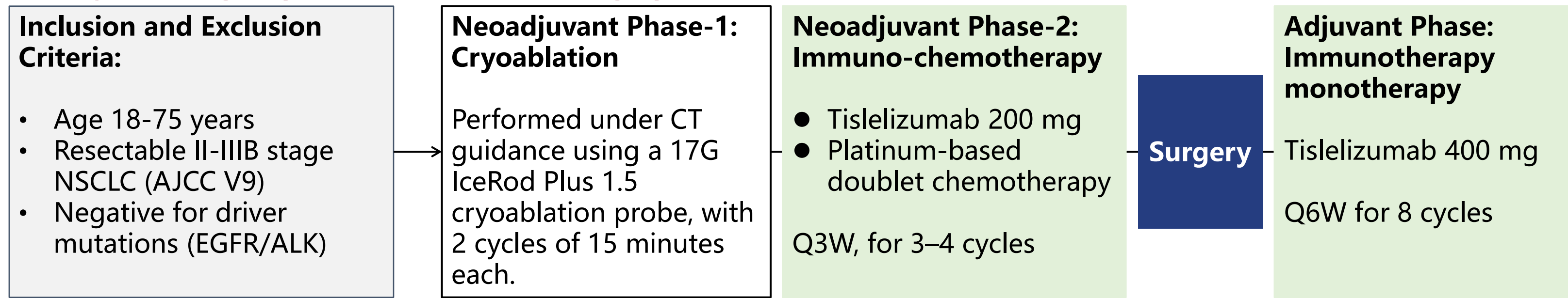


INTRODUCTION

- Perioperative immunotherapy is the standard of care for resectable stage II-III driver mutation-negative NSCLC; however, pathological complete response (pCR) rates remain modest at 20%-41%. Cryoablation induces immunogenic tumor cell death, promoting antigen release and inflammatory signaling that may enhance the efficacy of ICIs.
- This study investigates a novel neoadjuvant strategy combining systemic therapy with local cryoablation to improve pCR rates and increase the likelihood of cure.

METHODS

Study Design (Simon’s two-stage):



Primary Endpoint: Pathological Complete Response (pCR) Rate

During the first stage, 11 patients will be accrued. If 5 or fewer responses are observed, the study will be stopped for futility. Otherwise, the study will proceed to the second stage with additional patient accrual.

RESULTS

Between April and July 2025, 11 pts were enrolled.

Table 1: Patient characteristic

Characteristic	n (%) N=11	Characteristic	n (%) N=11
Age (years) Median (range)	62 (53–71)	Tumor location	
Male	10 (90.9%)	Central	8 (72.7%)
Former smoker	11 (100.0%)	Peripheral	3 (27.3%)
ECOG performance status		T category	
0	1 (9.1%)	T2a	3 (27.3%)
1	8 (72.7%)	T2b	5 (45.5%)
2	2 (18.2%)	T3	3 (27.3%)
PD-L1 expression		N category	
<1%	5 (45.5%)	N0	2 (18.2%)
1–49%	2 (18.2%)	N1	4 (36.4%)
≥50%	3 (27.3%)	N2a	3 (27.3%)
Missing	1 (9.1%)	N2b	2 (18.2%)
Histology		TNM stage	
Squamous cell carcinoma	9 (81.8%)	IIB	5 (45.5%)
Adenocarcinoma	1 (9.1%)	IIIA	5 (45.5%)
Poorly differentiated carcinoma, NOS	1 (9.1%)	IIIB	1 (9.1%)

Treatment Exposure:

Distribution of Neoadjuvant Chemoimmunotherapy Cycles

- 36.4% Patients (4/11) Completed 3 Cycles
- 63.6% Patients (7/11) Completed 4 Cycles

Fig 1: Neoadjuvant Radiographic Response:

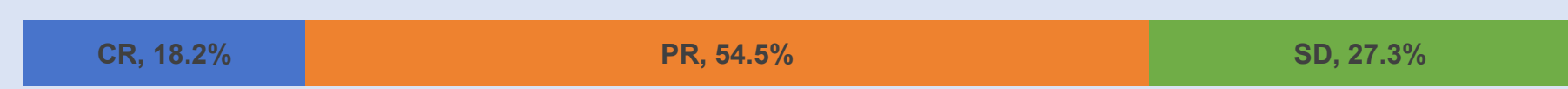


Fig 2: Surgical Approach

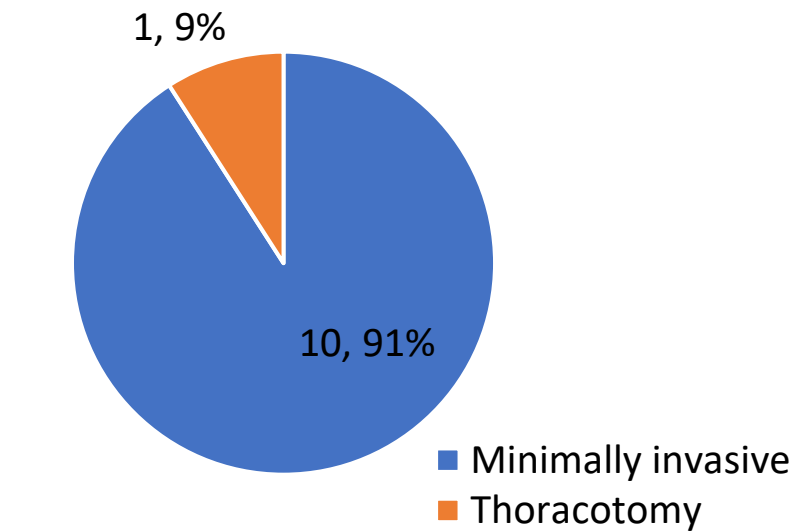


Fig 4: Surgical Margin Status

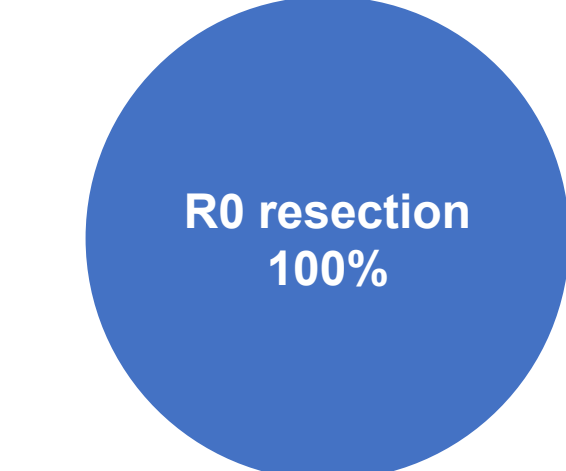
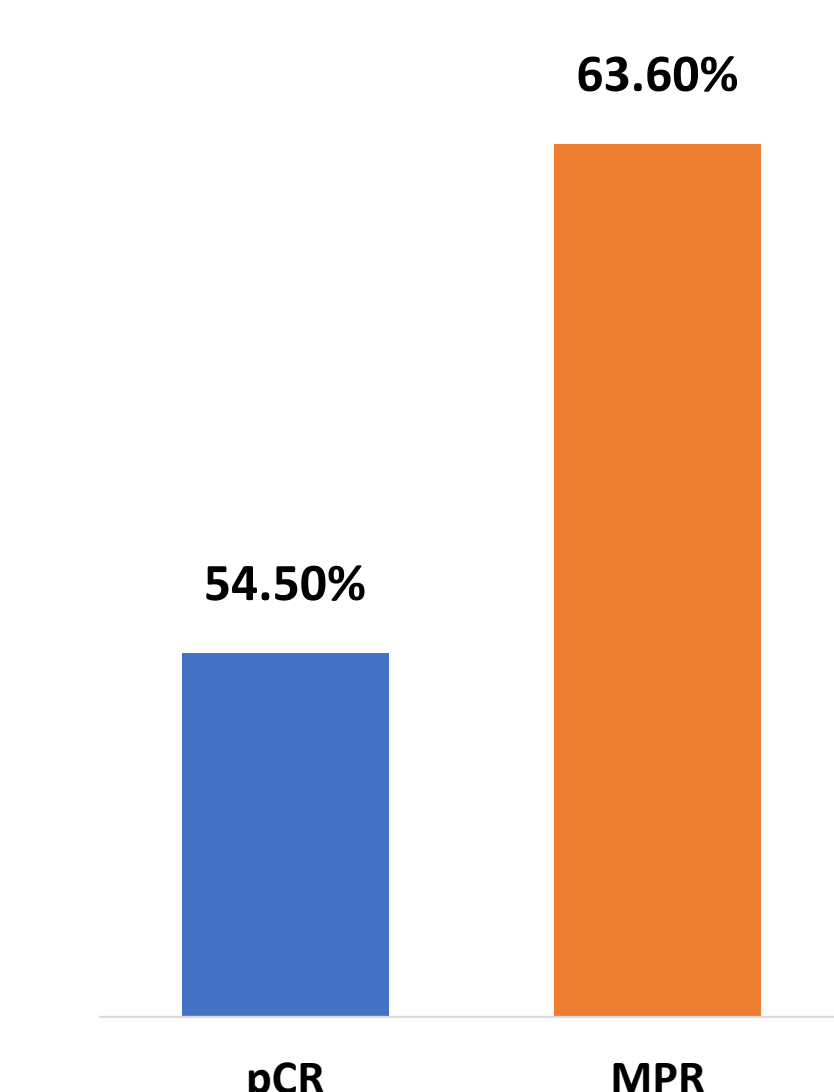
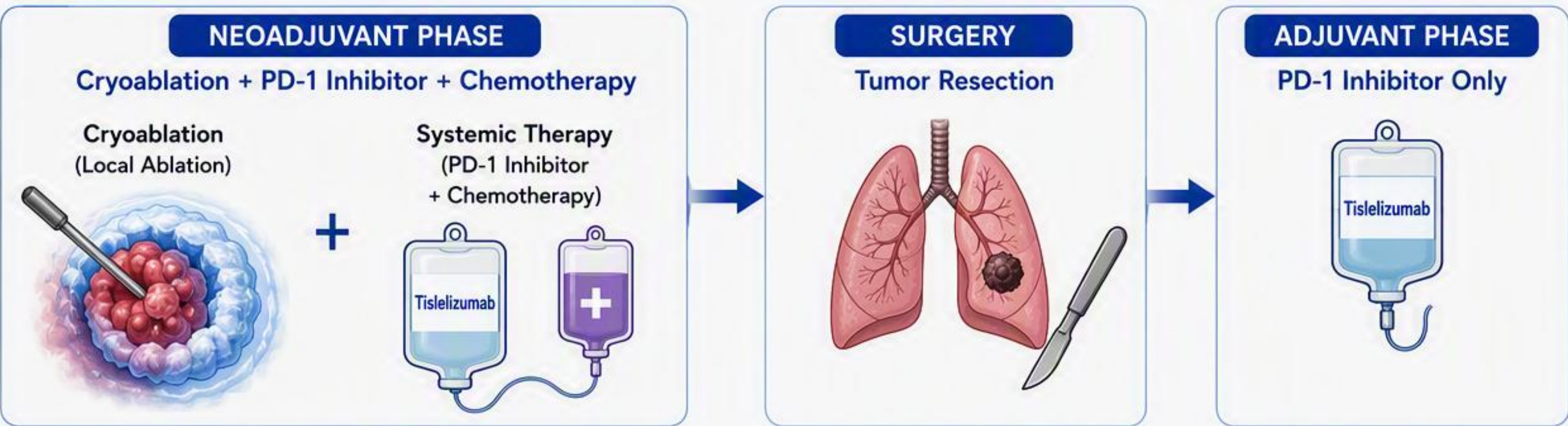


Fig 3: Pathological Response



CONCLUSION

Take Away Message



- Neoadjuvant cryoablation combined with tislelizumab and chemotherapy demonstrated favorable tolerability and feasibility, meeting the predefined criteria for progression to Simon’s two-stage phase II enrollment.

Fig 5: EFS & OS

The median follow-up was 13.1 months

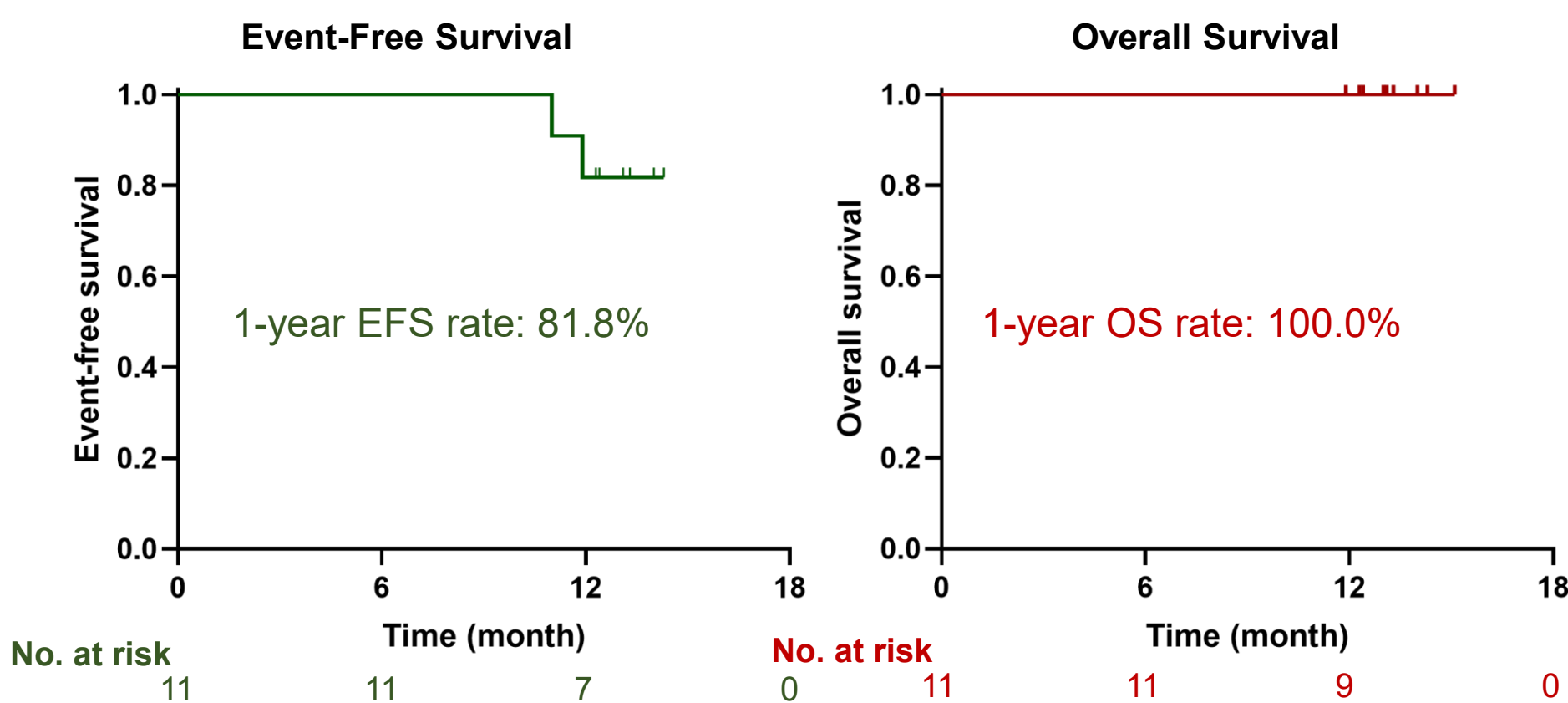


Table 3. TRAE During the Neoadjuvant Phase

	n (%)	Any grade	Grade 1	Grade 2	Grade ≥3
Hemoglobin decreased	1 (9.1%)	1 (9.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Dysphonia	1 (9.1%)	0 (0.0%)	1 (9.1%)	0 (0.0%)	0 (0.0%)
Pneumonia	2 (18.2%)	0 (0.0%)	2 (18.2%)	0 (0.0%)	0 (0.0%)
Neutropenia	6 (54.5%)	1 (9.1%)	3 (27.3%)	2 (18.2%)	2 (18.2%)
Febrile neutropenia	1 (9.1%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (9.1%)