



Can Congressional Support Boost Lung Cancer Clinical Trial Participation?

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Andrew Schorr:

Washington, D.C. We just heard a briefing by the American Association for Cancer Research on the importance of congressional support for ongoing research. Someone who is a researcher and also a clinician is Dr. Christine Lovly, a lung cancer specialist...

Dr. Lovly:

Yes, sir.

Andrew Schorr:

...at Vanderbilt University in Nashville, Tennessee.

Dr. Lovly:

Nashville, Tennessee.

Andrew Schorr:

And of course we cover lung cancer on Patient Power. Dr. Lovly, you talked in a very passionate way about the importance of patients considering being in clinical trials, not being afraid of them, to help move, feels like, lung cancer ahead where there has been progress but there's a need for so much more.

Dr. Lovly:

Yes. So I think clinical trials really represent our best therapies that we have out there, right out there right now, and I think that every patient with lung cancer deserves the opportunity to get the most cutting edge, best therapy they can. And for all lung cancer patients the first question they did get asked is Did you smoke? And it shouldn't matter. It doesn't matter.

Nobody deserves to have cancer, but everybody deserves to get the best treatment possible, and I think that clinical trials are the way to get the best treatments out there.

Andrew Schorr:

Now, in lung cancer you've been identifying, you and your peers around the world have been identifying subtypes that have different mutations and seeing did different medicines, different tests help inform what treatment people should get. And I know testing is so important now in monitoring as well so that people get precision oncology, if you will.

Dr. Lovly:

Yes. So there are an increasing number of what we call biomarkers, these mutations that we test for within the tumors which give patients more options for therapy. So if we test the tumor, find one of these mutations that we can use a targeted therapy or often a pill that will specifically attack the tumor, that makes our cancer treatments more personalized or more precise. And that's our goal, is to understand how every single individual patient's tumor behaves and to be able to say how can we exploit the specific, unique nature of that tumor to make the best therapies possible.

Andrew Schorr:

So therefore for the patient and the family it would be important it would seem to have the right testing and really ask questions to make sure that the precise treatment is being brought to bear for them, whether it's investigational and they participate in a trial, or if there's an approved therapy.

Dr. Lovly:

Yes. So it is the standard of care now for lung cancers, particularly one type, lung adenocarcinoma, the most common type, to be tested for two mutations, EGFR and ALK. If it were me or my patients or my family members, I would want more testing because even if it's not approved by the U.S. FDA, at this point there are still lots of experimental therapies for these small but important subgroups of lung cancer where there is a medicine that specifically attacks a mutation that we can detect with genetic testing.

Andrew Schorr:

Okay. So, again, maybe a clinical trial might apply...

Dr. Lovly:

Absolutely.

Andrew Schorr:

...and so people need to see, could that be the investigational therapy for them.

Dr. Lovly:

Absolutely.

Andrew Schorr:

Well, thank you...

Dr. Lovly:

Thank you so much.

Andrew Schorr:

...for all you do. Thank you as an investigator and as a clinician, and let's hope it's an improving story for lung cancer.

Dr. Lovly:

Absolutely. Thank you so much for having me.

Andrew Schorr:

Okay. Andrew Schorr on location on Capitol Hill, where there's a plea for more and continued support from Congress and, of course, for you, the patient, the family to also remember to consider participating in clinical trials, so we all work together to make a difference in lung cancer.

I'm Andrew Schorr. Remember, knowledge can be the best medicine of all.

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