

# Lung cancer: Peer-reviewed journal articles featuring Fortrea oncologists



Recent advances in lung cancer therapeutics are driven by an improved understanding of tumor biology, including biomarker expression, genomic alterations and immune-oncology mechanisms.

Fortrea's oncology experts contribute scientific and clinical expertise across these domains, supporting the generation and interpretation of high-quality evidence in both clinical trial and real-world settings.

Through collaboration with sponsors and academic partners, Fortrea's global team of 50+ oncologists frequently co-author peer-reviewed publications arising from studies we support.

These contributions advance scientific knowledge in lung cancer and help inform evidence-based decision-making across diverse patient populations and healthcare settings.

2025	
Number	Authors, Title, Journal
2025.1	<p>Cortellini A, Brunetti L, Di Fazio GR, Garbo E, Pinato DJ, Naidoo J, Jayakrishnan R, et al. <b>Determinants of five-year survival in patients with advanced NSCLC with PD-L1<math>\geq</math>50% treated with first-line pembrolizumab outside of clinical trials: Results from the Pembro-real 5Y global registry.</b> <i>BMJ Journals</i>. February 2025. <a href="https://doi.org/10.1136/jitc-2024-010674">https://doi.org/10.1136/jitc-2024-010674</a></p> <p><b>Summary:</b> This paper analyzes the determinants of five-year survival in patients with advanced non-small cell lung cancer (NSCLC) with PD-L1 expression <math>\geq</math>50%, treated with first-line pembrolizumab outside of clinical trials. Using data from the Pembro-real 5Y global registry, the study identifies key factors influencing long-term outcomes, such as patient characteristics, tumor biology and treatment patterns. The findings provide valuable insights into real-world applications of pembrolizumab, highlighting its potential to improve survival in this patient population while addressing challenges like variability in response and resistance mechanisms.</p>
2025.2	<p>Batra U, Sharma M, Miller AA, Chufal KS, Ahmad I, Dewan A, Chowdhary S, Amrith BP, Sachdeva R, Batra V, Umesh P, Bhatia K, Nathany S, Mehta A, Filho PN, Tolba K, Chico IM, Boixader LV, Cantini L, Saini KS. <b>First-line pembrolizumab for metastatic NSCLC in lower-middle-income countries: Bridging the efficacy-effectiveness gap.</b> <i>Immunotherapy</i>. August 2025. <a href="https://pubmed.ncbi.nlm.nih.gov/40910565/">https://pubmed.ncbi.nlm.nih.gov/40910565/</a></p> <p><b>Summary:</b> This paper explores the real-world performance of first-line pembrolizumab in patients with metastatic non-small cell lung cancer (NSCLC) treated in lower-middle-income countries. The study compares outcomes with those reported in global clinical trials, identifying factors that contribute to the efficacy-effectiveness gap, including variations in access to diagnostics, treatment delivery and supportive care. The findings underscore the importance of context-appropriate strategies to optimize immunotherapy use in resource-constrained settings and improve survival for patients with advanced NSCLC.</p>
2025.3	<p>Cortellini A, Santo V, Brunetti L, Garbo E, Pinato DJ, La Cava G, Naidoo J, Katz A, Loza M, Neal JW, et al. <b>Transformer-based AI approach to unravel long-term, time-dependent prognostic complexity in patients with advanced NSCLC and PD-L1 <math>\geq</math>50%: Insights from the pembrolizumab five-year global registry.</b> <i>Journal for ImmunoTherapy of Cancer</i>. September 29, 2025. <a href="https://jitc.bmj.com/content/13/9/e012423">https://jitc.bmj.com/content/13/9/e012423</a></p> <p><b>Summary:</b> This paper applies a transformer-based AI model to capture complex, time-dependent prognostic patterns in advanced NSCLC patients with PD-L1 <math>\geq</math>50% receiving first-line pembrolizumab. Using data from the global five-year registry, the study identifies dynamic factors influencing long-term outcomes and demonstrates how advanced analytics can support better risk-stratification. The results illustrate the growing role of AI in interpreting real-world immunotherapy data.</p>
2025.4	<p>Batra U, Sharma M, Ahmad I, Rajappa S, Nathany S, Cantini L, Sachdeva R, Batra V, Choudhury R, Agarwal B, Dewan A, Choudhary S, Amrith BP, Darlong LM, Chufal KS, Umesh P, Bhatia K, Filho PN, Saini KS, Mehta A. <b>A decade of treating ALK-rearranged non-small cell lung cancer in a lower-middle income country: Changing patterns and improving survival.</b> <i>Oncology &amp; Therapy</i>. October 17, 2025. <a href="https://link.springer.com/article/10.1007/s40487-025-00390-y">https://link.springer.com/article/10.1007/s40487-025-00390-y</a></p> <p><b>Summary:</b> This paper presents real-world evidence showing that newer-generation ALK inhibitors meaningfully improve survival in ALK-positive NSCLC, with outcomes comparable to Western settings—even in resource-constrained environments, underscoring the importance of access to newer therapies and real-world evidence in informing treatment strategies.</p>

Full list of published journals continued:

2025	
Number	Authors, Title, Journal
2025.5	<p>Cortellini A, Garbo E, La Cava G, Citarella F, Santo V, Brunetti L, Pinato DJ, Naidoo J, Loza M, Genova C, et al. <b>Long-term outcomes from pembrolizumab monotherapy in patients with advanced NSCLC, PD-L1 expression <math>\geq</math>50%, and poor performance status: Transformer-based AI to characterize prognostic complexity.</b> <i>Lung Cancer</i>. November 2025. <a href="https://www.lungcancerjournal.info/article/S0169-5002(25)00691-9/fulltext">https://www.lungcancerjournal.info/article/S0169-5002(25)00691-9/fulltext</a></p> <p><b>Summary:</b> This paper investigates long-term outcomes in advanced NSCLC patients with PD-L1 <math>\geq</math>50% and poor performance status treated with pembrolizumab monotherapy. Incorporating transformer-based AI analysis, the study reveals prognostic patterns and heterogeneity that traditional models may miss. The findings provide practical insights for clinicians treating high-risk populations often under-represented in clinical trials.</p>
2024	
Number	Authors, Title, Journal
2024.1	<p>Nesline MK, Subbiah V, Previs RA, Strickland KC, Ko H, DePietro P, Biorn MD, Cooper M, Wu N, Conroy J, Pabla S, Zhang S, Wallen ZD, Sathyan P, Saini KS, Eisenberg M, Caveney B, Severson EA, Ramkissoon S. <b>The impact of prior single-gene testing on comprehensive genomic profiling results for patients with non-small cell lung cancer.</b> <i>Oncology &amp; Therapy</i>. March 2024. <a href="https://link.springer.com/article/10.1007/s40487-024-00270-x">https://link.springer.com/article/10.1007/s40487-024-00270-x</a></p> <p><b>Summary:</b> Minimally invasive techniques for obtaining biopsy samples are much preferred by patients. However, the quantity of samples thus obtained is limited. Therefore, it is incredibly important to implement a testing strategy that optimizes the use of the valuable biosamples. This study evaluates how prior single-gene testing (SGT) affects the outcomes of subsequent comprehensive genomic profiling (CGP) in non-small cell lung cancer (NSCLC) patients. The research found that patients who underwent SGT first had higher rates of CGP test cancellations, longer turnaround times and incomplete molecular profiling due to tissue insufficiency. Despite these challenges, 46% of patients with negative SGT results had positive CGP results for recommended biomarkers, highlighting the importance of CGP for thorough molecular profiling.</p>
2024.2	<p>Wallen ZD, Ko H, Nesline MK, Hastings SB, Strickland KC, Previs RA, Zhang S, Pabla S, Conroy J, Jackson JB, Saini KS, Jensen TJ, Eisenberg M, Caveney B, Sathyan P, Severson EA, Ramkissoon SH. <b>Real-world comprehensive genomic and immune profiling reveals distinct age- and sex-based genomic and immune landscapes in tumors of patients with non-small cell lung cancer.</b> <i>Frontiers in Immunology</i>. June 2024. <a href="https://www.frontiersin.org/journals/immunology/articles/10.3389/fimmu.2024.1413956/full">https://www.frontiersin.org/journals/immunology/articles/10.3389/fimmu.2024.1413956/full</a></p> <p><b>Summary:</b> This paper presents real-world comprehensive genomic and immune profiling that reveals distinct age- and sex-associated molecular landscapes in non-small cell lung cancer (NSCLC). Younger patients, especially males, exhibited unique genomic alterations and immune microenvironment features linked to differential responses to immunotherapy and chemotherapy. Importantly, the findings suggest tailored profiling could help optimize treatment strategies—highlighting the value of integrating genomic and immune biomarkers to inform precision oncology and improve outcomes across diverse patient groups</p>

**Full list of published journals continued:**

Number	Authors, Title, Journal
2024.3	<p>Strickland KC, Nesline MK, Previs RA, Ko H, Wallen ZD, Pabla S, Conroy JM, Sausen M, Saini KS, Cantini L, Jensen T, Caveney BJ, Eisenberg M, Severson EA, Ramkissoon SH. <b>Single gene testing and comprehensive genomic profiling in non-small cell Lung cancer: A case series of divergent results from a large reference laboratory.</b> <i>Frontiers in Oncology</i>. October 2024. <a href="https://www.frontiersin.org/journals/oncology/articles/10.3389/fonc.2024.1445668/full">https://www.frontiersin.org/journals/oncology/articles/10.3389/fonc.2024.1445668/full</a></p> <p><b>Summary:</b> This paper presents a case series comparing single-gene testing (SGT) and comprehensive genomic profiling (CGP) in non-small cell lung cancer (NSCLC). It highlights the limitations of SGT, which may miss actionable genetic alterations due to its narrower scope and contrasts it with CGP, which uses next-generation sequencing to provide a broader molecular profile. The authors discuss four cases where CGP identified actionable alterations that SGT did not, emphasizing the importance of CGP in guiding personalized treatment and clinical trial opportunities. The study underscores the value of CGP in precision oncology, while addressing challenges like cost and tissue availability.</p>
<b>2023</b>	
Number	Authors, Title, Journal
2023.1	<p>Salifu I, Singh N, Berraondo M, Remon J, Salifu S, Severson E, Quintana A, Peiró S, Ramkissoon S, Vidal L, Chico I, Saini KS. <b>Antibody-drug conjugates, immune-checkpoint inhibitors and their combination in advanced non-small cell lung cancer.</b> <i>Cancer Treatment and Research Communications</i>. April 2023. <a href="https://doi.org/10.1016/j.ctarc.2023.100713">https://doi.org/10.1016/j.ctarc.2023.100713</a></p> <p><b>Summary:</b> Antibody-drug conjugates have emerged as one of the most exciting advances in cancer therapeutics in the past decade, and Fortrea has been involved in the execution of clinical trials for many such molecules. This manuscript highlights the growing role of ADCs in non-small cell lung cancer.</p>



See a full list of Fortrea oncology publications starting in 2020.



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