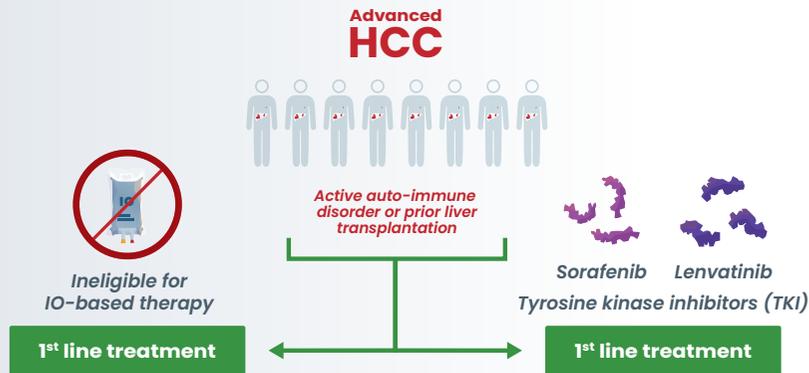


# ADVANCED HCC

## TREATMENT STRATEGIES FOR PATIENTS INELIGIBLE FOR IO OR THOSE WITH PROGRESSION ON IO

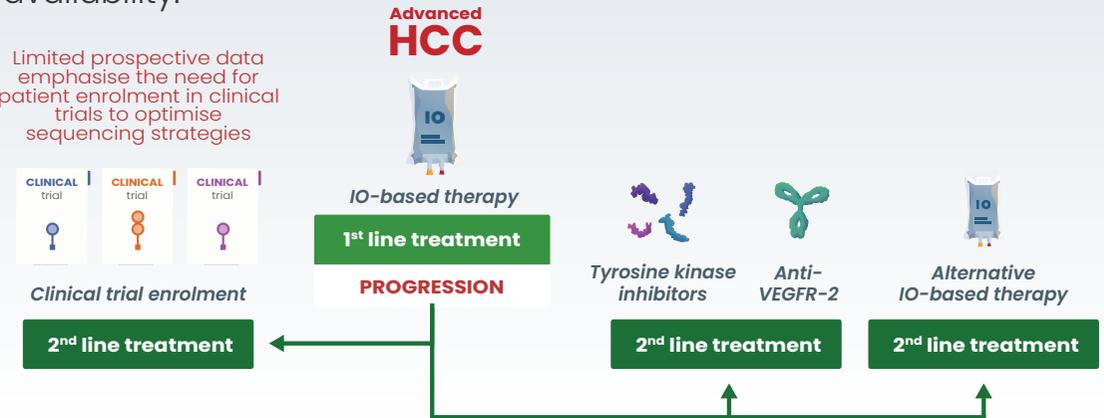


For patients with HCC who are **ineligible for IO**, the tyrosine kinase inhibitors (TKIs) sorafenib and lenvatinib remain the **recommended 1<sup>st</sup> line treatment options**

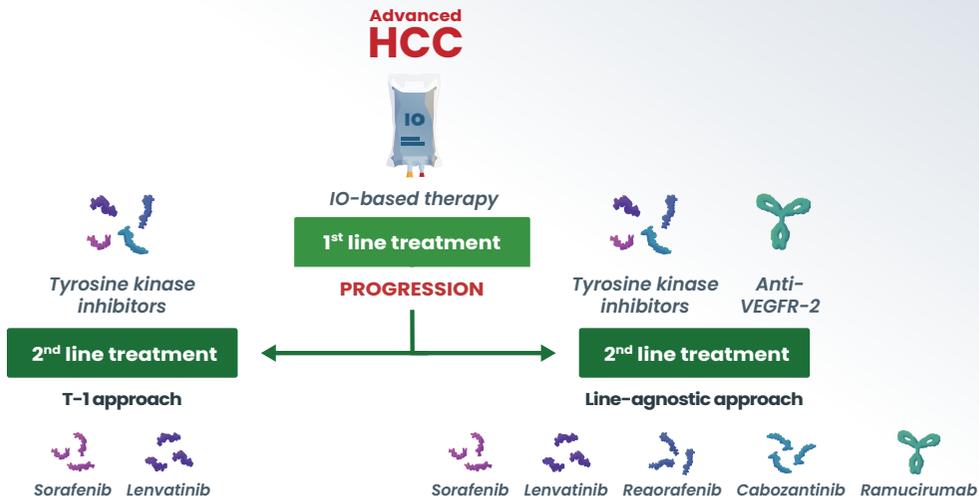


After **progression on 1<sup>st</sup> line IO**, multiple treatment strategies are available. If a **clinical trial** is not available, **switching to a TKI**, or considering **alternative IO-based approaches** may be viable options based on patient eligibility, disease factors, and local availability.

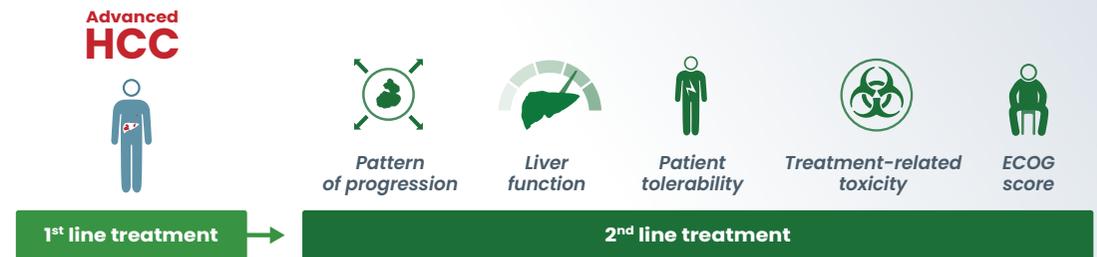
Limited prospective data emphasise the need for patient enrolment in clinical trials to optimise sequencing strategies



Post-IO progression, two main **TKI-based approaches** are available:



**Transition to 2<sup>nd</sup> line therapy** should be considered after **radiologic** or **clinical progression**



HCC, hepatocellular carcinoma; IO, immuno-oncology (therapy); TKI, tyrosine kinase inhibitor. | Key messages summarised from peer-reviewed literature and clinical guidelines. Please refer to the slide deck for full references. | This programme is supported by an Independent Educational Grant from Bayer. This content is intended for healthcare professionals only.

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