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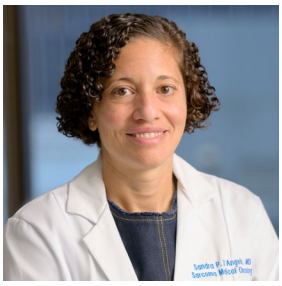
ASCO 2026 Updates

Physician-scientists from Memorial Sloan Kettering Cancer Center (MSK) presented their research on the latest advances in cancer at the 2026 American Society of Clinical Oncology (ASCO) Annual Meeting in Chicago, the world's largest gathering of oncologists and cancer scientists. We are delighted to highlight the extraordinary work of MSK investigators who received generous support from Cycle for Survival and Fred's Team. Thank you for helping to advance MSK's mission of ending cancer for life.



Investigating a Personalized T Cell Therapy for Synovial Sarcoma

Sandra D'Angelo, MD
Sarcoma Medical Oncologist and Cellular Therapist

Dr. D'Angelo presented pooled results from phase 1 and phase 2 trials of a personalized T cell therapy called afamitresgene autoleucel (Tecelra®), or afami-cel, for people with advanced synovial sarcoma, a rare cancer that has limited effective therapies. Afami-cel is designed to recognize and attack cancer cells that express the MAGE-A4 protein, a common target in this disease. The analysis included 153 patients whose cancer had progressed despite standard treatments. Tumors shrunk in nearly 44% of people who received the treatment, with responses observed across multiple subgroups, including pediatric patients. Survival outcomes were particularly encouraging among those whose tumors responded to treatment. These findings support afami-cel as a potential new treatment option for people with advanced synovial sarcoma.

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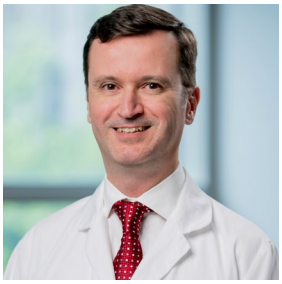

Targeted Therapy Slows Progression of a Rare Sarcoma

Mark Dickson, MD
Sarcoma Medical Oncologist

Dr. Dickson shared findings from a phase 3 study of the targeted therapy abemaciclib (Verzenio®) for people with a rare and aggressive soft tissue sarcoma called dedifferentiated liposarcoma (DDLS) that has spread or returned after treatment. DDLS is one of the most common types of liposarcoma, but treatment options for recurrent disease have remained largely unchanged for decades. Abemaciclib works by blocking CDK4, a protein that nearly all DDLS tumors rely on to grow. The drug halted the growth of DDLS for an average of 10 months — six times longer than a placebo. For people who received the drug as their first treatment, tumor growth was stopped for 16.5 months. While more research is underway, the drug may be the first effective treatment option for people with this stage of DDLS.

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Combination Therapy Shows Lasting Benefit for Rare Kidney Cancers

Darren Feldman, MD
Section Head, Germ Cell Cancer

People with a group of rare kidney cancers called non-clear cell renal cell carcinoma (nccRCC) have few treatment options. Dr. Feldman presented final results from a phase 2 clinical trial testing a combination of the targeted therapy cabozantinib (Cabometyx®) and the immunotherapy nivolumab (Opdivo®) as a first-line treatment for advanced nccRCC. The combination produced durable responses and encouraging survival outcomes in several subtypes of advanced nccRCC. These findings support the use of cabozantinib plus nivolumab as a standard first-line treatment option for several nccRCC subtypes and could help expand treatment options for people with rare kidney cancers.

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Investigational Drug Delays Tumor Growth in Desmoid Tumors

Mrinal Gounder, MD
Physician Ambassador to India and Asia
Sarcoma Medical Oncologist and Early Drug Development Specialist

Desmoid tumors are rare growths that start in connective tissue, most often in the abdomen, arms, and legs. While they do not spread to distant parts of the body, these tumors can grow to be quite large and can lead to pain, disability, and poor quality of life. Dr. Gounder presented results from a phase 3 clinical trial evaluating an investigational oral targeted therapy called varegacestat, which is designed to block a signaling pathway that helps drive tumor growth. People who received the drug were significantly less likely to experience disease progression than those who received a placebo. The treatment also led to meaningful reductions in pain. These findings suggest that varegacestat could provide an important new treatment option for people living with desmoid tumors, helping improve both disease control and quality of life.

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Testing Hormone Therapy for Salivary Gland Cancer

Alan Ho, MD, PhD
Chief, Head and Neck Oncology Service

Salivary gland cancers are rare tumors with few treatment options once they recur or spread. A subset of these cancers relies on the androgen receptor, a protein that can drive tumor growth. Dr. Ho presented results from a phase 2 clinical trial evaluating the targeted therapy darolutamide (Nubeqa®), which blocks the androgen receptor, in combination with leuprolide acetate, a medication that lowers levels of the hormones involved in this process. Encouraging early results support the idea that disrupting androgen signaling may be an effective treatment strategy in androgen receptor-positive tumors and could expand options for people with this form of salivary gland cancer.

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Safety Results From a Study of HER2-Targeted Combination Therapies in Gastrointestinal Cancers

Yelena Janjigian, MD
Chief, Gastrointestinal Oncology Service
Carroll and Milton Petrie Chair

Trastuzumab deruxtecan (Enhertu®) is a targeted treatment for cancers with high levels of HER2, a protein that can help some cancer cells grow. The drug works like a guided delivery system: One part finds HER2 on cancer cells, and another delivers chemotherapy directly to those cells. Dr. Janjigian studied whether this treatment could be safely combined with immunotherapy and/or chemotherapy for people with stomach or esophageal junction cancers that could not be removed with surgery, had spread, or had continued to grow after earlier treatment. The study found that these treatment combinations were generally consistent with the known safety profiles of the individual drugs, with no unexpected side effects observed. These findings support continued development of trastuzumab deruxtecan-based combination therapies and could help expand treatment options for people with HER2-positive gastrointestinal cancers.

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Combination Therapy May Delay Need for Chemotherapy in Advanced Breast Cancer

Komal Jhaveri, MD
Section Head, Endocrine Therapy Research Program
Clinical Director, Early Drug Development Service
Patricia and James Cayne Chair for Junior Faculty

Most estrogen receptor-positive, HER2-negative breast cancers rely on estrogen signaling to grow. Dr. Jhaveri presented new findings from a phase 3 clinical trial evaluating an oral therapy called giredestrant, which blocks and breaks down the estrogen receptor in combination with a targeted therapy called everolimus, which helps slow cancer cell growth. The study enrolled people whose cancer had progressed despite prior treatment. People who received the combination experienced longer periods of time before their cancer worsened and were able to delay chemotherapy compared to those receiving standard hormone-based treatments. These findings suggest the benefits of the regimen extend beyond initial treatment and could help people with this type of breast cancer maintain their quality of life by postponing more intensive therapies.

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Radiotherapy for Treatment-Resistant Metastatic Prostate Cancer

Michael Morris, MD
Prostate Cancer Section Head, Genitourinary Oncology
Steven A. Greenberg Chair in Prostate Cancer Research

Dr. Morris presented results from a phase 2 study evaluating rosopatamab tetraxetan (CONV01-α), an investigational radiopharmaceutical that delivers radiation directly to prostate cells. The drug targets a protein commonly found on prostate cancer cells called prostate-specific membrane antigen (PSMA) and was studied in people whose cancer had continued to grow despite multiple

prior treatments. A significant number of study participants — including some whose disease had not responded to prior PSMA-directed therapy — experienced encouraging and durable responses. These findings suggest that this radiotherapy could provide a new option for people with advanced prostate cancer who have limited treatment options.

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A Breakthrough for Pancreatic Cancer Treatment

Eileen O'Reilly, MD
Section Head, Hepatopancreabiliary and Neuroendocrine Cancers
Co-Director, Medical Initiatives, David M. Rubenstein Center for Pancreatic Cancer Research
Winthrop Rockefeller Chair of Medical Oncology

Pancreatic cancer is one of the most difficult cancers to treat. Dr. O'Reilly presented results from a phase 3 clinical trial evaluating daraxonrasib, a targeted therapy designed to block mutations in the KRAS gene, which drives the growth of more than 90% of pancreatic cancers. Compared with standard chemotherapy, daraxonrasib significantly improved outcomes, including doubling median survival to just over 13 months, versus about 6 months for standard therapy. The treatment also helped shrink tumors and slow disease progression. People in the trial tolerated the side effects of the new drug better than those from chemotherapy, allowing many to maintain a higher quality of life during treatment. These findings represent a major advance for pancreatic cancer and suggest that directly targeting KRAS could transform care for people with this difficult-to-treat disease.

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Combination Therapy Extends Remission in Multiple Myeloma

Saad Usmani, MD, MBA
Chief, Myeloma Service

Multiple myeloma is a blood cancer that develops in plasma cells, a type of immune cell found in the bone marrow. Dr. Usmani presented results from a phase 3 clinical trial that compared an antibody-based, four-drug combination treatment to the standard three-drug treatment in people with newly diagnosed multiple myeloma. After more than six years of follow-up, those who received the four-drug combination were more likely to achieve deep responses, remain free from disease progression, and stay in remission longer than those who received standard treatment. Importantly, many people treated with the newer regimen continued to do well years after diagnosis, suggesting that more durable responses can translate into longer survival.

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