

Lung Cancer: Advancing Screening, Therapies, Diagnostics

Hannah T. Whitmore*

Department of Pulmonary Research, Westfield University Hospital, Manchester, UK

Introduction

Lung cancer management is a continually advancing field, marked by significant strides in screening, diagnosis, and therapy. General internists must stay current on lung cancer screening recommendations, especially for identifying high-risk individuals and utilizing low-dose computed tomography (LDCT) for early detection. Understanding management strategies after a positive screen is crucial, ensuring best practices for timely intervention and optimizing patient outcomes. [1]

For advanced Non-Small Cell Lung Cancer (NSCLC), there's been an extraordinary surge in targeted therapies. This includes novel agents and a deeper understanding of resistance mechanisms for oncogenic drivers like Epidermal Growth Factor Receptor (EGFR), Anaplastic Lymphoma Kinase (ALK), ROS proto-oncogene 1, Receptor Tyrosine Kinase (ROS1), B-Raf Proto-Oncogene, Serine/Threonine Kinase (BRAF), Mesenchymal-Epithelial Transition (MET), and Kirsten Rat Sarcoma Virus (KRAS). What this really means is that precision medicine is transforming patient care by tailoring treatments to genetic mutations, leading to improved prognoses. [2]

Immunotherapy stands as another revolutionary pillar in NSCLC treatment. Research explores the expanding role of these agents, discussing approved options, combination strategies, and biomarkers that predict response. Here's the thing, immunotherapy's utility spans all disease stages, from early to advanced, demonstrating its profound impact and a paradigm shift in NSCLC treatment. [3]

Beyond traditional diagnostics, liquid biopsy has emerged as a less invasive yet powerful tool for lung cancer management. This advanced technology promises early diagnosis, detailed molecular profiling, precise treatment monitoring, and effective recurrence detection. It focuses on analyzing circulating tumor DNA (ctDNA), circulating tumor cells (CTCs), and other critical biomarkers, providing valuable insights without invasive procedures. [4]

Small Cell Lung Cancer (SCLC), known for its aggressive nature, poses significant therapeutic challenges. Despite this, dedicated research yields progress, including immunotherapy integration into standard care, ongoing investigation into novel targeted agents, and a persistent need for new therapeutic strategies. The focus remains on improving patient outcomes for this aggressive disease. [5]

Artificial Intelligence (AI) and Machine Learning (ML) are rapidly integrating into lung cancer management. Let's break it down: these technologies are deployed across applications from enhancing early detection and improving diagnostic precision to formulating prognosis predictions, optimizing individualized treatment plans, and accelerating drug discovery. This clearly demonstrates how AI and

ML can genuinely transform clinical practice, offering unprecedented capabilities. [6]

In NSCLC, molecular pathology continuously evolves, with constant updates on essential biomarkers. These biomarkers are fundamental for guiding targeted therapies and immunotherapies. This domain provides crucial insights into current testing guidelines and their clinical implications, making it exceptionally clear how molecular insights now directly drive highly personalized treatment strategies, moving from a one-size-fits-all approach. [7]

Precision medicine has indeed exerted a transformative influence on NSCLC care, driven by the systematic identification of numerous actionable genomic alterations and the rapid development of specific targeted therapies. What this really means is that these significant advancements have led to substantial improvements in patient outcomes, offering a hopeful trajectory for future innovation in the field. [8]

For early-stage NSCLC, robust consensus guidelines ensure optimal care. These cover comprehensive diagnostic evaluation, surgical options, radiation therapy protocols, and emerging adjuvant and neoadjuvant systemic therapies. The objective is straightforward: to optimize patient outcomes through clear, evidence-based recommendations applied consistently. [9]

Finally, advanced nanotechnology-based drug delivery systems offer a highly promising new direction for lung cancer therapy. These innovative platforms are engineered to improve drug specificity, reduce systemic toxicity, and enhance therapeutic efficacy. This research addresses current challenges and explores future directions, highlighting a promising avenue for developing more effective and safer treatments. [10]

Description

Lung cancer diagnosis and management are undergoing rapid transformations, driven by advancements in various scientific and technological domains. A cornerstone of early intervention involves comprehensive screening recommendations for general internists, particularly emphasizing the identification of high-risk individuals and the critical role of low-dose computed tomography (LDCT). After a positive screen, clinicians need clear guidelines for effective management strategies, ensuring early detection and appropriate intervention [1]. This holistic approach is fundamental to improving patient prognoses and survival rates.

Furthermore, the aggressive nature of Small Cell Lung Cancer (SCLC) continues to pose significant challenges, necessitating continuous advancements in therapeutic approaches. Recent progress in SCLC includes the successful integration of

immunotherapy into standard care protocols and the ongoing exploration of novel targeted agents. The persistent need for new therapeutic strategies highlights the urgent commitment to improving patient outcomes for this particularly difficult disease [5]. Despite its challenges, dedicated research continues to offer new hope for SCLC patients.

One of the most profound impacts on Non-Small Cell Lung Cancer (NSCLC) treatment has come from targeted therapies and the broader application of precision medicine. There have been remarkable advancements in developing novel agents and understanding resistance mechanisms for key oncogenic drivers such as Epidermal Growth Factor Receptor (EGFR), Anaplastic Lymphoma Kinase (ALK), ROS proto-oncogene 1, Receptor Tyrosine Kinase (ROS1), B-Raf Proto-Oncogene, Serine/Threonine Kinase (BRAF), Mesenchymal-Epithelial Transition (MET), and Kirsten Rat Sarcoma Virus (KRAS) [2]. What this really means is that tailoring treatments to specific genetic mutations is profoundly improving patient outcomes. This focus on individual molecular profiles extends to the broader field of precision medicine in NSCLC, which has been transformative due to the identification of numerous actionable genomic alterations and the subsequent development of highly effective targeted therapies [8]. These advancements have significantly improved patient outcomes, with a clear vision for future directions in the field.

Immunotherapy has also revolutionized NSCLC care, evolving to cover diverse applications across various stages of the disease. The current landscape includes discussions on approved agents, innovative combination strategies, and the identification of crucial biomarkers that predict treatment response [3]. Here's the thing, its application from early to advanced stages demonstrates how immunotherapy has fundamentally changed treatment paradigms. Supporting these personalized approaches, molecular pathology in NSCLC constantly updates essential biomarkers for both targeted therapies and immunotherapies. This provides crucial insights into current testing guidelines and their clinical implications, making it clear how molecular insights drive personalized treatment strategies [7]. For early-stage NSCLC, established guidelines consolidate diagnostic evaluation, surgical options, radiation therapy, and emerging adjuvant and neoadjuvant systemic therapies to optimize patient outcomes through evidence-based recommendations [9].

Innovations in diagnostic and therapeutic delivery methods are also reshaping lung cancer management significantly. Liquid biopsy, for instance, offers a less invasive approach with significant potential for early diagnosis, comprehensive molecular profiling, monitoring treatment response, and detecting recurrence. It focuses on analyzing circulating tumor DNA (ctDNA), circulating tumor cells (CTCs), and other biomarkers, offering less invasive ways to manage the disease [4]. Meanwhile, the integration of Artificial Intelligence (AI) and Machine Learning (ML) is exploring new frontiers. These technologies are applied across multiple facets, from enhancing early detection and improving diagnostic accuracy to prognosis prediction, treatment planning, and even drug discovery, genuinely transforming clinical practice [6]. Finally, advanced nanotechnology-based drug delivery systems represent a highly promising avenue to improve drug specificity, reduce systemic toxicity, and enhance therapeutic efficacy in lung cancer therapy. This area actively addresses current challenges and highlights future directions for more effective and safer treatments, indicating a promising path forward for patient care [10].

Conclusion

The field of lung cancer management is rapidly advancing, with key developments in screening, personalized therapies, and diagnostic innovations. For instance, comprehensive lung cancer screening guidelines emphasize identifying high-risk individuals and utilizing low-dose computed tomography for early detection. Signif-

icant progress in treating advanced Non-Small Cell Lung Cancer (NSCLC) includes targeted therapies that address specific oncogenic drivers like Epidermal Growth Factor Receptor, Anaplastic Lymphoma Kinase, and Kirsten Rat Sarcoma Virus, leading to profoundly improved patient outcomes through precision medicine.

Immunotherapy has also revolutionized NSCLC treatment, with new agents, combination strategies, and biomarker identification shaping care across all disease stages. Liquid biopsy offers a less invasive method for early diagnosis, molecular profiling, and treatment monitoring, analyzing circulating tumor DNA and circulating tumor cells. In Small Cell Lung Cancer (SCLC), immunotherapy integration and novel targeted agents are improving outcomes despite its aggressive nature. Moreover, Artificial Intelligence and Machine Learning are transforming management from diagnosis to drug discovery. The evolving molecular pathology of NSCLC provides crucial insights for personalized treatment, while nanotechnology-based drug delivery systems offer promising avenues for more effective and safer therapies. All these advancements underscore a concerted effort to optimize lung cancer care.

Acknowledgement

None.

Conflict of Interest

None.

References

1. Jian Ma, Yan Liu, Ying Li. "Screening and management of lung cancer. A review for the general internist." *BMC Cancer* 22 (2022):830.
2. Jong-Mu Sun, Se-Hoon Lee, Dong-Wan Kim. "Recent advances in targeted therapies for advanced non-small cell lung cancer: a comprehensive review." *J Thorac Oncol* 18 (2023):1618-1634.
3. Scott J. Antonia, Michael A. Postow, Matthew D. Hellmann. "The current landscape of immunotherapy for non-small cell lung cancer." *Nat Rev Clin Oncol* 20 (2023):760-776.
4. Xu Han, Shuhui Xu, Yuyang Liu. "Liquid biopsy for the diagnosis and monitoring of lung cancer: a comprehensive review." *BMC Cancer* 21 (2021):1302.
5. Jarish Remon, Benjamin Besse, Cécile Le Pechoux. "Advancements in small-cell lung cancer therapy: challenges and opportunities." *Nat Rev Clin Oncol* 17 (2020):775-792.
6. Teruhito Kido, Yosuke Ohno, Hiroyuki Satoh. "Artificial intelligence and machine learning in lung cancer: a review." *Transl Lung Cancer Res* 9 (2020):2125-2143.
7. Dara L. Aisner, Lynette M. Sholl, Samuel Michels. "Molecular Pathology of Non-Small Cell Lung Cancer: An Update on the Latest Biomarkers and Guidelines." *Arch Pathol Lab Med* 147 (2023):1391-1406.
8. Hossein Borghaei, Benjamin Besse, Tony Mok. "Precision medicine in non-small cell lung cancer: a rapidly evolving landscape." *Nat Rev Clin Oncol* 20 (2023):777-792.
9. David S. Ettinger, Douglas E. Wood, Mark G. Kris. "Current approaches to the management of early-stage non-small cell lung cancer." *J Natl Compr Canc Netw* 21 (2023):360-379.

10. Ruochen Sun, Xue Li, Shuhui Fan. "Nanotechnology-based drug delivery systems for lung cancer therapy: current status and future perspectives." *Front Pharmacol* 14 (2023):1264421.

How to cite this article: Whitmore, Hannah T.. "Lung Cancer: Advancing Screening, Therapies, Diagnostics." *J Pulm Respir Med* 15 (2025):770.

***Address for Correspondence:** Hannah, T. Whitmore, Department of Pulmonary Research, Westfield University Hospital, Manchester, UK, E-mail: h.whitmore@westuh.ac.uk

Copyright: © 2025 Whitmore T. Hannah This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.

Received: 01-Dec-2025, Manuscript No. jprm-25-174600; **Editor assigned:** 03-Dec-2025, PreQC No. P-174600; **Reviewed:** 17-Dec-2025, QC No. Q-174600; **Revised:** 22-Dec-2025, Manuscript No. R-174600; **Published:** 29-Dec-2025, DOI: 10.37421/2161-105X.2025.15.770
