

THE EXPANDING ROLE OF IMMUNOTHERAPY IN HCC

COMBINING LOCOREGIONAL AND SYSTEMIC TREATMENTS IN INTERMEDIATE HCC



Immunotherapy (IO) and IO combinations are transforming the landscape for patients with advanced and intermediate HCC who are not candidates for local therapy

1st line options offer **improved long-term outcomes**

Atezolizumab + bevacizumab



Tremelimumab + durvalumab

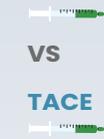


Nivolumab + ipilimumab



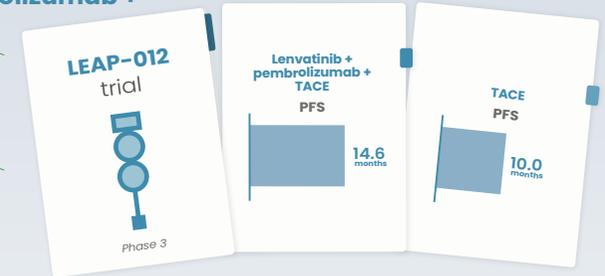
IO + LRT combinations, such as TACE plus IO, show promise for patients with intermediate HCC

Lenvatinib + pembrolizumab + TACE



VS

TACE

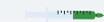


Durvalumab +/- bevacizumab + TACE



VS

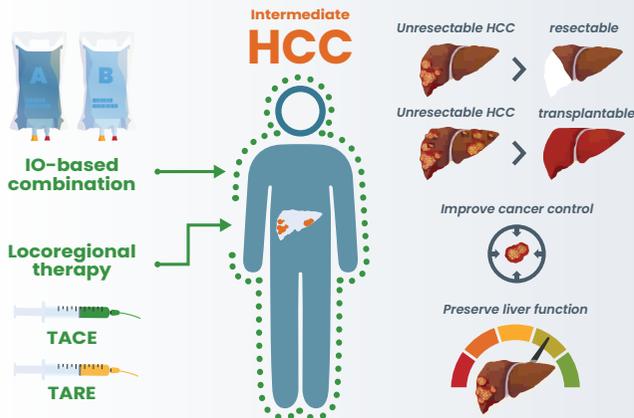
TACE



IO + LRT combinations demonstrate improved PFS

IO + LRT combinations show manageable safety profiles

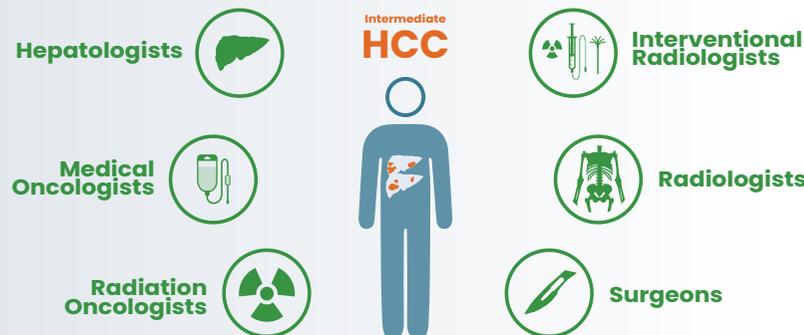
OS data are awaited



Intermediate-stage HCC may benefit from multimodal strategies, **combining IO with locoregional therapies (LRTs)** to address both visible and invisible disease, enhancing immune response, and optimising tumour control

A multidisciplinary approach

is crucial to determine which patients with intermediate HCC may benefit from multimodal combinations



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HCC, hepatocellular carcinoma; IO, immuno-oncology (therapy); LRT, local-regional therapy; OS, overall survival; PFS, progression-free survival; TACE, transarterial chemoembolisation; TARE, transarterial radioembolisation; References to the trials: IMbrave150, Cheng A-L, et al. J Hepatol. 2022;76:862-873; HIMALAYA, Abou-Alfa GK, et al. NEJM Evid. 2022;:EVID002100070; Rimassa L, et al. ESMO 2024. Abstract #947MO; CheckMate 9DW, ClinicalTrials.gov: NCT04039607; Decaens T, et al. ESMO 2024. Abstract #965MO. Oral presentation; LEAP-012, Kudo M, et al. Lancet. 2025;405:203-215; EMERALD-1, Sangro B, et al. Lancet. 2025;405:216-232 AstraZeneca has provided a sponsorship grant towards this independent programme. This content is intended for healthcare professionals only.