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“Navigating the evolving landscape of cancer treatment: a triad of progress”

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In recent years, the treatment paradigms for locally advanced rectal cancer, early breast cancer, and early-stage non-small-cell lung cancer (NSCLC) have undergone significant transformations. The traditional approaches, although effective, faced challenges such as tumor recurrence and quality-of-life issues. Now, a nuanced understanding of the unique characteristics of each cancer has paved the way for personalized interventions.

In locally advanced rectal cancer, the short review explores novel strategies such as induction and consolidation chemotherapy, a watch-and-wait approach, and immunotherapy integration, offering tailored options beyond the conventional standards [1]. Early breast cancer treatment has seen remarkable milestones, emphasizing the importance of distinct strategies for hormone receptor-positive, HER2-positive, and triple-negative subtypes [2]. Precision medicine is key to navigating the complexities of these diverse breast cancers.

The revolution in treating early-stage NSCLC is marked by immune checkpoint inhibitors (ICI) and targeted therapies. As ICI therapy extends its reach to the early stages, ongoing studies demonstrate promising improvements in disease-free survival and pathologic remissions [3]. Simultaneously, targeted therapies reshape clinical practices, particularly for specific NSCLC subgroups.

This editorial comment underscores the triad of progress in cancer care, highlighting the shift toward personalized treatment approaches. Clinicians are now equipped with a diverse toolkit, allowing them to tailor interventions based on individual patient needs and cancer subtypes. The journey of cancer treatment is dynamic, and these advancements usher in an era where precision and customization define the path forward.

Conflict of interest A. Pircher declares that he/she has no competing interests.

References

1. Piringer G. Total neoadjuvant therapy for each local advanced rectal cancer? memo. 2024;17(1).
2. Klocker EV. (Neo)adjuvant approaches—pavement on the road of cure—breast cancer. memo. 2024;17(1). <https://doi.org/10.1007/s12254-023-00942-w>
3. Wass R, Hochmair M, Lang D, Horner A, Lamprecht B. (Neo)adjuvant approaches in lung cancer—paving the road to cure. memo. 2024;17(1).

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