5 ways to think differently about cancer immunotherapy

Using immunotherapies for the treatment of cancer is not a new concept, but recent advances in the field have encouraged us to think differently about how they are applied in the treatment of cancer.

1. **Cancer immunotherapy is no longer just about boosting the body’s immune system, it’s more specific. Immunotherapy does not begin/end with just one target/pathway**

   - Some targets on cancer cells act as immune system ‘stop’ signs that may be blocked.
   - Other targets on immune cells may promote an anti-cancer immune response that was weak or non-existent before.

2. **Immunotherapies do not always have to work alone. In fact, combining different classes of medicines may be very important. Combinations that might synergise with immunotherapies include:**

   - Other immunotherapies
   - Targeted therapies
   - Chemotherapies

3. **Antibodies can now be re-engineered in way to enhance the body’s immune system to fight cancer by:**

   - Disabling the antibody’s capacity to launch an immune attack on healthy cells.
   - Attaching biological ‘beacons’ that attract the immune system to cancer cells.
   - Bringing together cancer and immune cells with ‘bi-specific’ antibody binding.

4. **Cancer immunotherapy can be personalised to a person’s individual tumour biology**

   - Immunotherapies are often designed for use in broad populations.
   - In some cases, biomarkers and diagnostics can help us identify who will more likely have a clinically meaningful benefit.

5. **In order to advance cancer immunotherapy to where it is today, a change in mindset has been adopted, including:**

   - Expansion of large phase I trials with potential for registration and basket trials with multiple expansion cohorts.
   - Validation of diagnostic tests as early as possible in clinical trials.
   - Fostering of open and frequent dialogue between companies and regulatory authorities (e.g., breakthrough therapy designation).