

Diagnosis on 19/03/2020: Wild-type NSCLC with metastatic involvement of spine and mediastinal lymph nodes

Molecular Profile:

- **Driver Mutation:** Negative for actionable alterations (FoundationOne panel)
- **PD-L1 Status:** TPS <1%, CPS 7, IC 1+ (22C3 clone)

Treatment Course:

- **First-Line Therapy:** Carboplatin + Pemetrexed + Pembrolizumab
- **Start Date:** 10/04/2020

Clinical Course: Mr. Beckett initially presented with unexplained weight loss (11 kg over 3 months), chronic thoracic pain, and fatigue. Imaging revealed a 5.2 cm right hilar mass, extensive mediastinal and retroperitoneal lymphadenopathy, and multiple lytic lesions in the T8-L2 vertebrae.

The patient received 4 cycles of triplet therapy with stable disease achieved after cycle 2. However, progression was noted in mid October 2020 with new lesions in L4 and iliac crest.

2L therapy with docetaxel (75 mg/m²) was complicated by neutropenic fever, prompting hospitalization. He remained ECOG 2 and declined further systemic therapy. Palliative radiotherapy to T10-L2 spine provided modest relief.

Comorbidities:

- Type 2 Diabetes Mellitus (on insulin)
- Stage 3 CKD
- Peripheral vascular disease

End-of-Life Care: Transitioned to home hospice in June 2021. Deceased on 13.06.2021 from respiratory failure.

Cause of Death: Progressive metastatic NSCLC with bone marrow involvement

Name: Alfred Jerome Beckett (born on 08/01/1949) **Patient ID:** SYN067