

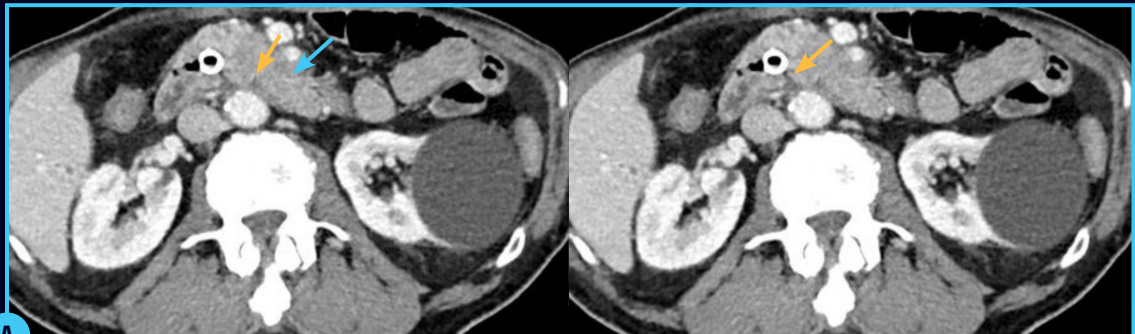
# PANCO' CASE STUDY: Stage III T4N0M0 24cc Tumour

Dr Harpreet Wasan  
Imperial College and NHS Foundation Trust, London, UK  
on behalf of the PanCO Study investigators



PRESENTATION

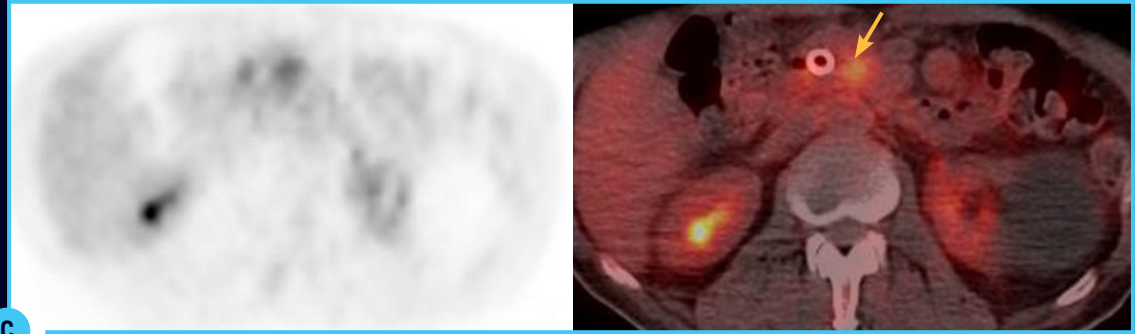
- 83-year-old male
- Pre-existing asthma and hypertension
- ECOG 1 performance status
- LAPC diagnosed 50 days prior to enrolment in the PanCO study:
  - Stage III T4N0M0
  - 5.4cm longest diameter\*/24cc tumour volume\*



**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

\* By Central Image Reader

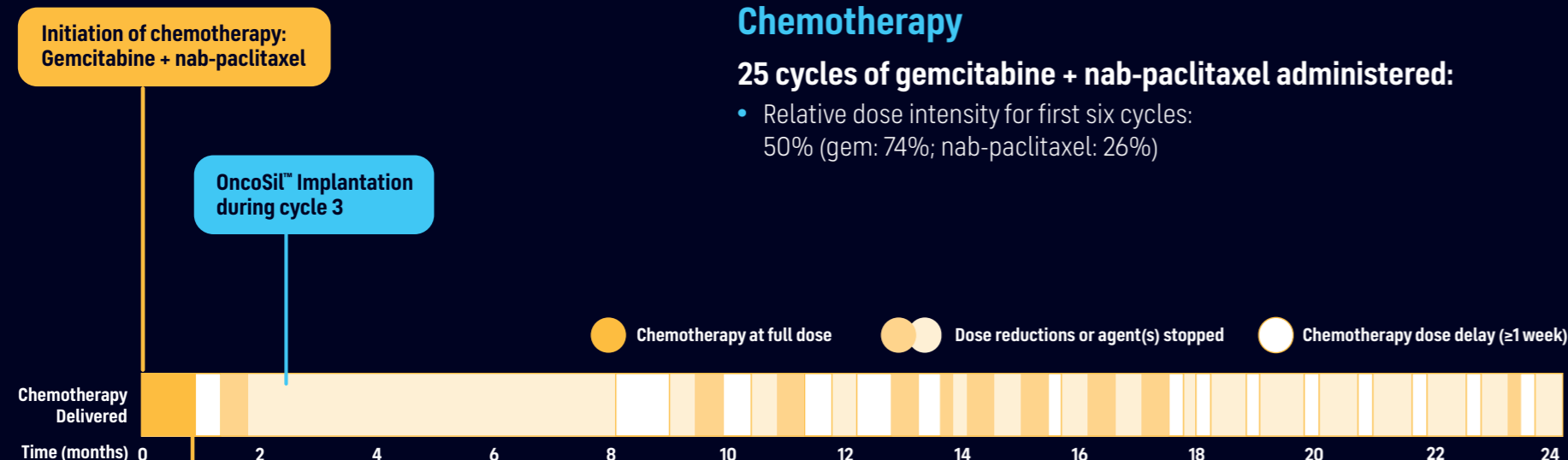
**INTENDED USE/INDICATIONS FOR USE:** OncoSil™ is intended for intratumoural implantation into a pancreatic tumour via injection under endoscopic ultrasound guidance. OncoSil™ is indicated for the treatment of patients with locally advanced unresectable pancreatic cancer, in combination with gemcitabine-based chemotherapy.  
The OncoSil™ System is supplied sterile and is intended for single-patient, single-use.  
This information is intended for healthcare professionals only. All medical treatments carry benefits and risks. For safety related information, please refer to the OncoSil™ System Instructions for Use.



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## TREATMENT SCHEDULE



No AEs in 6 weeks following OncoSil™ Implantation

**After chemotherapy cycle 1:**

- Anaemia and fatigue (Grade 3)
- Dehydration (Grade 2)

- Hospitalisation required
- Delay of OncoSil™ implantation

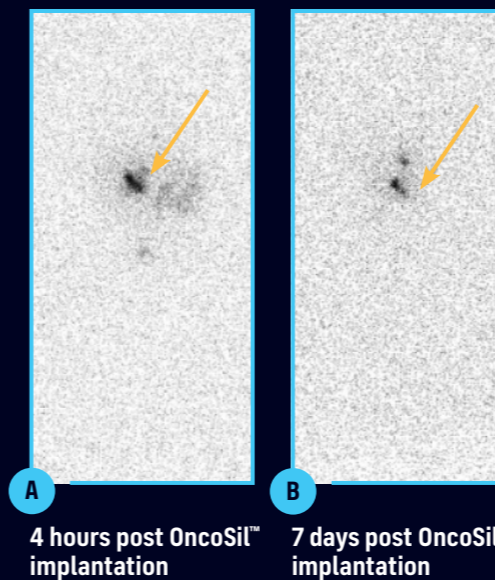
## Adverse Events

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

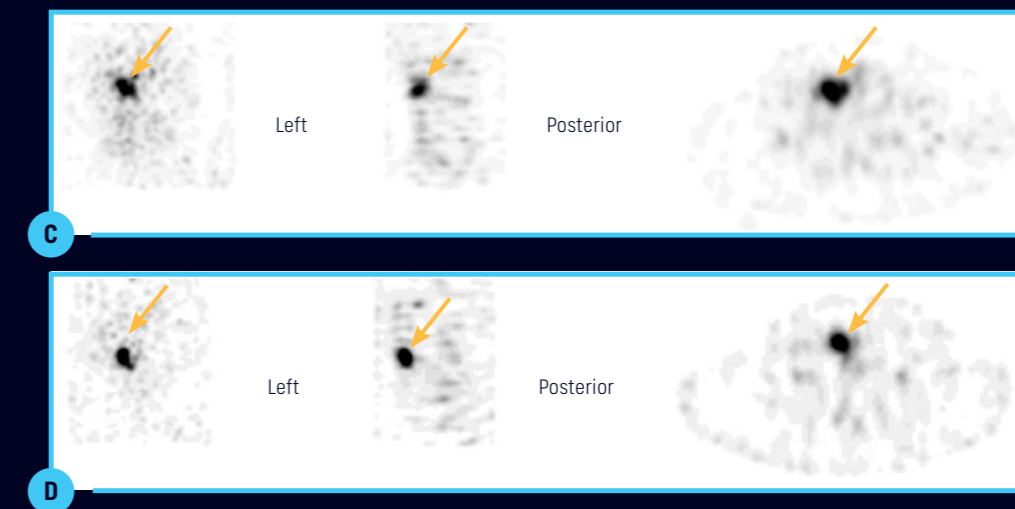
- 18 pre-OncoSil™ (2 x grade 3) vs. 23 post OncoSil™ (3 x grade 3)
- No AEs were possibly or probably related to OncoSil™ device or implantation procedure vs. 31 attributed to chemotherapy
- The post-implant TEAEs occurred at 6 months (high CRP levels), 21 months (anaemia) and 24.6 months (anaemia) from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

## TUMOUR RESPONSE

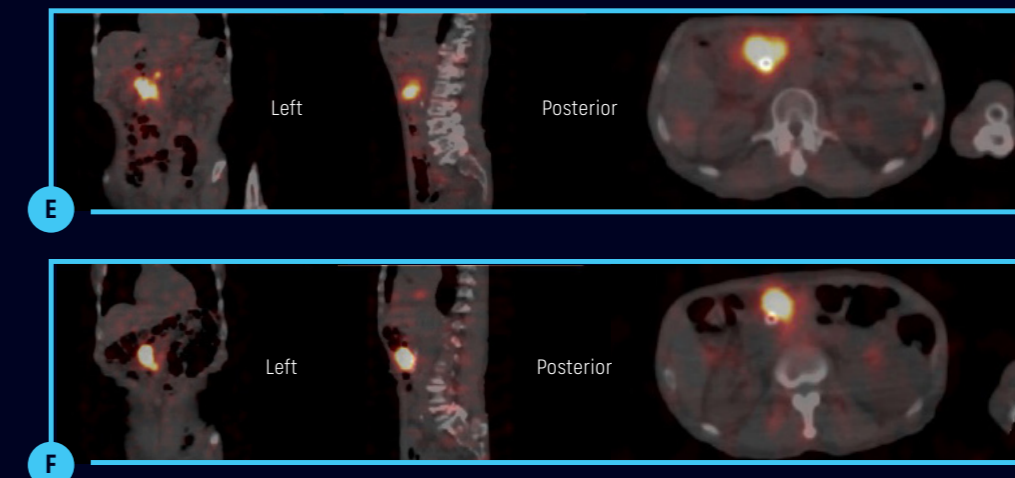
### Bremsstrahlung



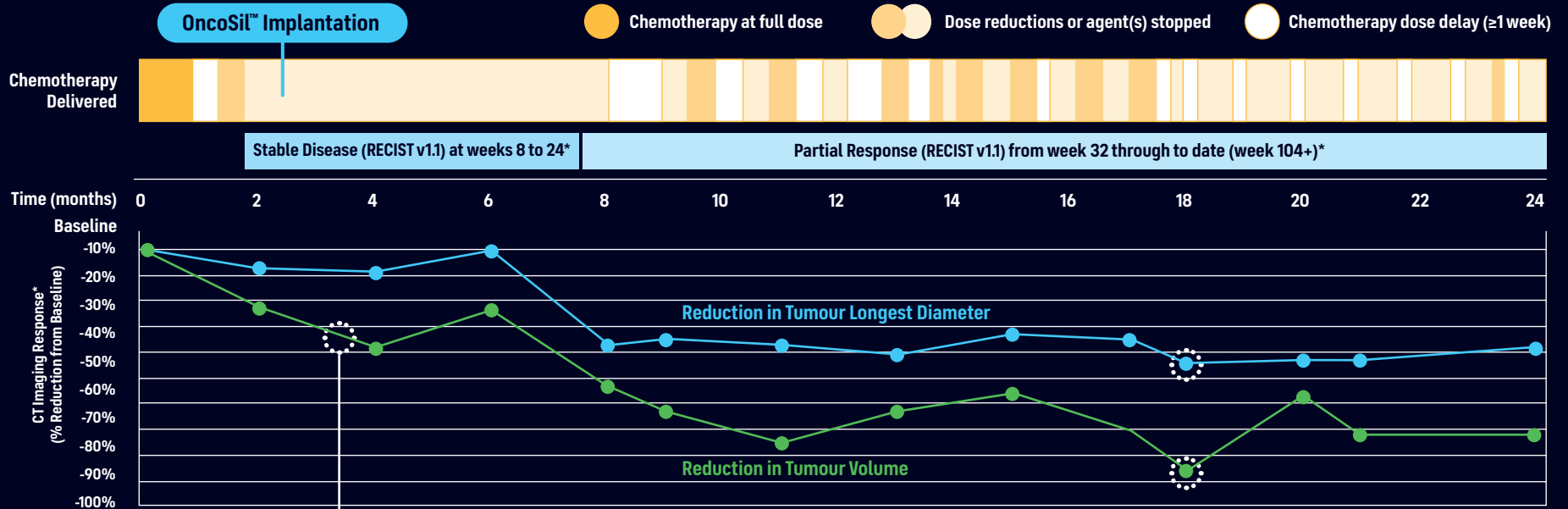
On post-implantation Bremsstrahlung planar and SPECT/CT images, the highest activity is localised to the head of the pancreas, anterior to the biliary stent (yellow arrow). There is contiguous activity in the uncinete process medially. There is much lower activity in the proximal small bowel loops.



### SPECT/CT Imaging



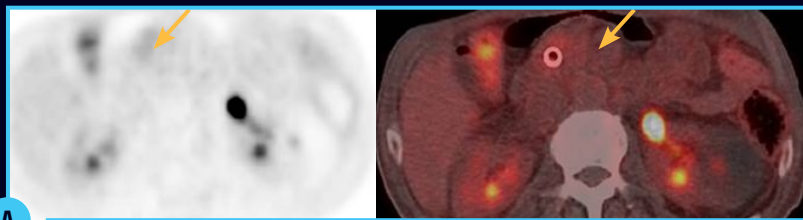
TUMOUR RESPONSE



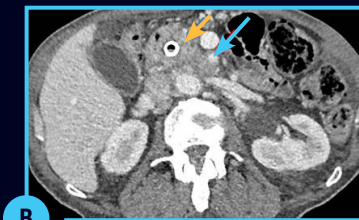
**36.4% reduction in the FDG avidity** of the primary pancreatic tumour by SUVmax\* [6.4 to 4.07] (yellow arrow), indicating a favourable response to treatment.

**-44% LD reduction**

**-87.5% TV reduction (3cc vs 24cc at baseline)**



FDG-PET/CT Imaging at 12 weeks



CT Imaging at 80 weeks

A

B

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