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Role of Immunotherapy treatment in gynecological cancers

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The tumors of the female genital tract represent a leading cause of morbidity and mortality among women worldwide. Immunotherapy, including a number of approaches, checkpoint inhibitors, adoptive cellular transfer, vaccines, has experienced a remarkable growth in the last few years and it is already an available option in melanoma, lung and renal malignancies. In recent years, progress in our understanding of immune-modulatory signaling pathways in immune cells and the tumor microenvironment (TME) has led to rejuvenated interest in cancer immunotherapy. Immunotherapy targeting the immune checkpoint receptors such as cytotoxic T-lymphocyte-associated antigen 4 (CTLA-4), programmed cell-death 1 (PD-1), and programmed cell-death ligand 1 (PD-L1) have demonstrated clinical activity in a wide variety of tumors, including gynecological cancers. This review will focus on the

emerging clinical data on the therapeutic role of immune checkpoint inhibitors and the most promising novel agents, in the context of gynecological cancers. It is anticipated that future biomarker-directed clinical trials will provide further insights into the mechanisms underlying response and resistance to immunotherapy and help guide our approach to designing therapeutic combinations that have the potential to enhance the benefit of immunotherapy in patients with gynecologic cancers.

Speaker Biography

Mohamed Sheta is a Associate Professor of Clinical Oncology in faculty of Medicine, Tanta University and Consultant of Clinical Oncology at Clinical Oncology Department, Tanta University Hospital, Tanta and Nile Insurance Hospital, Cairo He has published his papers in reputed journals

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