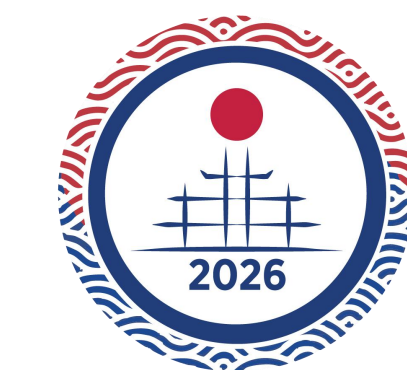




P1.197: Thymalfasin May Lead to MRD Clearance for Post - Surgery NSCLC Patients and Thereby Achieve Survival Benefits

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INTRODUCTION

Administering escalation therapies, such as chemotherapy, to MRD-positive post-surgery NSCLC patients without evidence of imaging recurrence may lead to additional drug - related adverse effects.^{1,2} The immunomodulator thymalfasin,³ as an escalation treatment regimen for MRD - positive patients, holds potential therapeutic value.⁴

METHODS

Participants:

Since 2024, our department has treated 12 patients with stage I -III NSCLC who underwent radical lobectomy and had at least one positive MRD during longitudinal MRD surveillance (excluding landmark time point which was performed within 1 month after surgery) , subsequently receiving thymalfasin therapy. All patients received MRD monitoring based on tumor- informed ctDNA assay, with follow- up examinations every 3- 6 months. All patients followed the imaging review rules formulated by clinicians. All patients signed informed consent.

DISCUSSION AND CONCLUSION

- Thymalfasin, as an immunomodulator, can facilitate MRD clearance in postoperative NSCLC patients, thereby providing a novel therapeutic option for escalation therapy guided by positive MRD after NSCLC surgery.
- This study provides a clinical experience reference for clinicians to develop escalation treatment plans for MRD- positive patients.

REFERENCES & ACKNOWLEDGEMENTS

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Questions:

If you have any questions about this poster, please email Professor Yi Zhang, zhangyixwhosp@xwh.ccmu.edu.cn.

RESULTS

Table 1. Baseline Characteristics in Patients

	Patients enrolled (N=12)
Age [median (range)]	60 (35–75)
Gender	
male	8 (66.7%)
female	4 (33.3%)
T category	
T1	5(41.7%)
T2	6 (50.0%)
T3	1 (8.3%)
N category	
N0	7 (58.3%)
N1	1 (8.3%)
N2	4 (33.3%)
M category	
M0	12 (100%)
TMB [median (range)], muts/Mb	2.46 (0–9.4)
Time from surgery to positive MRD [median (range)], months	11.5 (4–42)
Time from surgery to Thymalfasin treatment [median (range)], months	14 (4–42)

Notes:

- T1 includes T1a, T1b, T1c; T2 includes T2, T2a, T2b; N2 includes N2a, N2b.
- All patients had M0 status.
- All 12 patients had available data for all variables.

Figure1. Among 92 MRD samples, 9/12 patients (75%) cleared MRD after thymalfasin and none recurred, though 2 later re- positive without relapse. Of the 3 MRD- positive non- converters, 2 relapsed; the case without recurrence was a patient with stage IA1.

Figure2. For 9 converters, median time to MRD negativity was 6 (3- 13) months. Two re- positive cases (case 3 and 4, at 4 and 6 months, respectively) remained relapse- free after escalated TKI or continued thymalfasin. Case 11 persistently MRD- positive patient (stage IA1) also stayed relapse- free.

Figure 1: Sankey diagram of MRD outcomes and relapse

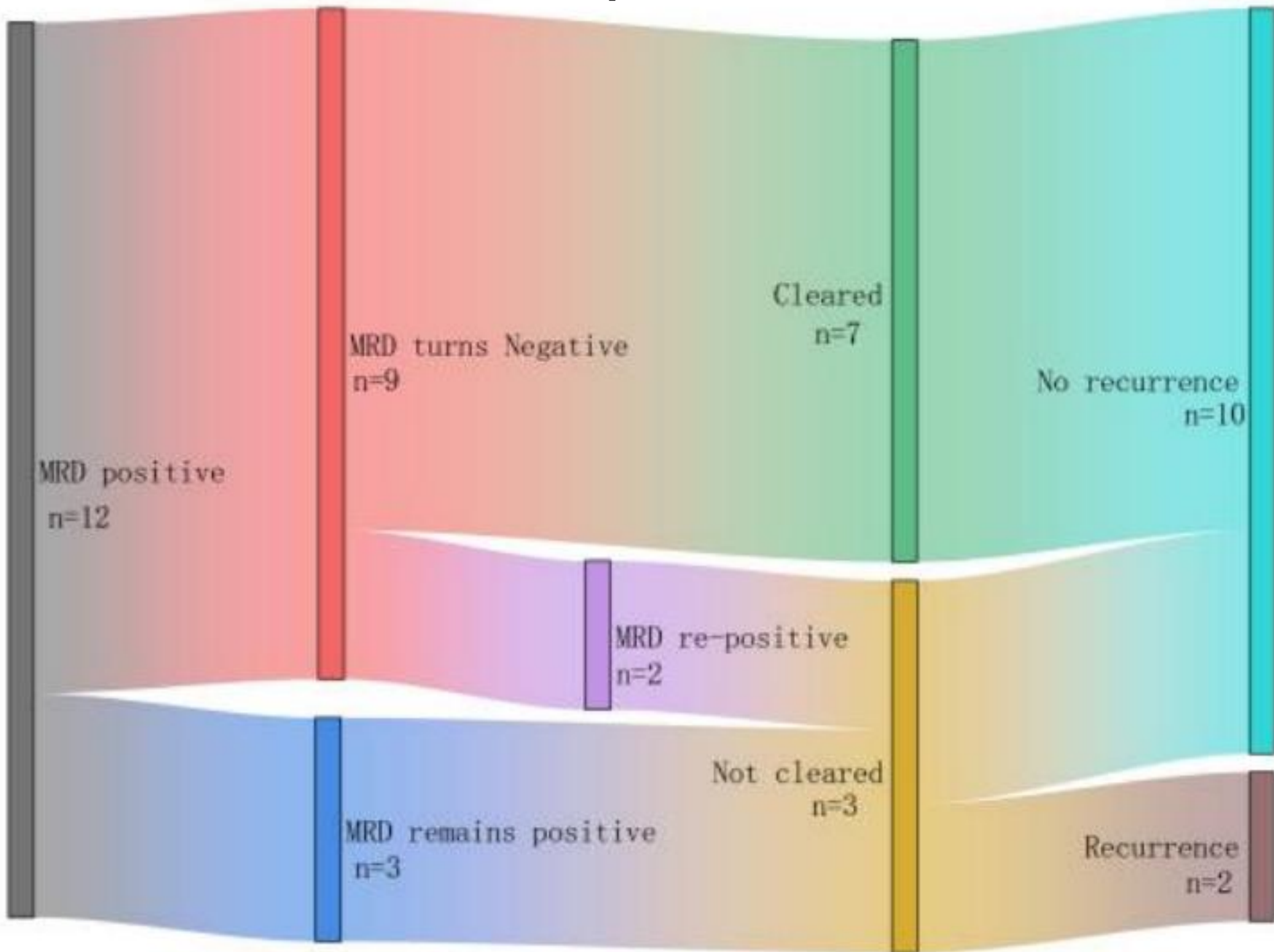


Figure 2: MRD Longitudinal monitoring results and recurrence timeline in 12 patients

