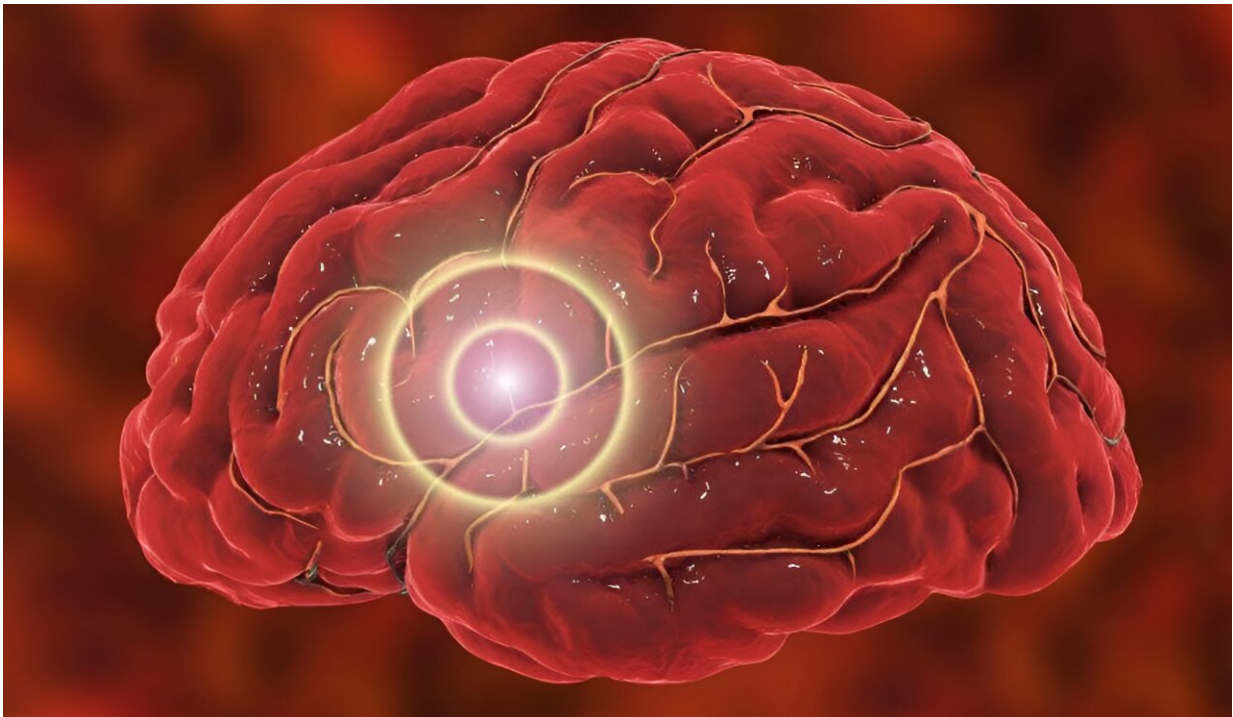


CARv3-TEAM-E T-cell treatment beneficial for recurrent glioblastoma

March 23 2024, by Elana Gotkine



For patients with recurrent glioblastoma, treatment with chimeric antigen receptor (CAR) T-cells engineered to target the epidermal growth factor receptor (EGFR) variant III tumor-specific antigen, in addition to the wild-type EGFR protein, through secretion of a T-cell-engaging antibody molecule (TEAM; CARv3-TEAM-E) results in

radiographic tumor regression, according to a study published online March 13 in the *New England Journal of Medicine*.

Bryan D. Choi, M.D., Ph.D., from Massachusetts General Hospital and Harvard Medical School in Boston, and colleagues conducted an open-label study involving three participants with recurrent glioblastoma who were treated with CARv3-TEAM-E T-cells.

The researchers observed no adverse events greater than grade 3 or dose-limiting toxic effects resulting from CARv3-TEAM-E T-cell treatment. Dramatic and rapid radiographic tumor regression was seen, which occurred within days after receipt of a single intraventricular infusion. In two of the three participants, the responses were transient.

"Here we show dramatic radiographic responses in multiple participants within days after a single intraventricular infusion of dual-targeting CARv3-TEAM-E T cells," the authors write. "These effects were transient in two of three participants, and one participant had a durable regression through a short-term follow-up period."

Several authors disclosed ties to the pharmaceutical industry; several authors hold patents related to the technology.

More information: Bryan D. Choi et al, Intraventricular CARv3-TEAM-E T Cells in Recurrent Glioblastoma, *New England Journal of Medicine* (2024). [DOI: 10.1056/NEJMoa2314390](https://doi.org/10.1056/NEJMoa2314390)

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