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Thoracic Neuroendocrine Tumors and the Role of Emerging Therapies

Guest Editors:

Dr. Nagla Abdel Karim

Dr. Asad Ullah

Dr. Jaffar Khan

Prof. Dr. Fernando Mendes

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Message from the Guest Editors

Thoracic Neuroendocrine Tumors (NETs) are classified into well-differentiated (low-grade typical carcinoids [TCs] and intermediate-grade atypical carcinoids [ACs]) and poorly differentiated (high-grade large cell neuroendocrine carcinoma LCNEC) or small cell lung carcinoma (SCLC) neuroendocrine carcinoma. Despite the increasing incidence of thoracic NETS, awareness [1] and the development of personalized approach therapies in these patients lag.

Effective systemic therapies for patients with advanced, progressive neuroendocrine lung tumors are very rare. However, recently, everolimus was associated with significant improvement in progression-free survival in patients with progressive lung neuroendocrine tumors [3]. Further drug development is needed.

To date, there is only one biomarker-based clinical trial, S1929, in the poorly differentiated NETs; SCLC that has recently completed enrollment for screening, that attempts to stratify patients with SCLC to receive PARP inhibitor based on SLFN11 that is expressed by more than half of patients with SCLC. Further knowledge of predictive factors and novel therapies is needed.

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Editor-in-Chief

Prof. Dr. Samuel C. Mok
Department of Gynecologic Oncology and Reproductive Medicine, The University of Texas MD Anderson Cancer Center, Houston, TX 77030, USA

Message from the Editor-in-Chief

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Contact Us

Cancers Editorial Office
MDPI, St. Alban-Anlage 66
4052 Basel, Switzerland

Tel: +41 61 683 77 34
www.mdpi.com

mdpi.com/journal/cancers
cancers@mdpi.com
𝕏@Cancers_MDPI