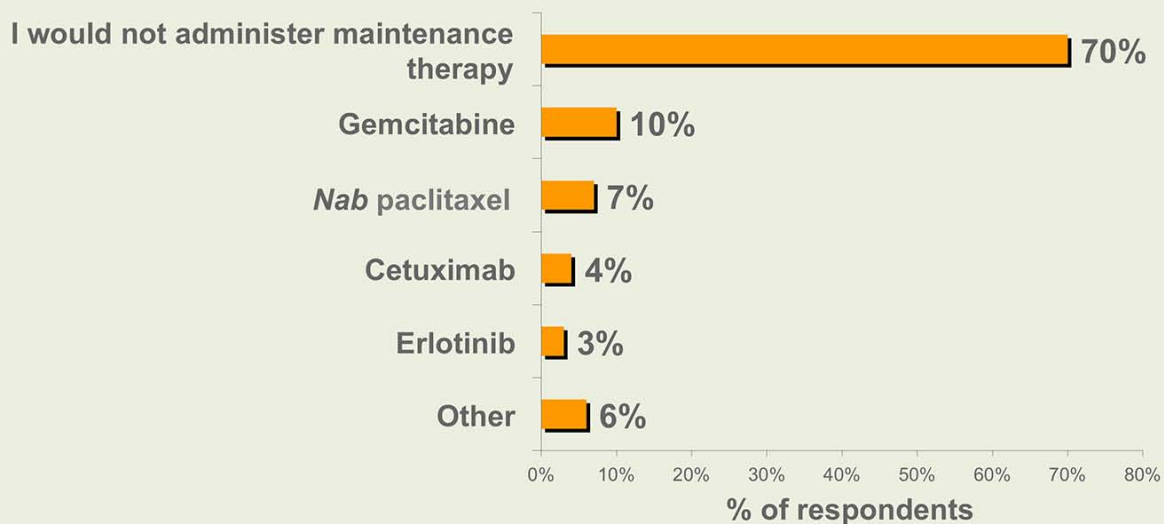


Maintenance treatment for mSCLC

An otherwise healthy 60-year-old patient presents with low tumor burden, asymptomatic, metastatic PWT squamous cell carcinoma of the lung.

Which agents would you generally recommend for maintenance therapy? (May select more than one.)



EDITOR'S COMMENTS

Although maintenance therapy is currently a standard part of the management of metastatic nonsquamous NSCLC, the evidence base supporting this practice is much weaker in squamous cell lung cancer. As such, Dr Ramalingam and 70% of oncologists do not routinely use this treatment strategy. However, Dr Wakelee believes that the concept of continually suppressing the disease versus giving a systemic treatment holiday is the same whether dealing with squamous or nonsquamous disease and therefore often uses gemcitabine maintenance after gemcitabine/carboplatin induction.

SELECT REFERENCES WITH LINKS

Coudert B et al. **Survival benefit with erlotinib maintenance therapy in patients with advanced non-small-cell lung cancer (NSCLC) according to response to first-line chemotherapy.** *Ann Oncol* 2012;23(2):388-94. [Abstract](#)

Neal JW et al. **The SATURN trial: The value of maintenance erlotinib in patients with non-small-cell lung cancer.** *Future Oncol* 2010;6(12):1827-32. [Abstract](#)

Perol M et al. **Randomized, phase III study of gemcitabine or erlotinib maintenance therapy versus observation, with predefined second-line treatment, after cisplatin-gemcitabine induction chemotherapy in advanced non-small-cell lung cancer.** *J Clin Oncol* 2012;30(28):3516-24. [Abstract](#)