improved EFS, supporting pathological response as a clinically relevant prognostic marker in real-world practice.
- Low incidence of severe toxicity was reported, with no major treatment-related surgical complications.
- Real-world findings closely align with results from the CheckMate 816 trial, supporting the feasibility, safety, and clinical benefit of neoadjuvant chemo-immunotherapy in routine practice.