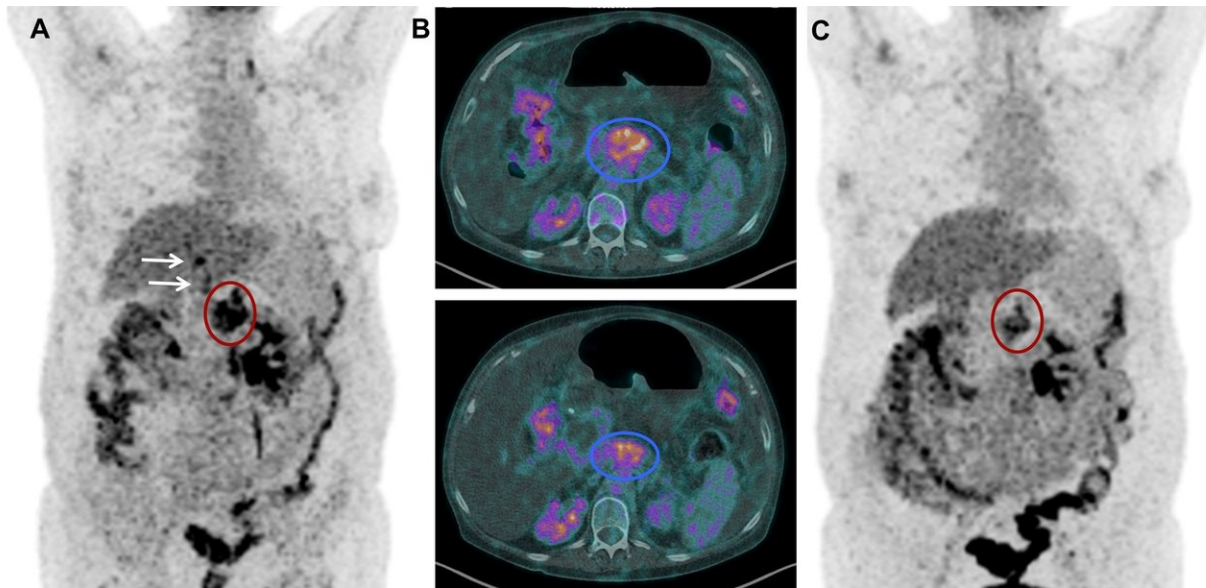


# Novel theranostic approach for treating pancreatic cancer patients shows promise

May 1 2018



(A) <sup>18</sup>F-FDG PET before <sup>177</sup>Lu-3BP-227 therapy. Red oval: primary tumor; arrows: liver metastases. (B, upper panel) Axial CT section; primary tumor (blue oval) before <sup>177</sup>Lu-3BP-227 therapy. (B, lower panel) Axial CT section; primary tumor (blue oval) after 3 cycles of <sup>177</sup>Lu-3BP-227 therapy. (C) <sup>18</sup>F-FDG PET after 3 cycles of <sup>177</sup>Lu-3BP-227 therapy. Credit: RP Baum, A Singh et al., THERANOSTICS Center for Molecular Radiotherapy and Molecular Imaging, Zentralklinik Bad Berka, Bad Berka, Germany

German researchers have developed a novel diagnostic and therapeutic (theranostic) procedure for patients with ductal pancreatic

adenocarcinoma, a deadly cancer with an extremely poor prognosis (five-year survival rate of less than 5 percent) and limited treatment options. The study is featured in the May issue of *The Journal of Nuclear Medicine*.

In early preclinical studies with animal models, the novel procedure significantly inhibited tumor growth. Focusing on the neurotensin receptor 1 (NTR1), a protein that is overexpressed in ductal pancreatic adenocarcinoma, researchers developed a DOTA-conjugated NTR1 antagonist 3BP-227 labeled with the radioisotope lutetium-<sup>177</sup> (<sup>177</sup>Lu) to treat and monitor therapy.

For this study, 6 [patients](#) with confirmed metastatic ductal pancreatic adenocarcinoma, who had exhausted all other [treatment](#) options, received <sup>177</sup>Lu-3BP-227 as salvage therapy. Scintigraphy and single-photon emission [computed tomography](#) was used with computed tomography (SPECT/CT) to determine the tumor uptake and the patients' eligibility for treatment. If the patient's condition allowed, <sup>18</sup>F-FDG [positron emission tomography](#) (PET)/CT imaging was performed 8-12 weeks after therapy to determine treatment efficacy.

<sup>177</sup>Lu-3BP-227 was well tolerated by all patients, with the most severe adverse reaction a reversible grade 2 anemia. One patient experienced significant improvement of symptoms and quality of life—surviving 13 months from diagnosis and 11 months from the start of <sup>177</sup>Lu-3BP-227 therapy.

This study provides the first clinical evidence of the feasibility of treating ductal pancreatic adenocarcinoma using <sup>177</sup>Lu-3BP-227.

"The research presented warrants further development of <sup>177</sup>Lu-3BP-227, in order to provide patients with more [effective treatment](#) and less side effects than cytotoxic chemotherapy," explains Christiane

Smerling, PhD, head of Nuclear Medicine and Imaging at 3B Pharmaceuticals GmbH in Berlin, Germany.

She points out, "Exploiting a hitherto underexplored receptor, these findings broaden the scope of [nuclear medicine](#) treatment for pancreatic adenocarcinoma and potentially other indications expressing neurotensin receptors, such as Ewing sarcoma. A theranostic approach using molecular imaging to identify potential responders will allow more effective treatment of a highly underserved patient population."

**More information:** Richard P. Baum et al, 177Lu-3BP-227 for Neurotensin Receptor 1–Targeted Therapy of Metastatic Pancreatic Adenocarcinoma: First Clinical Results, *Journal of Nuclear Medicine* (2017). [DOI: 10.2967/jnumed.117.193847](https://doi.org/10.2967/jnumed.117.193847)

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