



Sixth International Joint Meeting on **THORACIC SURGERY**

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Auditorio Foment del Treball Nacional, Barcelona (Spain)

11th International Meeting on General Thoracic Surgery



Hospital Universitari Sagrat Cor

10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



5th Meeting of the Thoracic Oncology, Thoracic Surgery, Techniques & Transplant, Respiratory Nursing and Respiratory Physiotherapy Areas of the Spanish Society of Pneumology and Thoracic Surgery (SEPAR)



10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



3rd Joint Meeting of the Spanish Society of Thoracic Surgery (SECT)



30th Congress of the "Asociación Iberoamericana de Cirugía Torácica" AIACT



DEFINITIONS AND PATIENT SELECTION

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Pleural mesothelioma remains a difficult to treat and very heterogeneous oncological disease and the incidences are still rising. Surgery plays a role in diagnosis, cytoreduction and palliation for the treatment of MPM. At this stage, macroscopic complete resection within multimodality treatment offers longest survival for selected patients and is currently recommended across international guidelines, lung-sparing techniques are favored over extrapleural. MARS 2 is the first RCT comparing (extended) pleurectomy decortication versus no (extended) pleurectomy decortication after chemotherapy for patients with malignant pleural, however, in an unselected patient population.

Nivolumab plus ipilimumab is now indicated as a first-line treatment for unresectable MPM in many countries after Checkmate 743. Chemoimmunotherapy is emerging as a next step with results from three pivotal phase III trials in the frontline setting.

Understanding the disease heterogeneity and selecting best candidates for combined treatment based on clinical, pathological and biological factors, ideally in a trial setting should be the way forward.

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