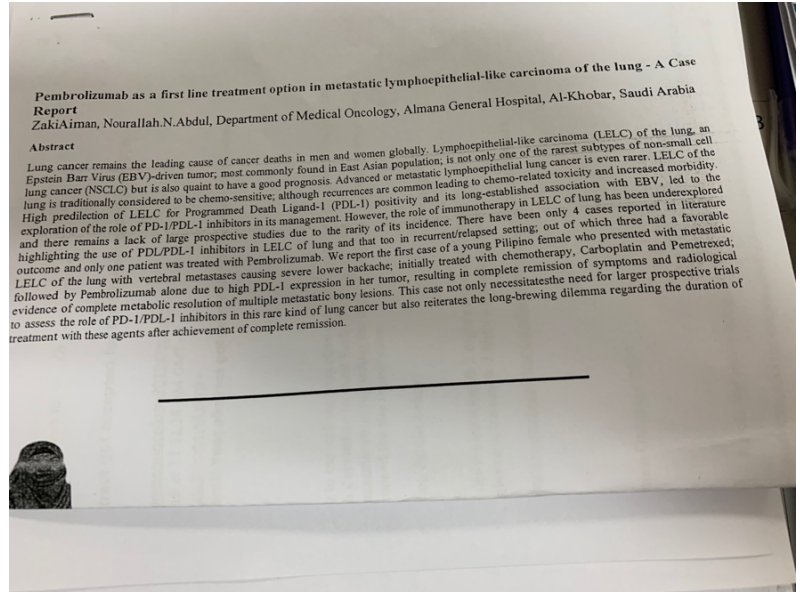


**Pembrolizumab as a first line treatment option in metastatic lymphoepithelial-like carcinoma of the lung - A Case Report**

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**Abstract**

Lung cancer remains the leading cause of cancer deaths in men and women globally. Lymphoepithelial-like carcinoma (LELC) of the lung, an Epstein Barr Virus (EBV)-driven tumor; most commonly found in East Asian population; is not only one of the rarest subtypes of non-small cell lung cancer (NSCLC) but is also quaint to have a good prognosis. Advanced or metastatic lymphoepithelial lung cancer is even rarer. LELC of the lung is traditionally considered to be chemo-sensitive; although recurrences are common leading to chemo-related toxicity and increased morbidity. High predilection of LELC for Programmed Death Ligand-1 (PDL-1) positivity and its long-established association with EBV, led to the exploration of the role of PD-1/PDL-1 inhibitors in its management. However, the role of immunotherapy in LELC of lung has been underexplored and there remains a lack of large prospective studies due to the rarity of its incidence. There have been only 4 cases reported in literature highlighting the use of PDL/PDL-1 inhibitors in LELC of lung and that too in recurrent/relapsed setting; out of which three had a favorable outcome and only one patient was treated with Pembrolizumab. We report the first case of a young Pilipino female who presented with metastatic LELC of the lung with vertebral metastases causing severe lower backache; initially treated with chemotherapy, Carboplatin and Pemetrexed; followed by Pembrolizumab alone due to high PDL-1 expression in her tumor, resulting in complete remission of symptoms and radiological evidence of complete metabolic resolution of multiple metastatic bony lesions. This case not only necessitatesthe need for larger prospective trials to assess the role of PD-1/PDL-1 inhibitors in this rare kind of lung cancer but also reiterates the long-brewing dilemma regarding the duration of treatment with these agents after achievement of complete remission.

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