

Early detection and management of emerging toxicities associated with bispecific antibodies and T-cell engagers: the key role of oncology nursing

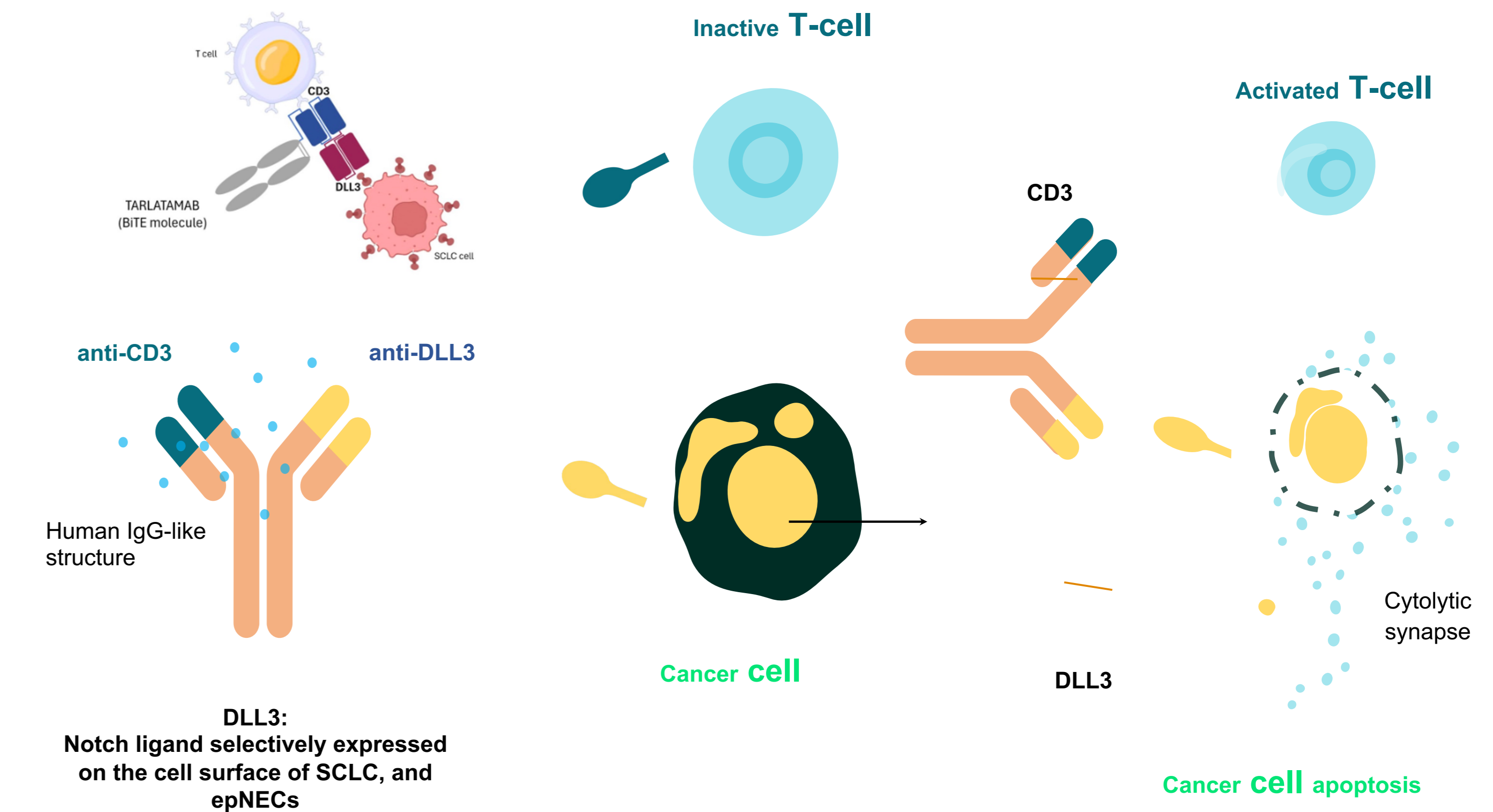
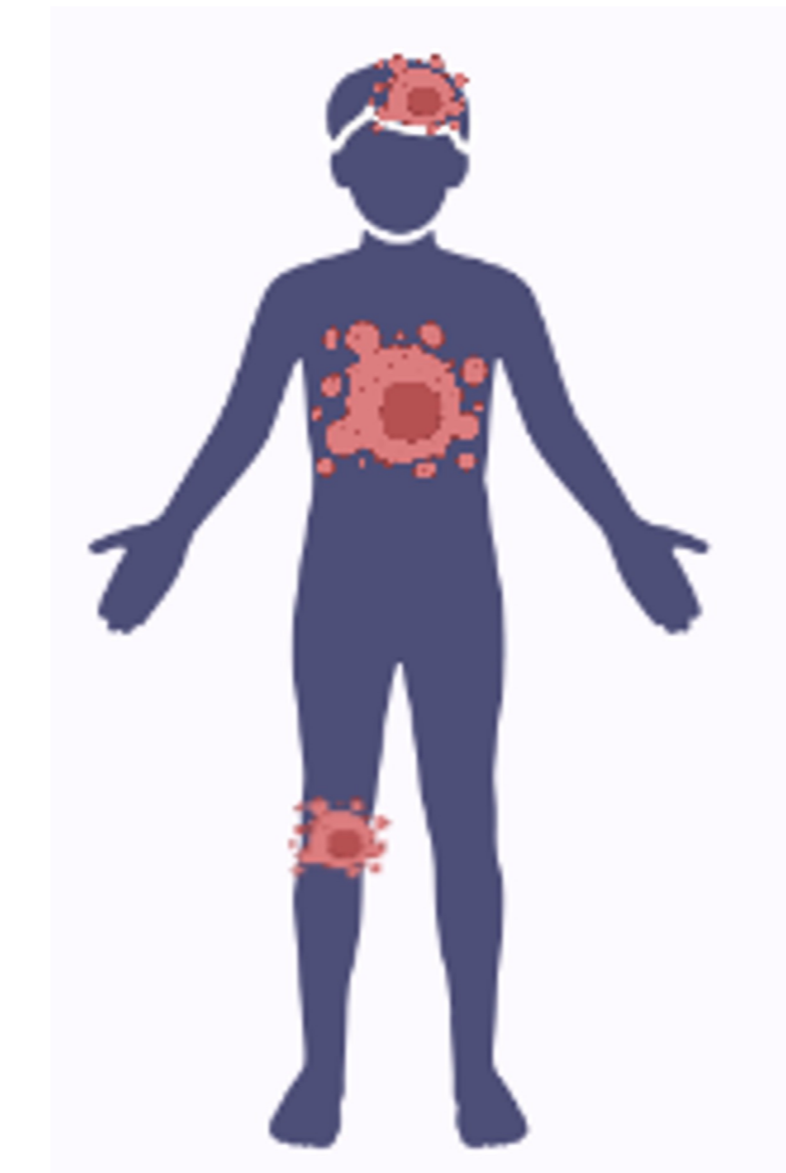
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INTRODUCTION

Recent advances in immunotherapy have transformed cancer treatment, particularly through the development of bispecific antibodies and T-Cell Engagers (TCEs) targeting antigens such as CD3 and DLL3 (Klein et al., 2024; Brinkmann & Kontermann, 2021). These therapies, currently administered primarily within the clinical trials setting, offer new hope to patients with aggressive tumors and limited treatment options, such as high-grade neuroendocrine carcinomas or certain resistant and aggressive solid tumors. However, their mechanism of action—based on redirected T-cell activation—can lead to novel immune-mediated toxicities, including cytokine release syndrome (CRS) and immune effector cell-associated neurotoxicity syndrome (ICANS), which require early detection and appropriate management to ensure patient safety (Lee et al., 2022).



METHODS

A literature review was conducted in this study. The research was done using different Data Bases. After applying PRISMA methodology and discarding Preclinical Phase Studies, the sample was 38.

RESULTS

The most incident and common Adverse Events to treatment with these emergent drugs were obtained, as well the degree of each of them. The handling of these events was reviewed in the literature, but it was hardly described, evidencing the need for further research.

REFERENCES

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FUTURE PROSPECTIVE AND CONCLUSIONS

In this evolving therapeutic landscape, specialized nursing care is essential. Nurses are responsible for continuous clinical monitoring, recognizing early signs of toxicity, and implementing timely interventions. Promoting continuous education and nursing-led research will be key to improving patient outcomes and developing evidence-based practices tailored to these new treatments.

