



2026 World Conference on Lung Cancer

SEPTEMBER 12 – 15, 2026 | SEOUL, REPUBLIC OF KOREA

P1.278

Overall Survival After Fixed Duration vs Continuation of Pembrolizumab at 2 Years in First-Line Metastatic Non-Small Cell Lung Cancer (mNSCLC)

Rios J¹, Patel T¹, Gart M², Jain P², DeSantis C², Donegan J², Parris D²,
Wang B², Varughese P², Scott J², Ramalingam S³

¹Zangmeister Cancer Center, Columbus, Ohio; ²Integra PrecisionQ, West Palm Beach, Florida; ³Winship Cancer
Institute of Emory University, Atlanta, Georgia, United States.

Background and Objective

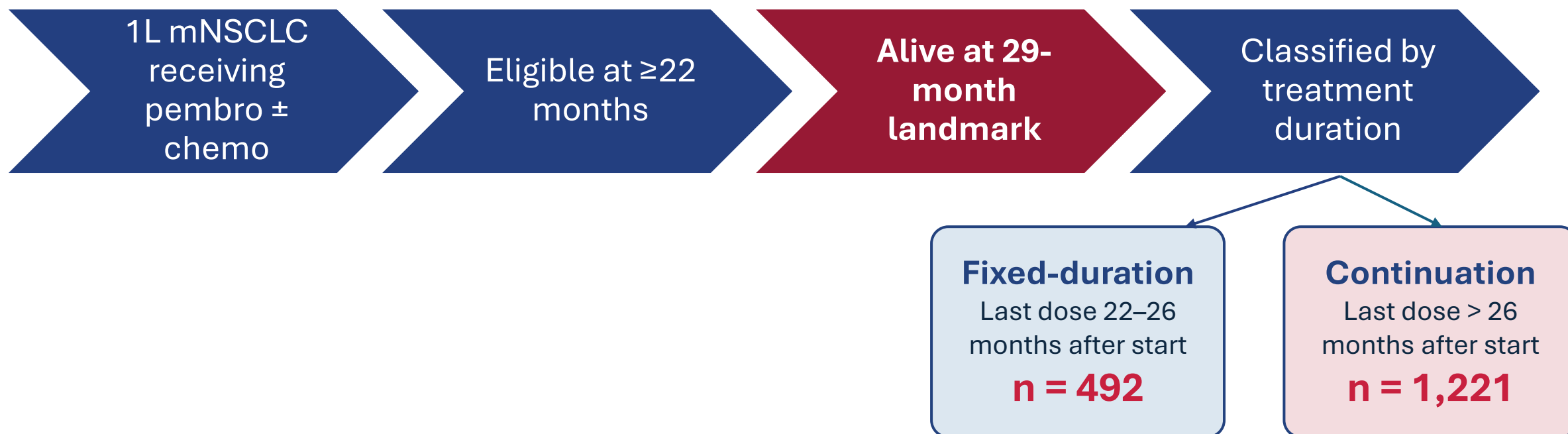
- Pembrolizumab (pembro) can produce durable long-term responses first-line (1L) metastatic NSCLC (mNSCLC).
- Pivotal trials generally limited treatment to approximately 2 years, yet treatment is often continued beyond 2 years in routine practice.
- Whether continuation beyond 2 years improves survival remains uncertain.

Objective

To compare overall survival among patients receiving fixed-duration versus continued 1L pembro in a real-world landmark analysis.

Real-World Landmark Study Design

Eligible landmark cohort: N=1,713 patients



Overall survival measured from the 29-month landmark

Patient Characteristics at the 29-Month Landmark

71% continued pembro beyond 2 years (n=1,221)

Fixed-duration (n=492)

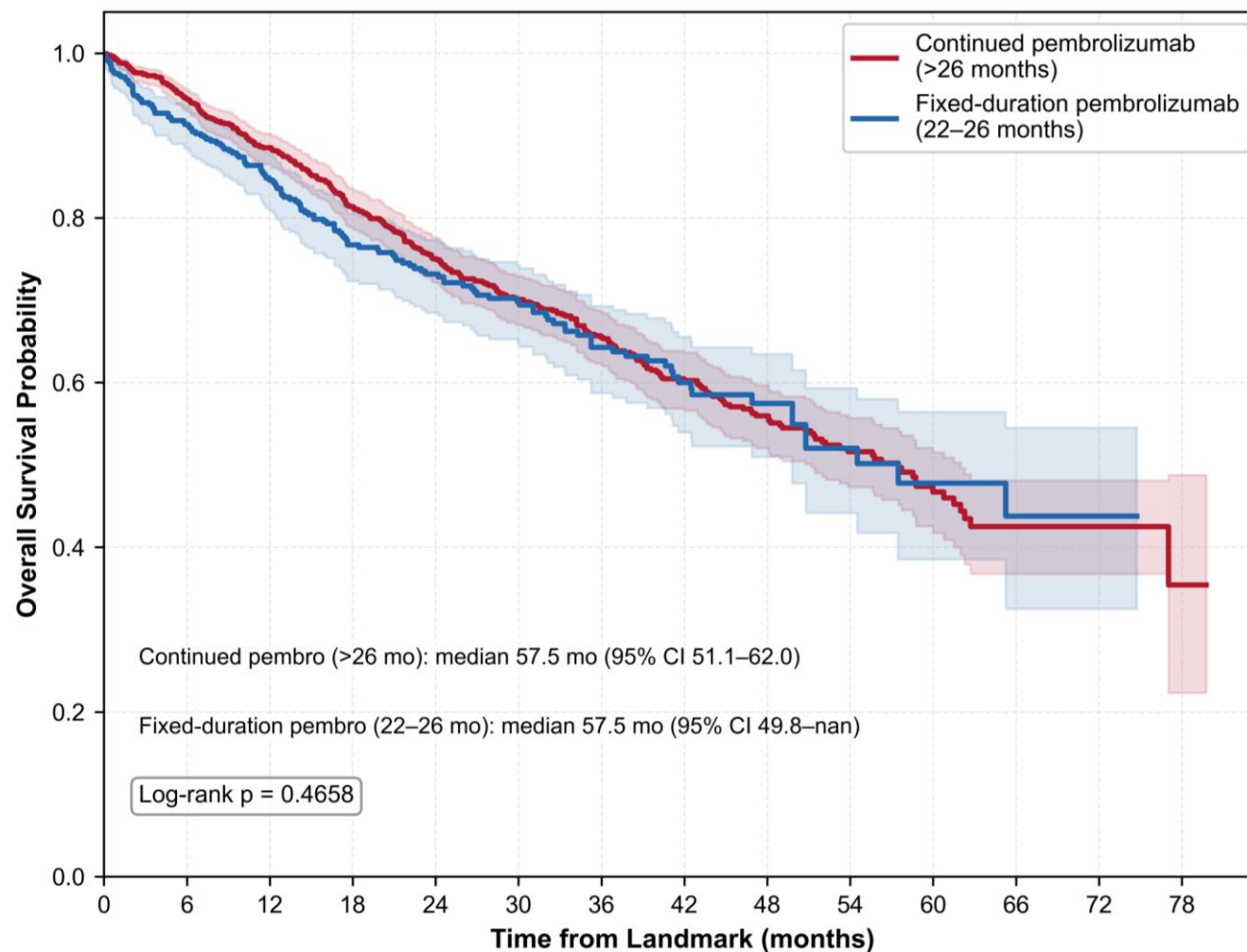
- Median age 70.5 years
- Female: 49%
- ECOG PS 0-1: 72%
- PD-L1 positive: 34%
- Chemoimmunotherapy: 63%

Continuation (n=1,221)

- Median age 70.5 years
- Female: 53%
- ECOG PS 0-1: 69%
- PD-L1 positive: 35%
- Chemoimmunotherapy: 62%

Baseline characteristics were generally similar between cohorts.

Overall Survival From the 29-Month Landmark



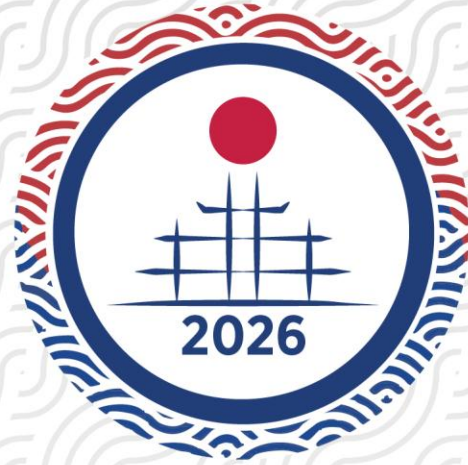
**No survival advantage
observed with continuation
beyond 2 years**

**Median OS: 57.5 vs 57.5 months
Adjusted HR: 0.96 (95% CI 0.79–
1.16); p=0.68**

Median follow-up from landmark: 33.3 vs 28.5
months; 69% censored overall

Discussion and Conclusions

- Continuation of pembrolizumab beyond 2 years was not associated with improved overall survival versus fixed-duration treatment.
- Nevertheless, 71% of eligible patients continued therapy beyond 26 months.
- These findings support consideration of a fixed-duration treatment approach in patients with ongoing disease control.
- Longer follow-up and additional research will be important to identify whether specific patient subgroups, including patients with PD-L1-positive tumors, derive benefit from continued therapy.



Thank You.