PANCO[1] CASE STUDY:
Stage III T4NOMO 24cc Tumour

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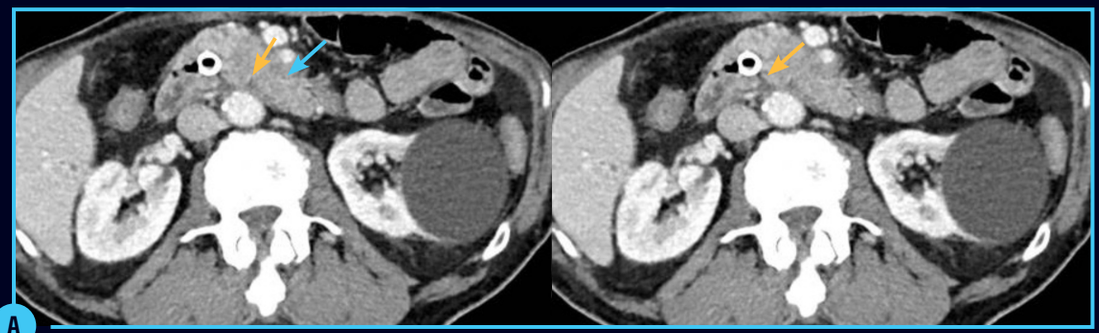
on behalf of the PanCO Study investigators

1 CASE STUDY

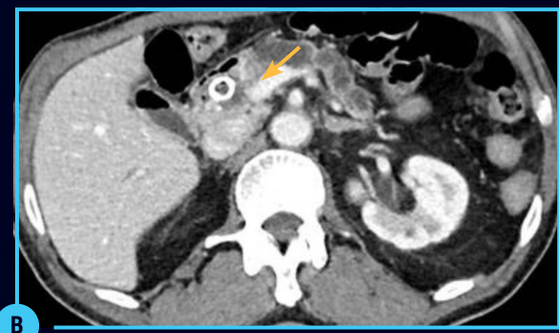
PRESENTATION

- 83-year-old male
- Pre-existing asthma and hypertension
- ECOG 1 performance status
- LAPC diagnosed 50 days prior to enrolment in the PanCO study:
  - Stage III T4NOMO
  - 5.4cm longest diameter*/24cc tumour volume*



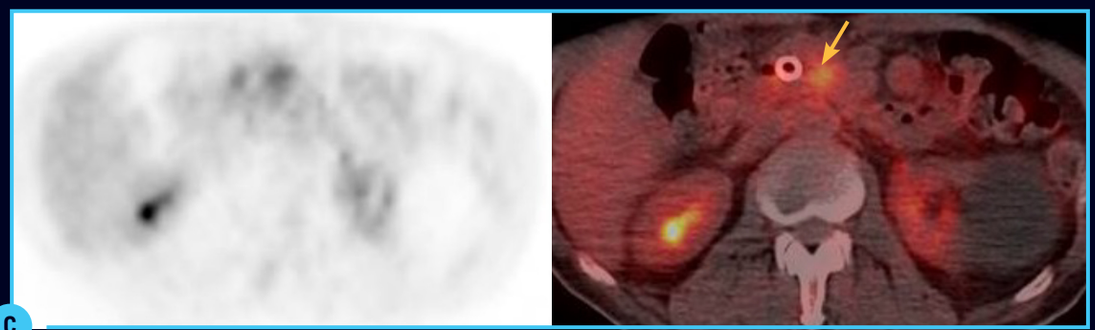
A

CT: 5.4cm* transverse dimension ill-defined mass in head/uncinate process (yellow arrow), adjacent to the biliary stent and encasing the proximal superior mesenteric artery (blue arrow).



B

Pancreatic duct is dilated proximal to the lesion (yellow arrow). Portal vein is patent. Aerobila are observed.



C

FDG-PET/CT: There is a focal area of increased FDG uptake (SUVmax 6.4*) in the uncinate process/head of the pancreas, adjacent to the biliary stent, in keeping with the known primary tumour (yellow arrow).

Abbreviations used in this case study

AE:	Adverse event
CT:	Computed tomography
FDG-PET:	Fluorodeoxyglucose-positron emission tomography
LAPC:	Locally advanced pancreatic cancer
LD:	Longest diameter
SUVmax:	Maximum standardised uptake value
TEAE:	Treatment-emergent adverse event
TV:	Tumour volume

Reference: 1. The PanCO study: ClinicalTrials.gov Identifier: NCT03003078. Data on file.

* By Central Image Reader

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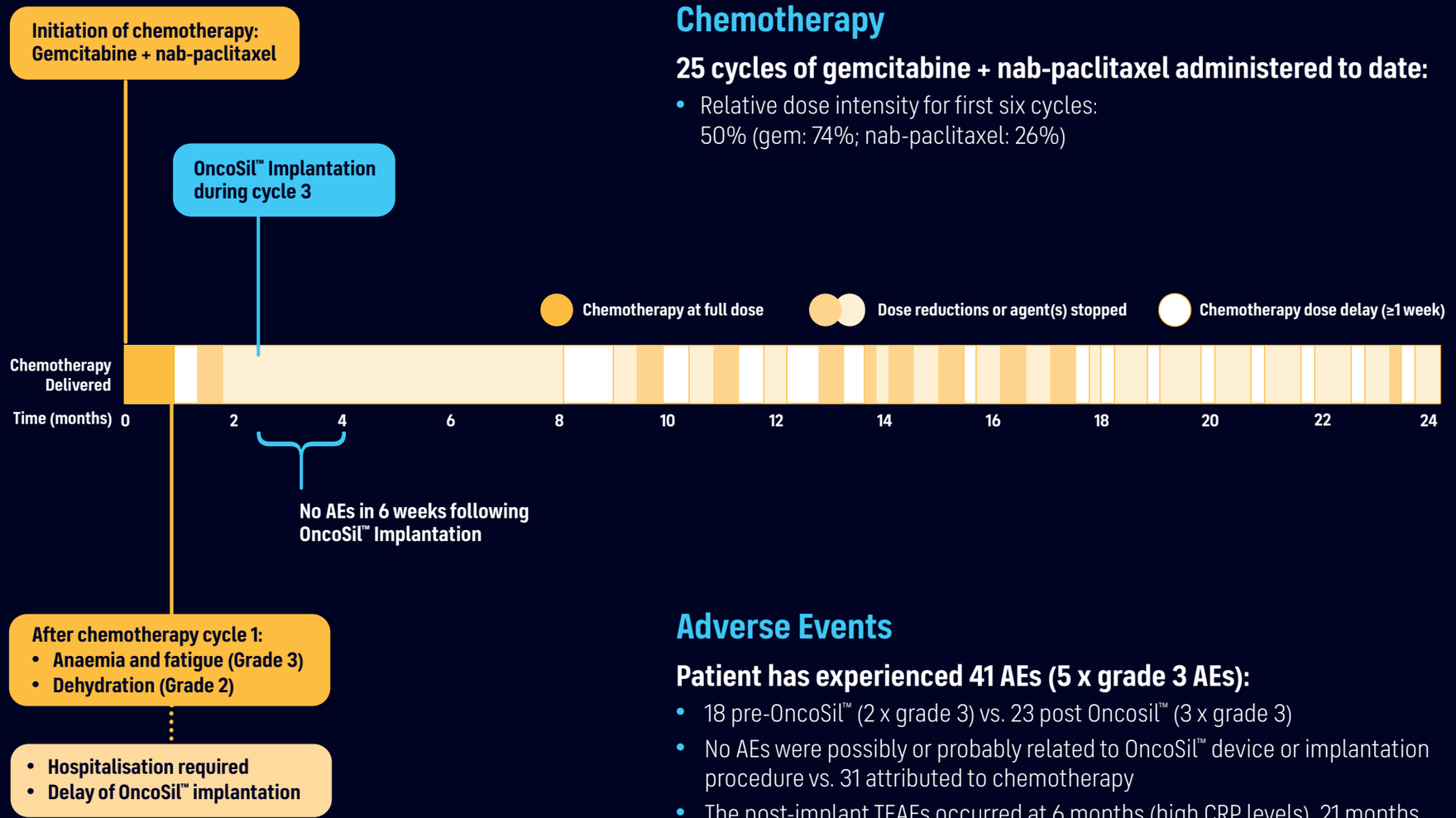
TREATMENT SCHEDULE



Chemotherapy

25 cycles of gemcitabine + nab-paclitaxel administered to date:

- Relative dose intensity for first six cycles: 50% (gem: 74%; nab-paclitaxel: 26%)

Adverse Events

Patient has experienced 41 AEs (5 x grade 3 AEs):

- 18 pre-OncoSil™ (2 x grade 3) vs. 23 post Oncosil™ (3 x grade 3)
- No AEs were possibly or probably related to OncoSil™ device or implantation procedure vs. 31 attributed to chemotherapy
- The post-implant TEAEs occurred at 6 months (high CRP levels), 21 months (anaemia) and 24.6 months (anaemia) from implant, all of which were possibly related to chemotherapy

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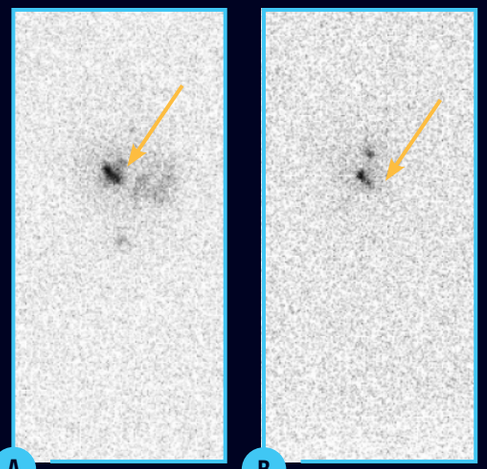
TUMOUR RESPONSE

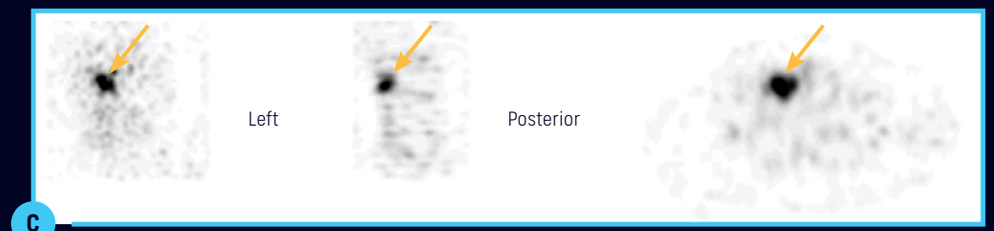
Bremsstrahlung



A **4 hours post OncoSil™ implantation**

B **7 days post OncoSil™ implantation**

SPECT/CT Imaging



C **4 hours post OncoSil™ implantation**

D **7 days post OncoSil™ implantation**

On post-implantation Bremsstrahlung planar and SPECT/CT images, the highest activity is localised to the head of the pancreas, anterior to the biliary stent (yellow arrow). There is contiguous activity in the uncinate process medially. There is much lower activity in the proximal small bowel loops.

E **4 hours post OncoSil™ implantation**

F **7 days post OncoSil™ implantation**

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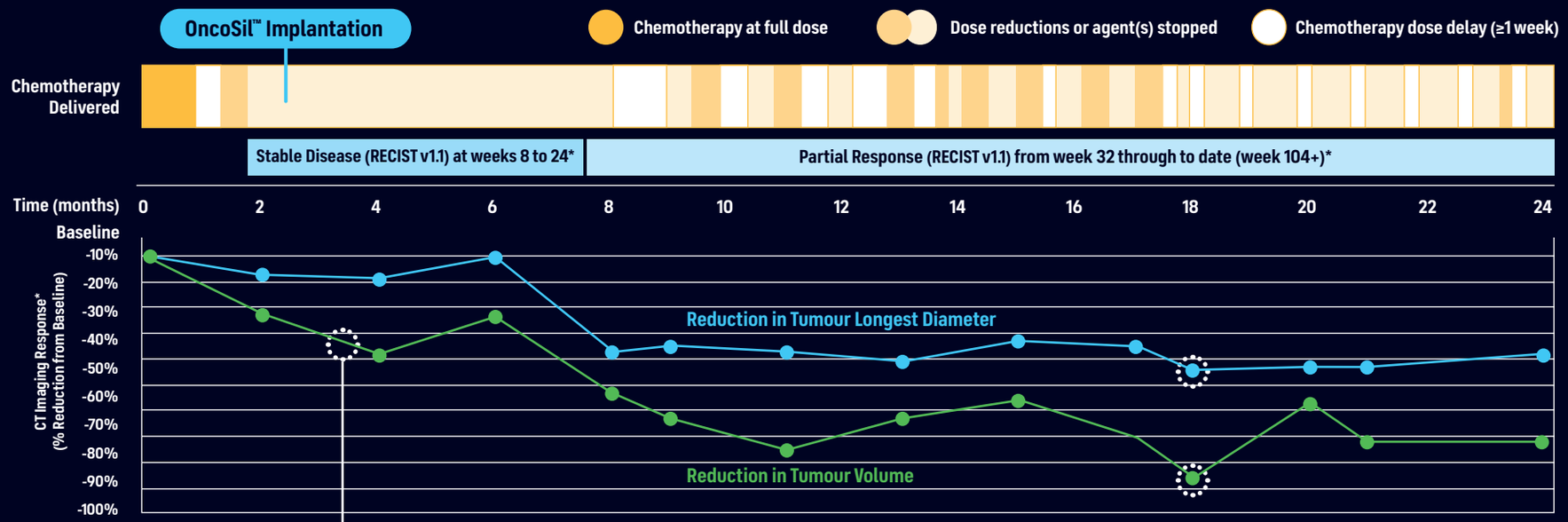
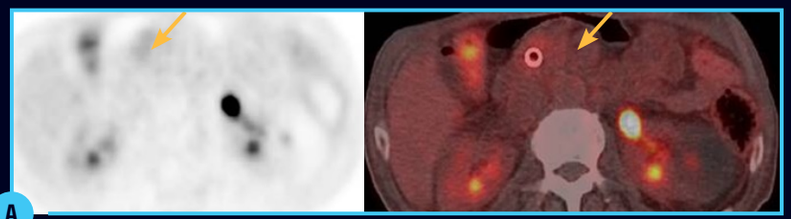
TUMOUR RESPONSE



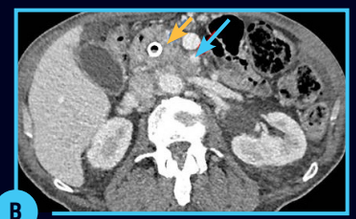
37% reduction in the FDG avidity of the primary pancreatic tumour by SUVmax* [6.4 to 4.07] (yellow arrow), indicating a favourable response to treatment.

-44% LD reduction

-86% TV reduction (3cc vs 24cc at baseline)



FDG-PET/CT Imaging at 12 weeks



CT Imaging at 80 weeks

Notes

- CA 19-9 response not applicable – patient had CA 19-9 <ULN at baseline
- Patient unsuitable for surgical resection due to age, co-morbidities etc

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