

IASLC_WCLC 2026 Preview – Clinical and AI / ML



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IASLC 2026 World Conference on Lung Cancer
SEPTEMBER 12 - 15, 2026 | SEOUL, REPUBLIC OF KOREA

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SEPTEMBER 12 - 15, 2026

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- **Will ADCs become a dominant treatment modality across lung cancer?**

- IASLC-WCLC 2026 will feature multiple ADC-based strategies across SCLC and NSCLC, including approaches targeting B7-H3, TROP2, and HER2. The strategic question will be whether ADCs can move beyond incremental improvements and establish a broader role across treatment pathways through improved efficacy, patient selection, and differentiation from existing modalities



- **Can B7-H3 targeting establish a new therapeutic pathway in relapsed SCLC?**

- Phase 3 evaluations of B7-H3-directed ADC approaches in relapsed SCLC will test whether targeting tumour-associated antigens can overcome the limited durability of current treatment options. The key uncertainty will be whether these approaches can demonstrate sufficient clinical benefit to change treatment sequencing in a historically difficult-to-treat population



• Will treatment sequencing become the defining challenge in EGFR-mutated NSCLC?

- WCLC 2026 will present data across different stages of EGFR-mutated NSCLC, including early-stage disease, advanced disease, and EGFR exon 20 insertion populations. The competitive question will be whether future treatment decisions will depend increasingly on sequencing strategies across multiple targeted options rather than a single preferred approach



• Will molecular segmentation reshape the future of NSCLC treatment?

- The increasing focus on biomarker-defined populations, including EGFR, HER2, ALK, ROS1, and RAS alterations, will highlight the shift toward increasingly personalised NSCLC management. The strategic tension will be whether deeper molecular classification improves outcomes while also increasing complexity around testing, treatment selection, and clinical implementation





- **Can next-generation combinations extend the role of immunotherapy in NSCLC?**

- Combination strategies involving checkpoint inhibitors with ADCs and other emerging treatment approaches will test whether immunotherapy can continue expanding beyond established standards. The key question will be whether these combinations provide meaningful clinical advantages while maintaining manageable toxicity and clear positioning within treatment algorithms



- **Will CNS activity become a key differentiator in lung cancer treatment?**

- As brain metastases remain a major challenge in lung cancer, WCLC 2026 will examine approaches designed to improve intracranial disease control across targeted therapies and ADC-based strategies. The unresolved question will be whether CNS penetration and activity become decisive factors when selecting among increasingly competitive treatment options





Key Sessions To Watch

Date	Session Title (short)	Type	Author / Institution	Why Watch
13 Sep 2026	TAISHAN-302: Tam-Peli vs Topotecan in Relapsed SCLC	Presidential Symposium	L. Zhang	A potential test of whether B7-H3-directed ADCs can establish a new treatment option in relapsed SCLC
13 Sep 2026	ARTEMIS-008: Risvutatug Rezetecan vs Topotecan in Relapsed SCLC	Presidential Symposium	J. Wang	Provides another Phase 3 benchmark for evaluating the role of B7-H3 targeting in SCLC.
13 Sep 2026	EVOKE-03/KEYNOTE D46: Sacituzumab Govitecan + Pembrolizumab in Metastatic NSCLC	Presidential Symposium	G. Mountzios	Addresses whether ADC-immunotherapy combinations can move earlier into first-line NSCLC treatment.
14 Sep 2026	ADAURA 8-year Overall Survival Landmark Update	Presidential Symposium	R.S. Herbs	Long-term follow-up that may further define the durability of adjuvant osimertinib benefit in EGFR-mutated NSCLC.
14 Sep 2026	PAPILLON Overall Survival: Amivantamab + Chemotherapy	Presidential Symposium	C. Kim	Important for understanding the longer-term positioning of EGFR exon 20 insertion treatment strategies.
14 Sep 2026	REZILIENT 3: Zipalertinib + Chemotherapy	Presidential Symposium	D.S. Tan	Adds further evidence to the evolving competition within EGFR exon 20 insertion NSCLC.
14 Sep 2026	CROWN Trial Long-Term Update: Lorlatinib in ALK+ NSCLC	Industry Session	Jessica Jiyeong Lin, MD	Focuses on whether sustained disease control and CNS activity can maintain differentiation in ALK-positive disease
14 Sep 2026	DESTINY-Lung04: Trastuzumab Deruxtecan in HER2-Mutant NSCLC	Oral / Featured Session	J. Rotow	Could clarify the future positioning of HER2-directed ADC approaches in biomarker-selected NSCLC.

Industry-Sponsored Sessions & Focus Areas – IASLC 2026





IASLC 2026– Competitive Landscape at a Glance

Name	Sessions	Companies / Assets	Why It Matters
ADC-based lung cancer therapies	Multiple	Tam-Peli; risvutatug rezetecan; sacituzumab govitecan; T-DXd; other ADC approaches	Competition will test how different targets and ADC designs translate into meaningful differentiation across SCLC and NSCLC.
EGFR-driven NSCLC treatment	Multiple	Osimertinib; amivantamab; zipalertinib; other EGFR-directed approaches	The focus will increasingly be on treatment sequencing across EGFR subtypes and disease settings
HER2-mutant NSCLC	Multiple	T-DXd and other HER2-directed approaches	Emerging data will help define the place of HER2-directed therapy within biomarker-selected NSCLC.
Immunotherapy and next-generation combinations	Multiple	PD-1/VEGF-A bispecifics; checkpoint inhibitors; ADC combinations	New combinations will test whether checkpoint inhibition can be extended through different mechanisms and treatment settings
KRAS/RAS-targeted NSCLC	Multiple	RAS-targeted approaches; divarasib; emerging KRAS G12D therapies	Competition will broaden beyond KRAS G12C as new RAS-directed approaches enter clinical development
CNS-directed treatment strategies	Multiple	Targeted therapies; ADC approaches; intracranial treatment strategies	Brain metastases are becoming an increasingly important point of differentiation for systemic therapies



Key Industry-Sponsored Sessions at IASLC 2026 (1/5)



• **Pfizer:**

- Focus Areas: **ALK-Positive NSCLC, Bispecifics & ADC Innovation**
- Sessions will cover **7-year CROWN data**, practical management of durable disease control, emerging bispecific biologics and next-generation ADC innovation in advanced NSCLC. The programme will span both **established targeted therapy and newer antibody-based approaches**



• **AbbVie:**

- Focus Areas: **ADCs, Tumour Biology & Treatment Selection**
- The company will discuss the **evolution of ADCs in lung cancer**, differences in **tumour biology** and matching **ADCs to the relevant biology**. The session will highlight the move toward **more selective use of ADCs based on tumour characteristics**



Key Industry-Sponsored Sessions at IASLC 2026 (2/5)



• AstraZeneca:

- Focus Areas: Early-Stage Lung Cancer, EGFR, HER2 & CNS Outcomes
- The programme will address immunotherapy and local treatments in early-stage disease, actionable genomic alterations, EGFR and HER2 treatment strategies, CNS outcomes, progression and resistance. The sessions will examine treatment optimisation from earlier-stage disease through progression after first-line therapy



• Bayer:

- Focus Areas: HER2-Mutant NSCLC, Personalised Care & Early Adoption
- Presentations will cover the genetic and clinical foundations of HER2-altered NSCLC and personalised care in HER2-mutant disease. The focus on early adoption will address how emerging evidence may translate into treatment decisions



Key Industry-Sponsored Sessions at IASLC 2026 (3/5)



• Johnson & Johnson:

- Focus Areas: First-Line EGFR+ NSCLC, Treatment Selection & Shared Decision-Making
- The programme will address the evolving advanced/metastatic EGFR+ NSCLC landscape, shared decision-making and patient priorities. The **sessions** will emphasise the importance of the initial treatment choice in shaping outcomes



• MSD:

- Focus Areas: ES-SCLC, NSCLC Survival & Emerging Therapies
- Sessions will cover heavily treated ES-SCLC and I-DXd, ADCs and T-cell engagers, alongside resectable NSCLC, metastatic survival and emerging therapeutic approaches. The programme will span both emerging SCLC treatment options and treatment strategies across the NSCLC continuum



Key Industry-Sponsored Sessions at IASLC 2026 (4/5)



• Amgen:

- Focus Areas: SCLC, First-Line Maintenance & Emerging Treatment Strategies
- The Clinical Exchange will cover first-line maintenance, second-line treatment optimisation and emerging therapies in SCLC. The discussion will consider how the treatment landscape may evolve as new approaches begin to challenge established standards of care



• Guardant Health:

- Focus Areas: Liquid Biopsy, Methylation & Tumour Evolution
- The programme will explore methylation signals, liquid biopsy, plasma-based monitoring and tumour evolution in advanced NSCLC. The sessions will examine how broader plasma-based disease characterisation could extend the role of liquid biopsy beyond genomic testing



Key Industry-Sponsored Sessions at IASLC 2026 (5/5)

- **BeOne Medicines:**

- Focus Areas: Immunotherapy, PD-1 Biology & Resectable NSCLC
- The programme will examine PD-1 inhibitor mechanism of action, immunotherapy in PD-L1-high advanced NSCLC and movement into resectable disease. The sessions will explore how immunotherapy strategies may differ across NSCLC settings

- **Daiichi Sankyo:**

- Focus Areas: ADCs, Brain Metastases & CNS Activity
- The session will examine ADC evidence in NSCLC and SCLC patients with brain metastases and remaining evidence gaps. The discussion will put CNS activity under closer scrutiny as ADC development expands



New Entrants (1/2)

Asset / Company	2026 Presence
Tam-Peli	Tam-Peli, an Anti-B7-H3 Antibody-Drug Conjugate, Versus Topotecan in Relapsed SCLC: A Randomized, Open-Label, Phase 3 Study (TAISHAN-302)
Risvutatug rezetecan	Risvutatug Rezetecan (a B7-H3-Directed ADC) Versus Topotecan in Relapsed SCLC: Primary Results of Phase 3 ARTEMIS-008
Divarasib	Neoadjuvant Divarasib Shows Manageable Safety and Promising Activity in Resectable KRAS G12C+ NSCLC: Updated NAUTIKA1 Data
SYS6010	Phase II Study of SYS6010 Plus Enlonstobart in Actionable Genomic Alteration (AGA)-Negative Advanced Non-Small Cell Lung Cancer (Anslc)
YH42946	A Phase 1/2, First in Human Study of YH42946, a Novel Oral HER2 TKI, in Advanced Solid Tumors With HER2 Aberration and EGFR Exon 20 Insertion
SNB-101	A Phase 1b/2, Open-Label Study of SNB-101, a Nanoparticle Formulation of SN-38, in Patients With Extensive-Stage Small Cell Lung Cancer
DRP-104	A Phase 2 Study of DRP-104, a Glutamine Antagonist, in Patients with NFE2L2/KEAP1-altered Non-Small Cell Lung Cancer
CGT4255	A First-in-Human Study of CGT4255 in Patients Who Have Advanced Solid Tumors With ERBB2 Alterations or HER2 Overexpression



New Entrants (2/2)

Asset / Company	2026 Presence
VRN101099	Early Clinical Outcomes of VRN101099 in ERBB2-Mutated Advanced Non-Small Cell Lung Cancer: A Case Series From a Phase 1A Study
YL201	First-Line YL201 Plus Serplulimab in ES-SCLC and Advanced NSCLC: Phase 1 Results of a B7-H3-Directed Combination Strategy

AI/ML Trends & Strategic Watchpoints at IASLC 2026





AI / Digital Health Angle at IASLC 2026 (1/2)

- **AI and digital-health presentations at IASLC-WCLC 2026 will represent a clinical decision-support, screening and biomarker-development signal rather than a broad digital-health adoption theme. The programme will include AI agents for precision lung cancer care, AI applications in screening and early detection, AI-assisted risk stratification, pathology, imaging and digital workflows, suggesting that these tools will be evaluated where they could influence diagnosis, biomarker interpretation, treatment decisions and patient management**
- **AI activity at IASLC-WCLC 2026 will be strategically relevant because it will be tied to specific clinical applications in lung cancer rather than generic technology adoption. The most important signal will be whether AI-supported approaches can move beyond prediction and technical validation toward clinically actionable workflows in screening, pathology, treatment selection and longitudinal disease monitoring**
- **Key sessions include:**
 - AI Agents for Lung Cancer Precision Care
 - Joint IASLC-CAALC-CSCO Forum: ADCs, Bispecifics and AI Agents in Lung Cancer: China-Led Innovation and Global Translation
 - AI applications in lung cancer screening and early detection, including imaging analysis, workflow optimisation and risk prediction



AI / Digital Health Angle at IASLC 2026 (2/2)

- Risk Stratification, AI Evaluation, Pathway Innovation and Diversity Assessment for Thoracic Imaging
- ctDNA-Based Multivariable Model for Early Detection of NSCLC, combining ctDNA with clinical and serum biomarkers for detection and risk stratification
- Genomic Biomarkers for Whole-Process Stratification in KRASG12C-Mutant NSCLC, including longitudinal ctDNA monitoring and molecular risk assessment
- Plasma ctDNA Epigenomic Subtyping of Lung Cancer and related liquid-biopsy approaches
- Real-World Tissue-Free MRD Testing in Lung Cancer, reflecting the expanding role of molecular monitoring
- **Sessions suggest AI and digital tools are increasingly being used to improve:**
 - Risk prediction and early detection through AI-supported imaging and biomarker models
 - Clinical decision support through AI agents and precision-care applications
 - Pathology and diagnostic interpretation through AI-assisted and digital approaches
 - Molecular monitoring and risk stratification through ctDNA and other liquid-biopsy approaches
 - Screening and workflow optimisation through AI-enabled imaging and screening pathways



What We're Watching for Post-IASLC 2026

- Whether Tam-Peli and risvutatug rezetecan generate sufficient efficacy and safety differentiation to establish B7-H3-directed ADCs as a new treatment option in relapsed SCLC
- Whether ADAURA, PAPILLON and REZILIENT 3 provide clearer treatment-sequencing logic across EGFR-mutated NSCLC, spanning adjuvant osimertinib and EGFR exon 20 insertion-directed approaches
- Whether DESTINY-Lung04 strengthens the role of T-DXd in first-line HER2-mutant NSCLC and clarifies how HER2-directed therapies should be positioned
- Whether EVOKE-03 and HARMONi-2 generate sufficient evidence to challenge established checkpoint-inhibitor strategies through ADC-immunotherapy and PD-1/VEGF-A approaches
- Whether emerging RAS-directed strategies, including RAS(ON)/RAS(OFF) approaches and molecular testing, broaden precision treatment beyond KRAS G12C and improve patient selection
- Whether AI-enabled screening, pathology, risk prediction and molecular monitoring approaches generate sufficient clinical evidence to move from analytical validation toward routine lung cancer decision support



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