

Future Theranostic Applications: Which diseases hold the greatest promise?

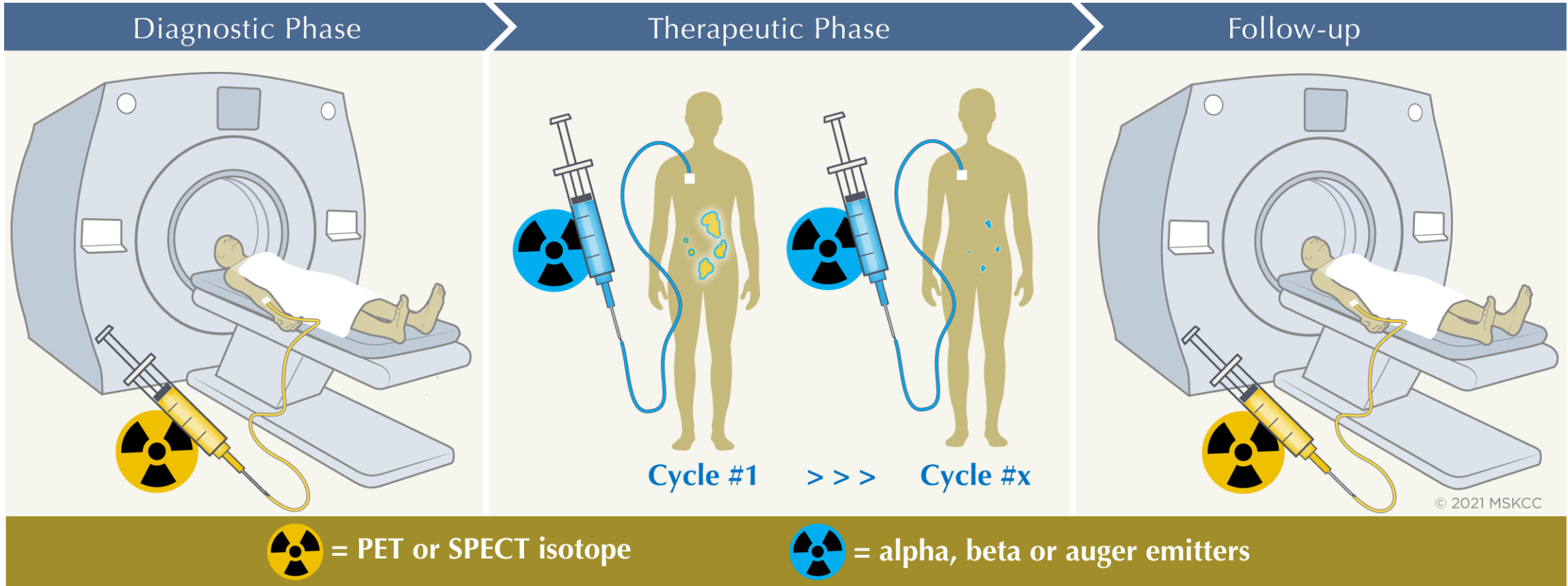
Jason S. Lewis, PhD

Emily Tow Chair in Oncology

Memorial Sloan Kettering Cancer Center

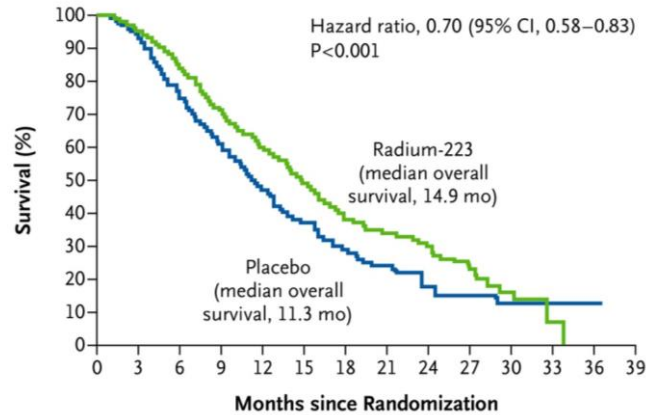


What is a Radiotheranostic?



Milestones of Targeted Radiotherapy

(A) ALSYMPCA



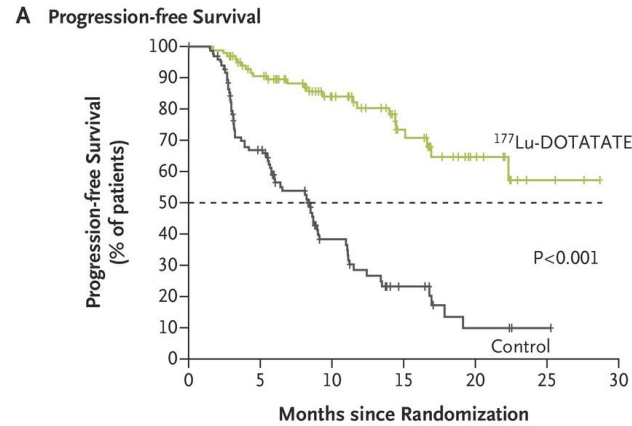
2013

$^{223}\text{RaCl}_2$

Parker et al.,

N Engl J Med 2013; 369:213-223

(B) NETTER-1



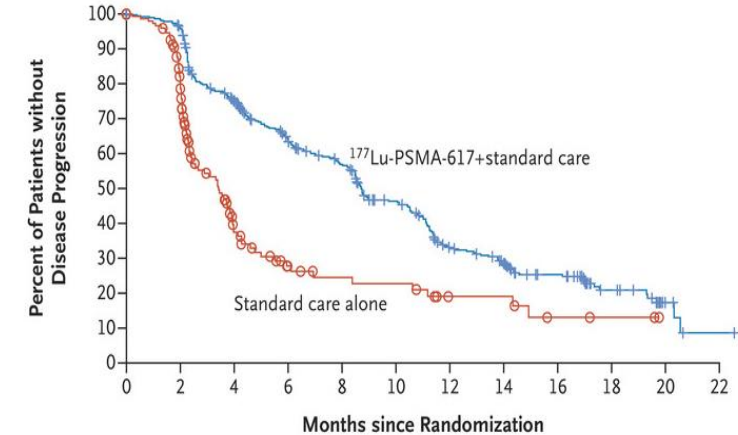
2017

$^{177}\text{Lu-DOTATATE}$

Strosberg et al.,

N Engl J Med 2017; 376:125-135

(C) VISION



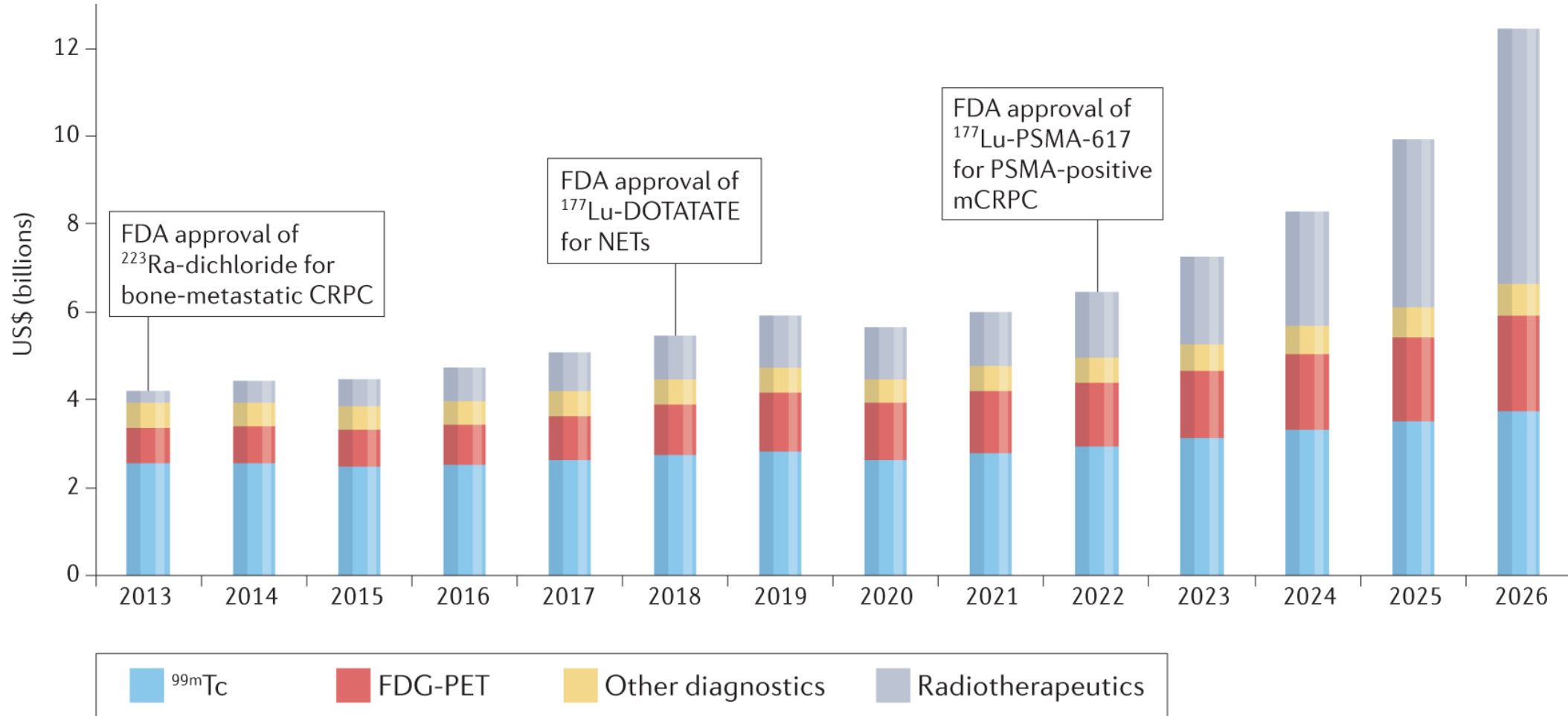
2021

$^{177}\text{Lu-PSMA-617}$

Sartor et al.,

N Engl J Med 2021; 385:1091-1103

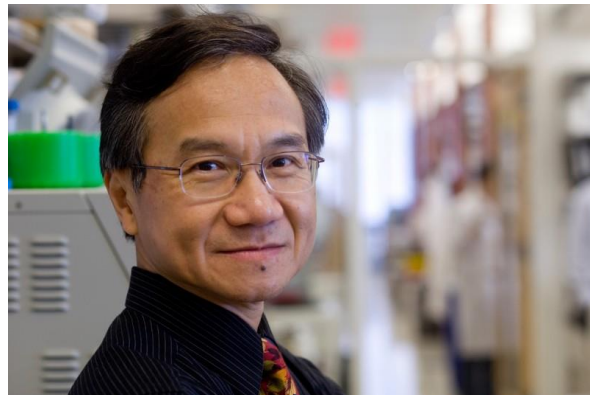
The Predicted Global Nuclear Medicine Market 2013–2026



MSK Institutional COI: Y-mAbs Therapeutics, Inc.

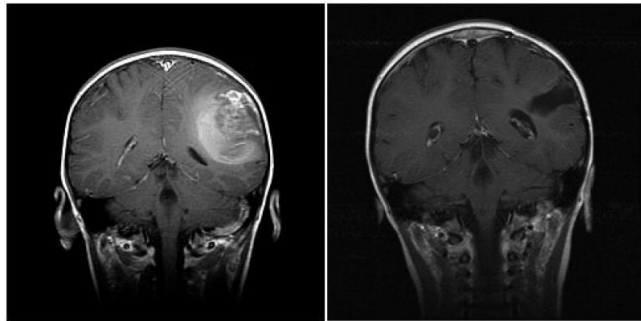
A Curative Approach to Central Nervous System Metastases of Neuroblastoma

K Kramer, BH Kushner, S Modak, N Pandit-Taskar, U Tomlinson, SL Wolden, P Zanzonico, JL Humm, S Haque, MM Souweidane, J Greenfield, EM Basu, SS Roberts, J A Carrasquillo, JS Lewis, SK Lyashchenko, SM Larson, N-KV Cheung

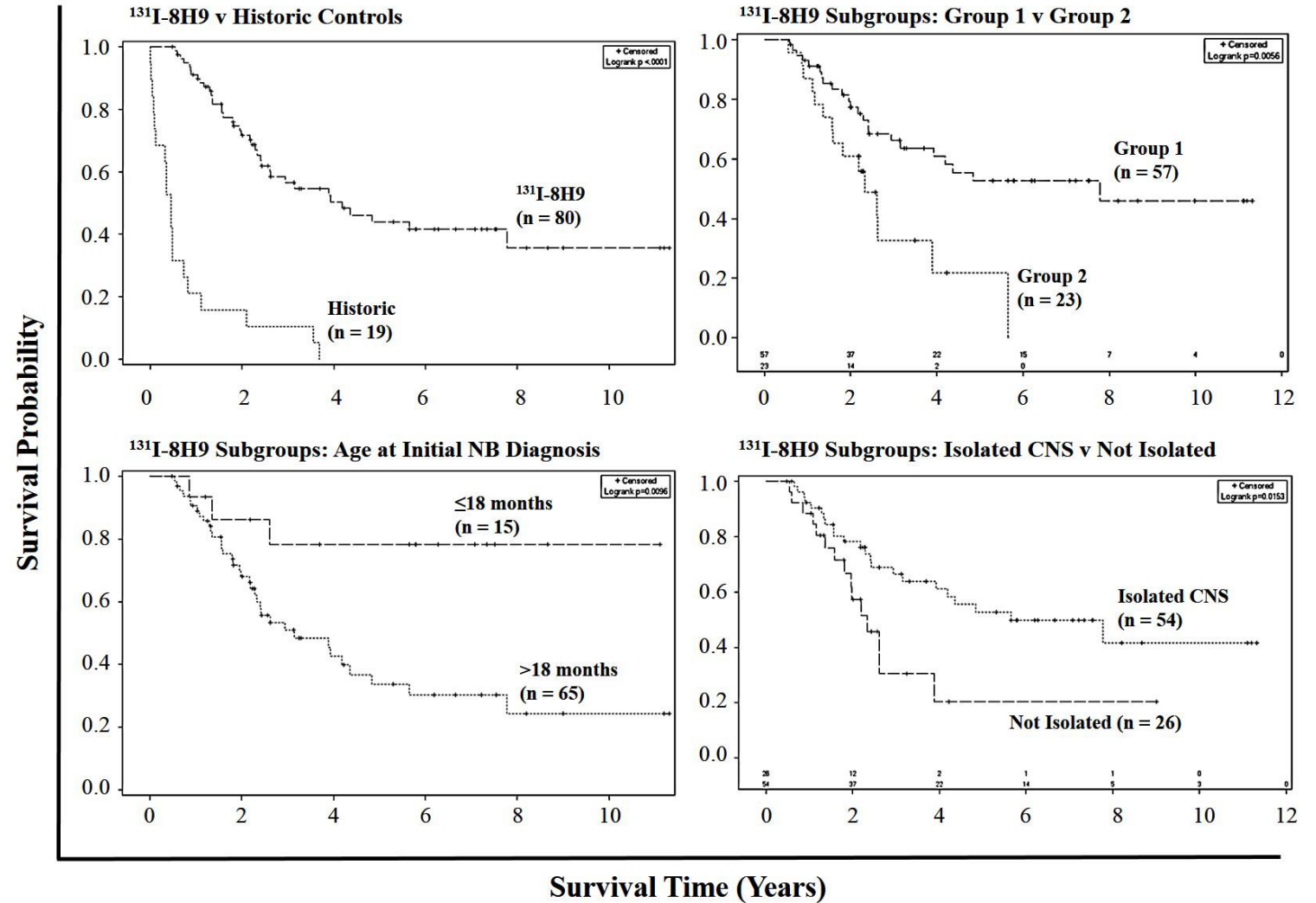


8Hg Monoclonal Antibody (^{131}I -8Hg) - results

- 80 patients treated
- 45% alive at 36 months
- 29% alive at >60 months



Kramer, et al. J. Neurooncol. 2010 May

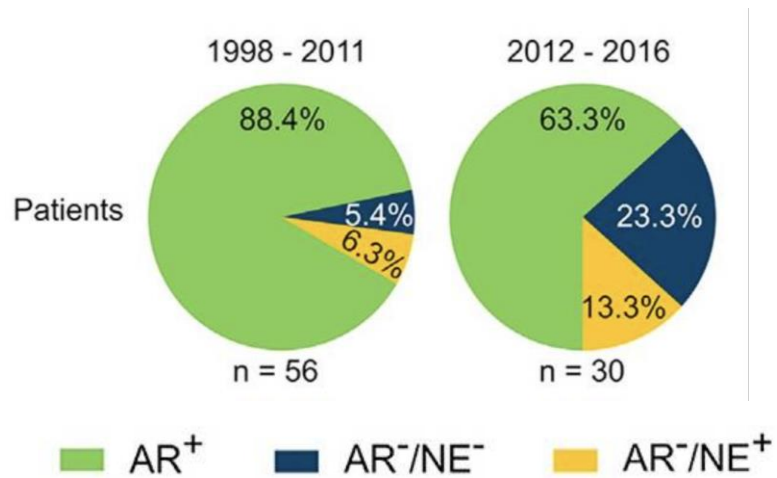
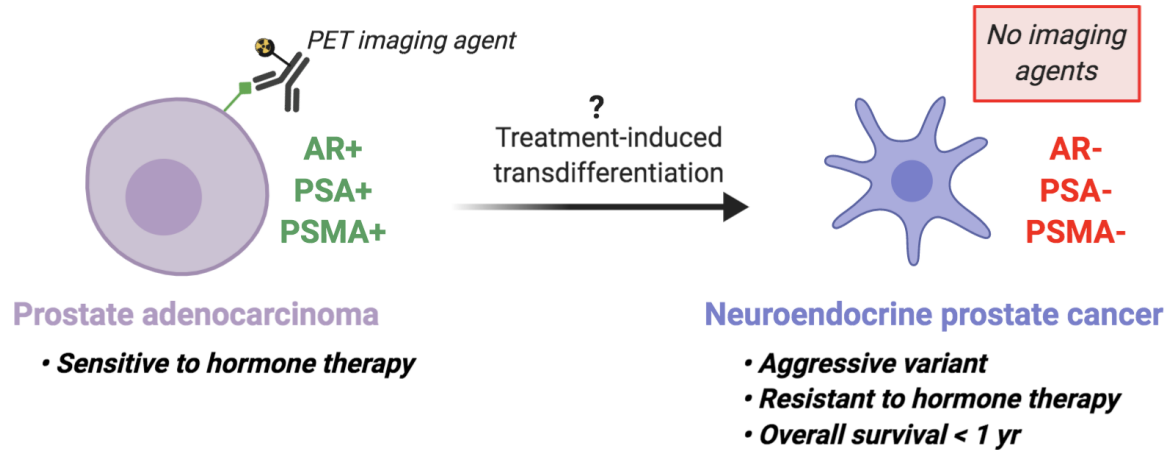




Memorial Sloan Kettering
Cancer Center.

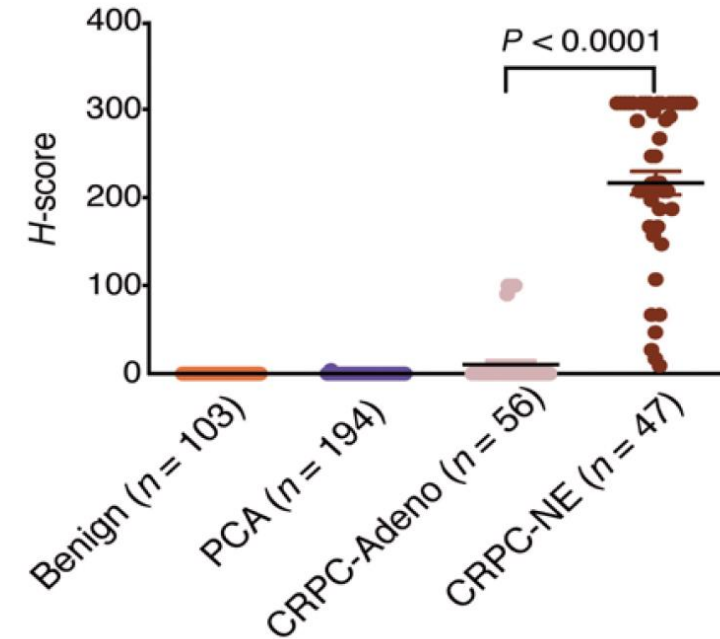
So what's new?

Neuroendocrine Prostate Cancer (NEPC) biologically lethal, biologically diverse and heterogeneous, and pretty much untreatable.



Nelson et al. Cancer Cell 2017

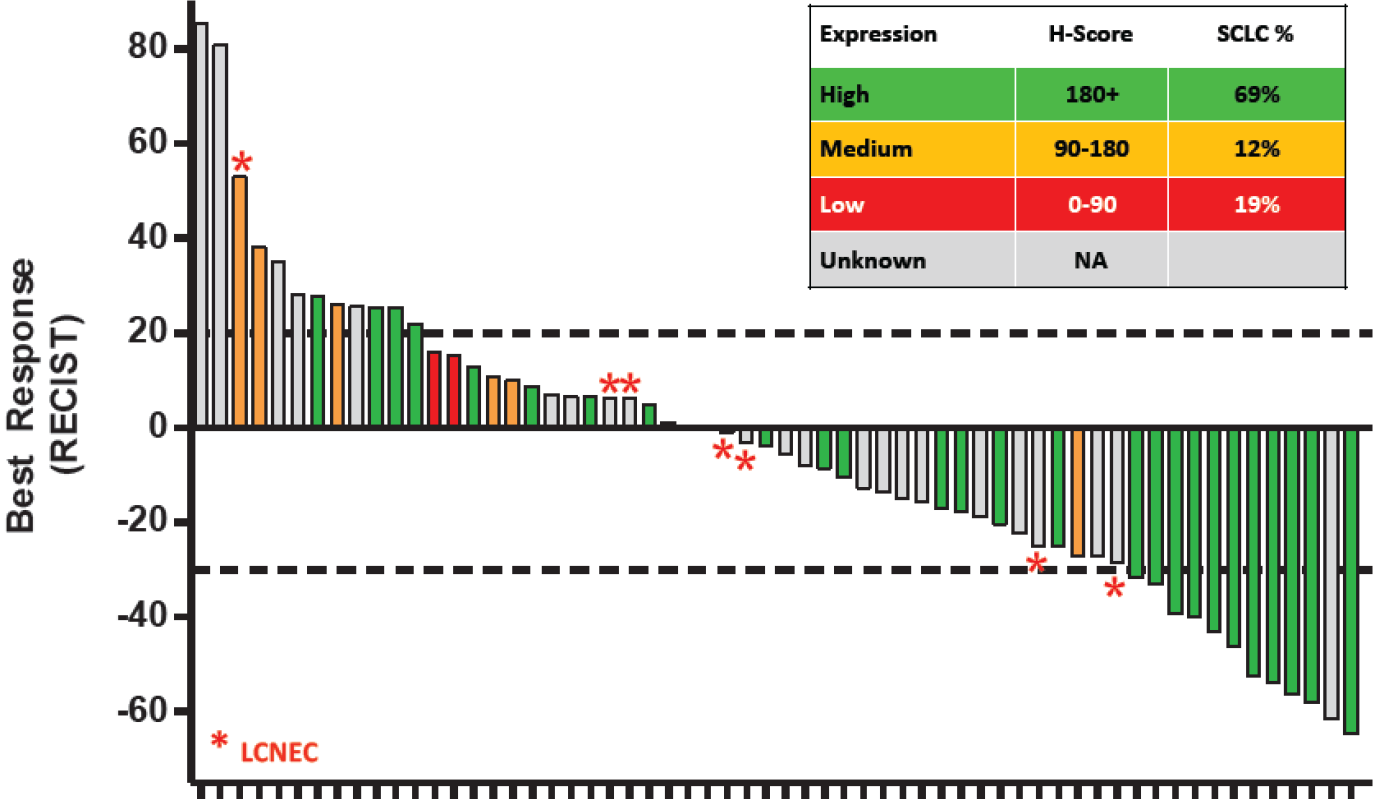
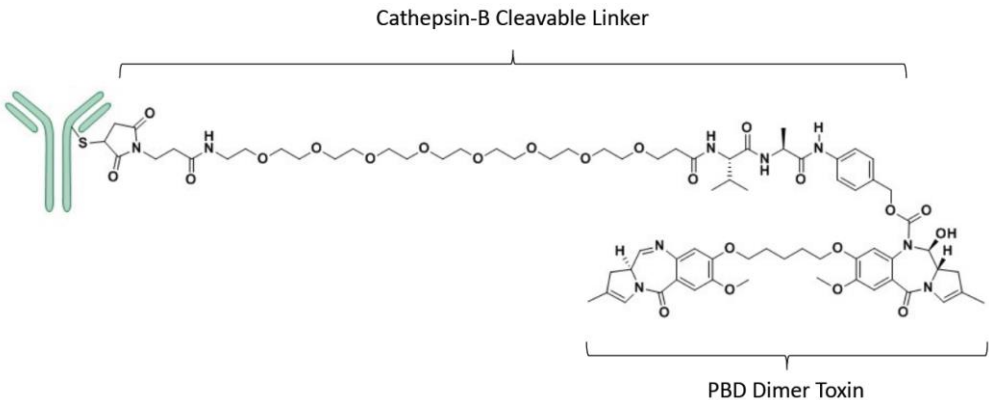
CRPC = Castration resistant prostate cancer



Adeno: detectable by AR tracers
NEPC: Undetectable by AR tracers

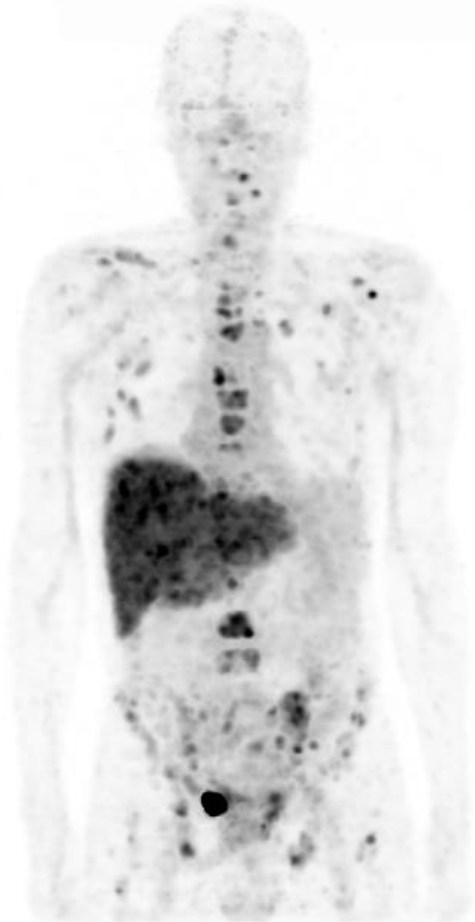
Puca et al. Sci. Transl. Med. 2019

Clinical Response Data - Rova-T - targeting DLL3



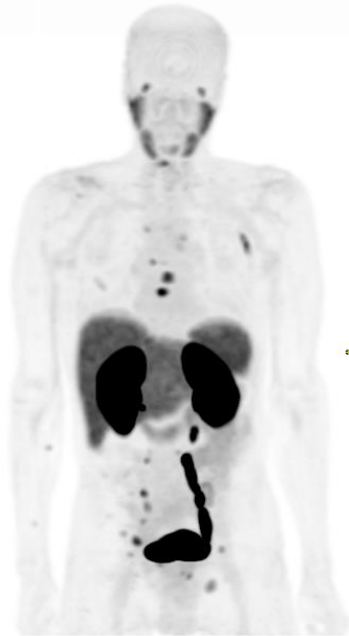
^{89}Zr -SC16 is the first PET scan tracer for detecting and quantifying in vivo tumor DLL3 expression

DLL3 PET (3D)



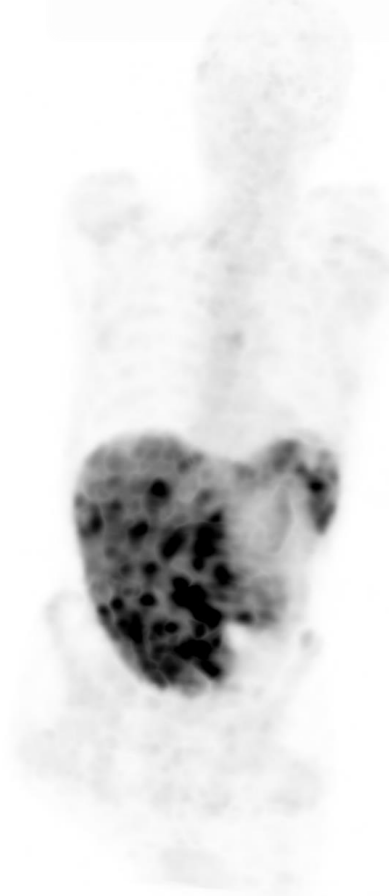
64-year-old male with prostate adenoCA and biopsy-proven small cell metastasis

PSMA PET



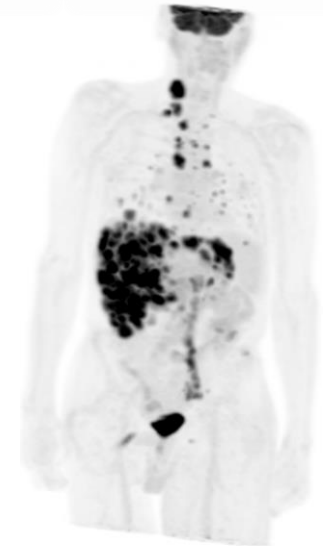
PSMA +ve & DLL3 +ve lesions
PSMA -ve & DLL3 +ve lesions

DLL3 PET (3D)

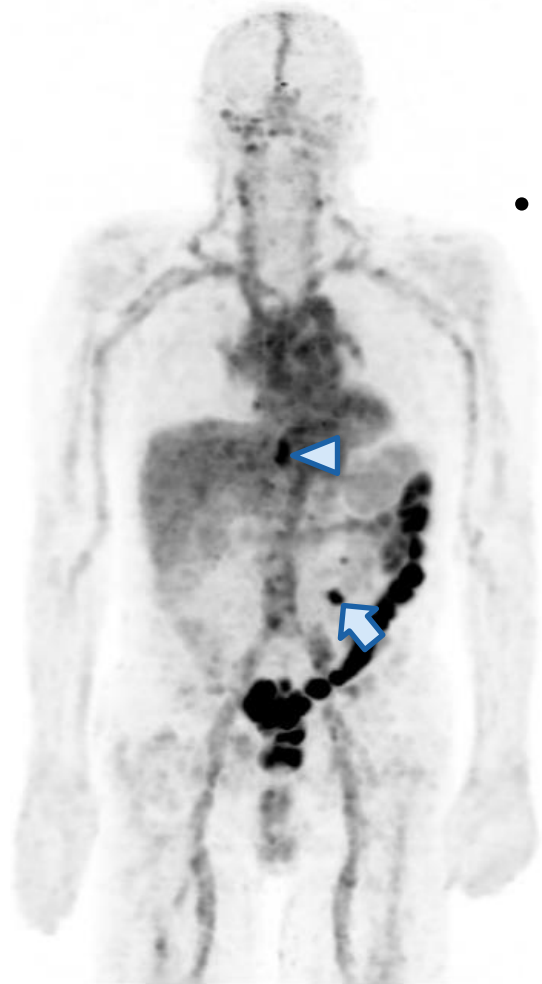


63-year-old male with prostate adenoCA and biopsy-proven metastatic high-grade carcinoma with neuroendocrine dedifferentiation metastasis

FDG PET



^{89}Zr -SC16 is the first PET scan tracer for detecting and quantifying in vivo tumor DLL3 expression



DLL3 PET (3D)

81-year-old male

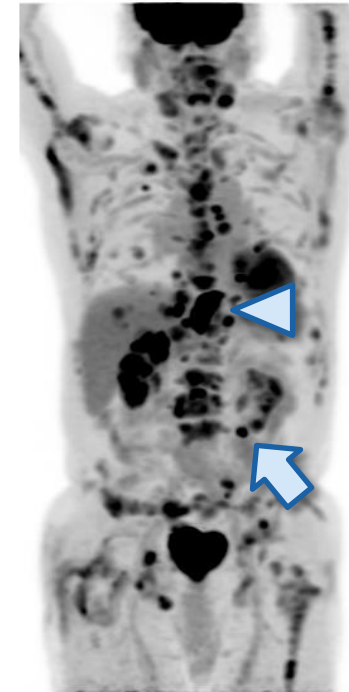
- prostate adenoCA
- Biopsy-proven small cell nodal metastasis

Nodal met ◀ Perinephric implant ▶

NEPC

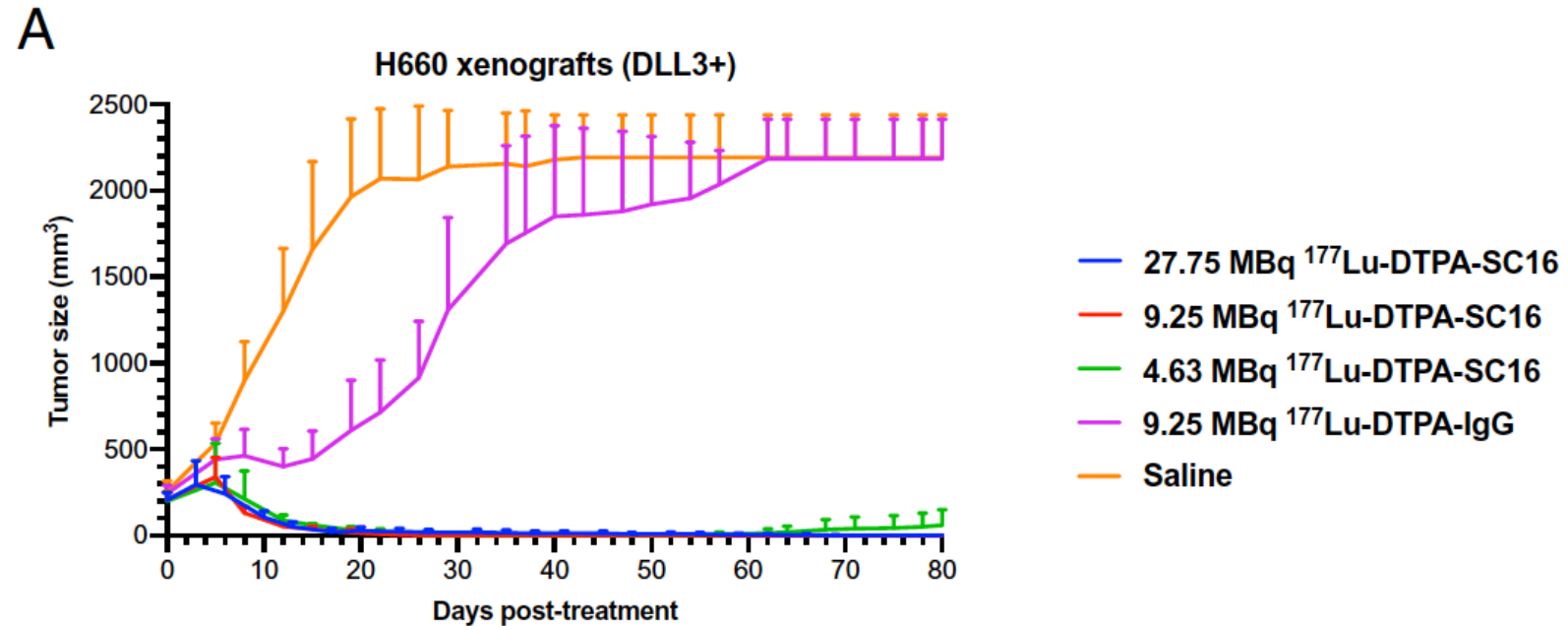
Resistant to hormone therapy

Overall survival <1 year



FDG PET/CT

NEPC lesions show *complete* and *durable* tumor regression with ^{177}Lu -SC16



Deep and durable complete pathological responses!

PNAS

RESEARCH ARTICLE

APPLIED BIOLOGICAL SCIENCES

OPEN ACCESS

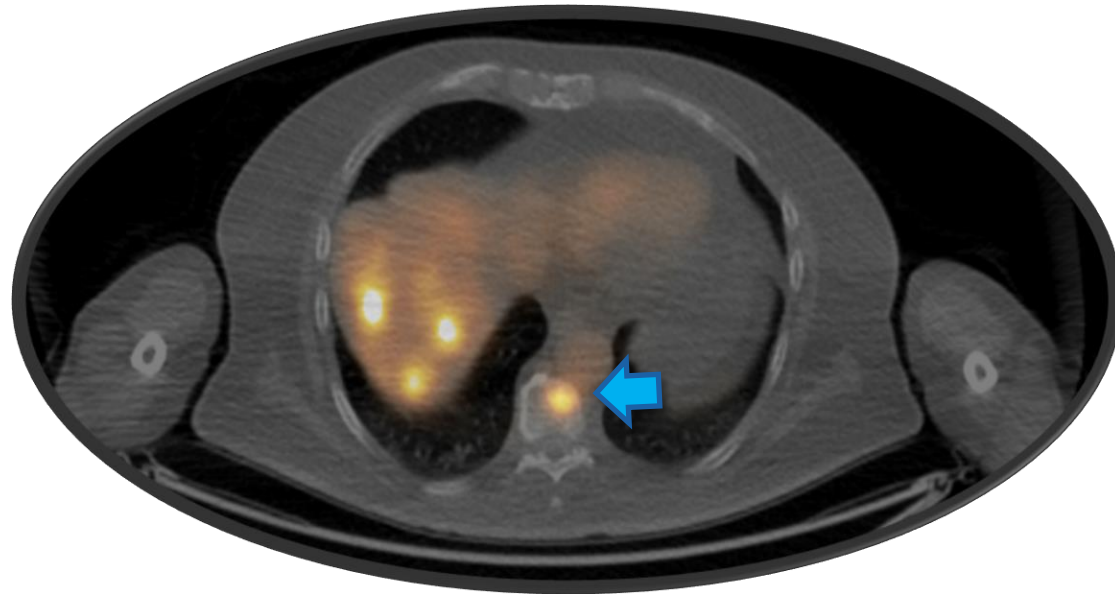
Delta-like ligand 3–targeted radioimmunotherapy for neuroendocrine prostate cancer

Joshua A. Korsen^{a,b}, Julia A. Gutierrez^a, Kathryn M. Tully^{a,b}, Lukas M. Carter^a, Zachary V. Samuels^a, Samantha Khitrov^a, John T. Poirier^c, Charles M. Rudin^{b,d,e}, Yu Chen^{d,f}, Michael J. Morris^{d,g}, Lisa Bodei^h, Nagavarakishore Pillarsetty^{a,1}, and Jason S. Lewis^{a,b,e,1}

Edited by Michael Phelps, University of California, School of Medicine, Los Angeles, CA; received March 7, 2022; accepted May 23, 2022

DLL3 expression in SCLC - Zr-89 SC16 PET imaging (19-292 Dunphy, PI; Rudin co-PI)

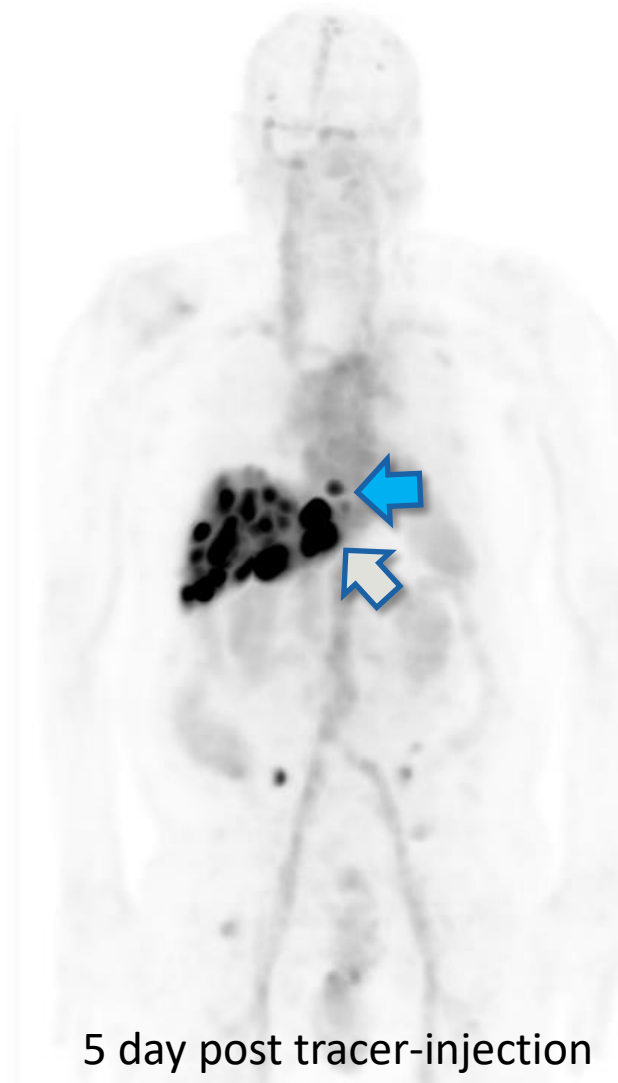
DLL3 tracer-avid metastases detected in the brain, liver and skeleton. For example, T9 vertebral metastasis (dark blue arrow) with SUV 29.8; and left lobar hepatic metastasis (light blue arrow) with SUV 68.6



SC16 PET/CT

5dd post tracer-injection

70 yo stage IV SCLC



5 day post tracer-injection

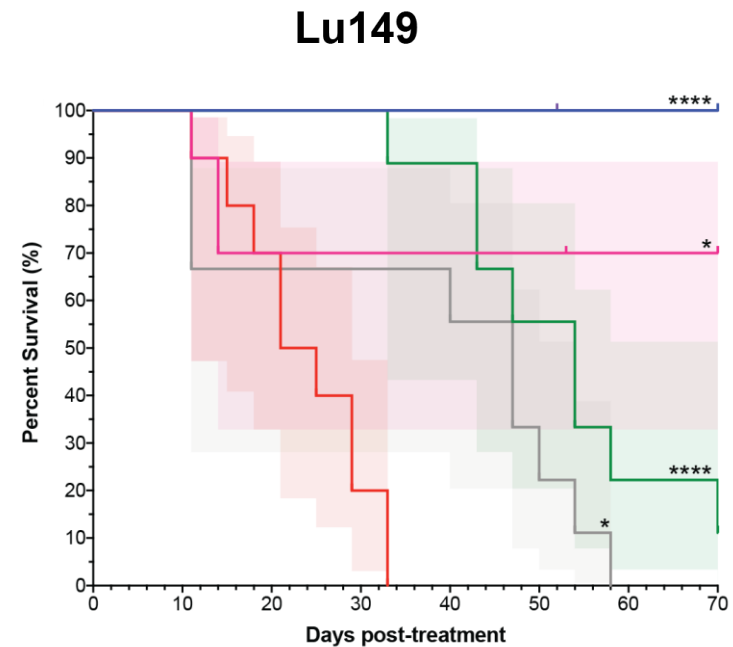
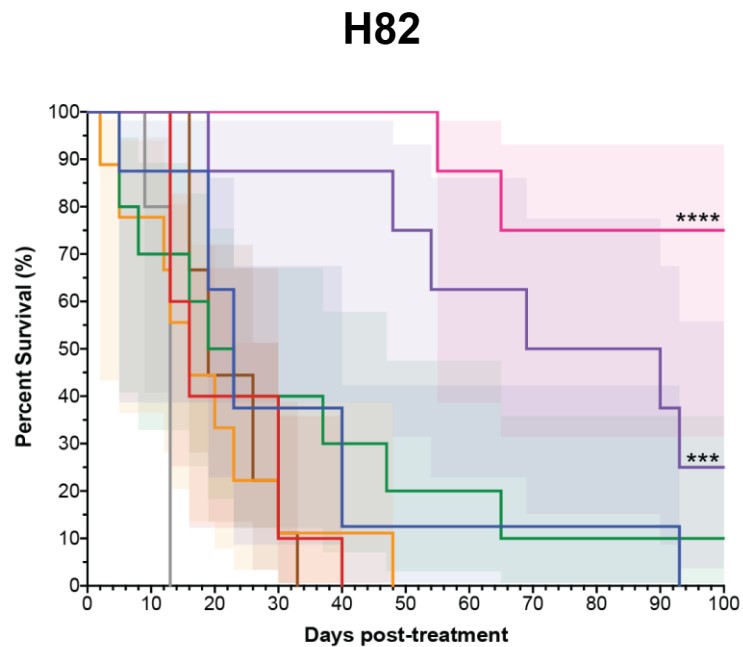
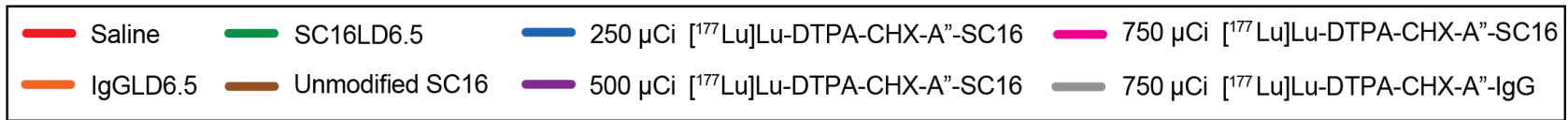
NCT04199741



Dunphy

Radioimmunotherapy targeting DLL3 in SCLC

^{177}Lu -SC16 leads to significantly longer survival in radioresistant (H82) and radiosensitive (Lu149) models

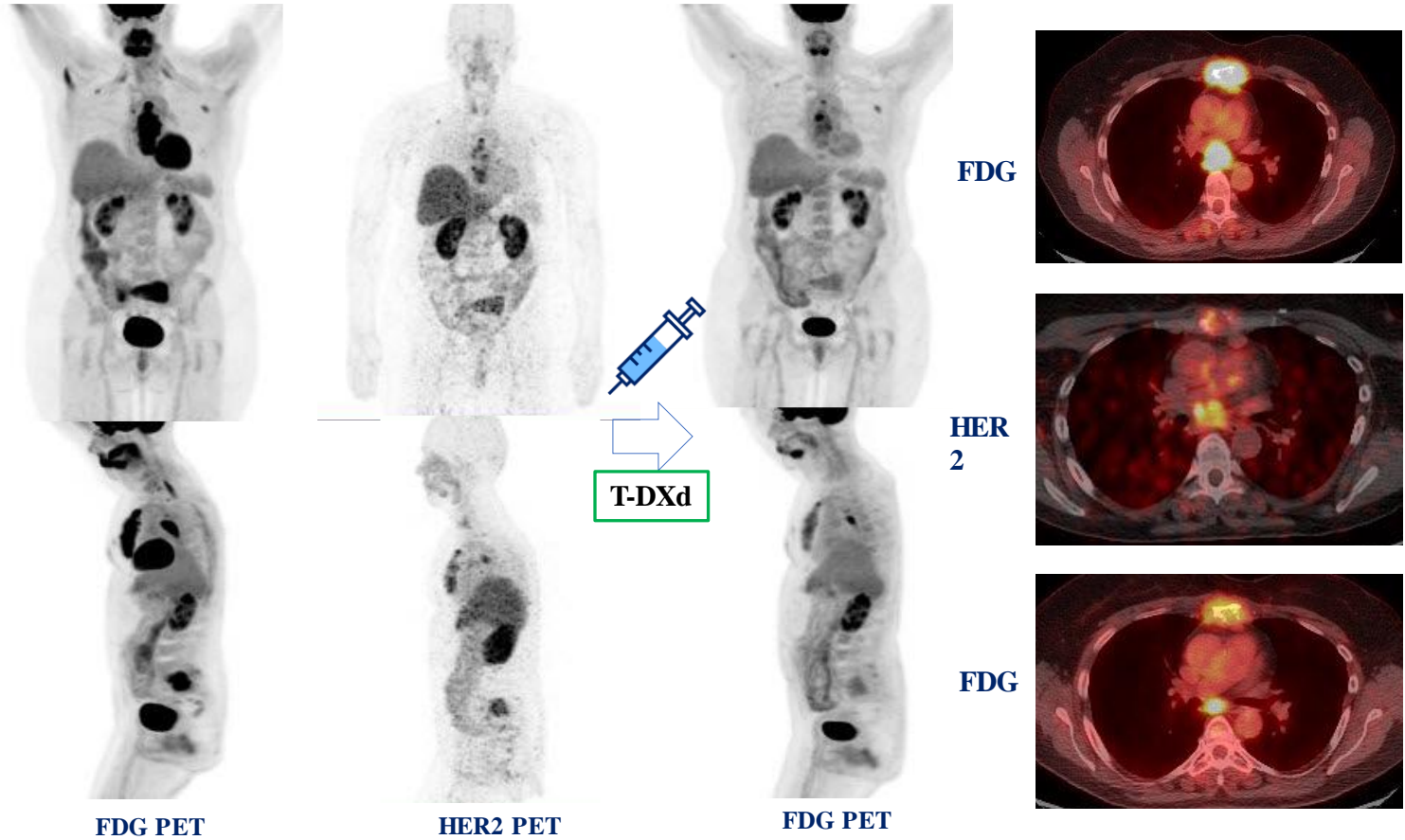


^{89}Zr -pertuzamab for Imaging Her-2 **low** Cancer

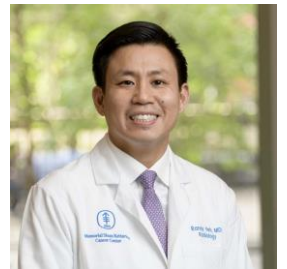


Trastuzumab Deruxtecan in Previously Treated HER2-Low Advanced Breast Cancer

S. Modi, W. Jacot, T. Yamashita, J. Sohn, M. Vidal, E. Tokunaga, J. Tsurutani, N.T. Ueno, A. Prat, Y.S. Chae, K.S. Lee, N. Niihara, Y.H. Park, B. Xu, X. Wang, M. Gil-Gil, W. Li, J.-Y. Pierga, S.-A. Im, H.C.F. Moore, H.S. Rugo, R. Yerushalmi, F. Zagouri, A. Gombos, S.-B. Kim, Q. Liu, T. Luo, C. Saura, P. Schmid, T. Sun, D. Gambhire, L. Yung, Y. Wang, J. Singh, P. Vitazka, G. Meinhardt, N. Harbeck, and D.A. Cameron, for the DESTINY-Breast04 Trial Investigators*



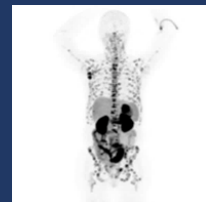
Yeh et al., data not published



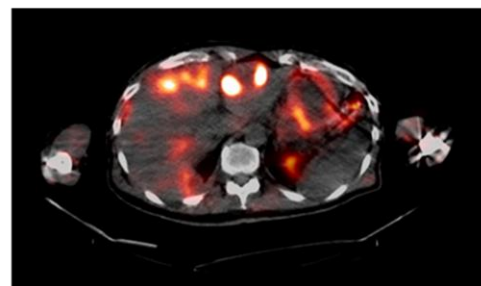
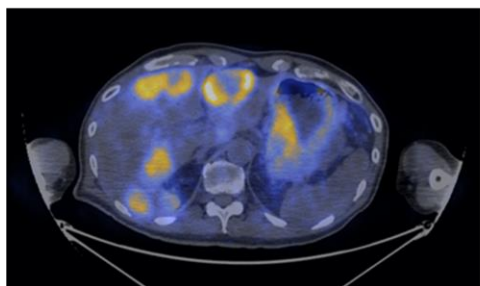
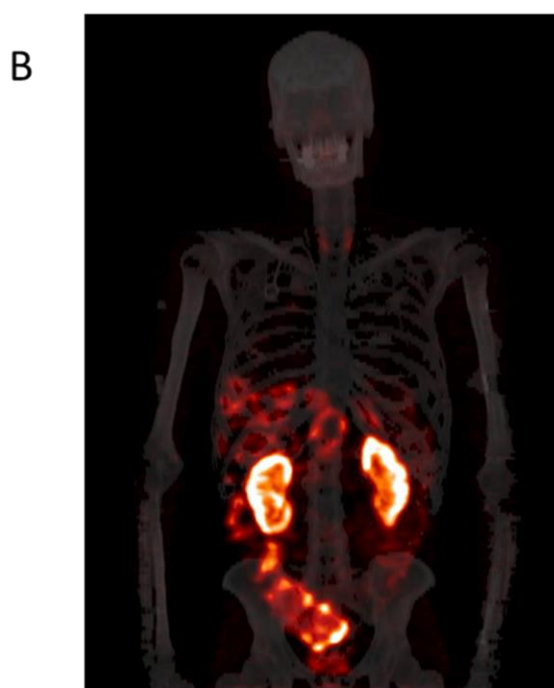
2007



2016



2022



Why Alpha Radiopharmaceuticals?

- Alpha radiation is ~100 times more potent than other forms of radiation, therefore able to overcome some common tumor resistance.
- With alpha emitters, the highly effective energy deposition can kill individual targeted tumor cells (including micrometastases) by causing direct DNA double strand breaks, irrespective of the cell mitotic status or oxidative state, or ROS.
- Alpha radiation energy is deposited over approximately one to three cell diameters (the healthy surrounding tissues are therefore largely spared from damage). This is particularly important in pediatric and heavily pre-treated adult patients.

PSMA-directed Alpha Therapy – induces complete remissions *after all prior therapies have been used*

^{225}Ac -PSMA

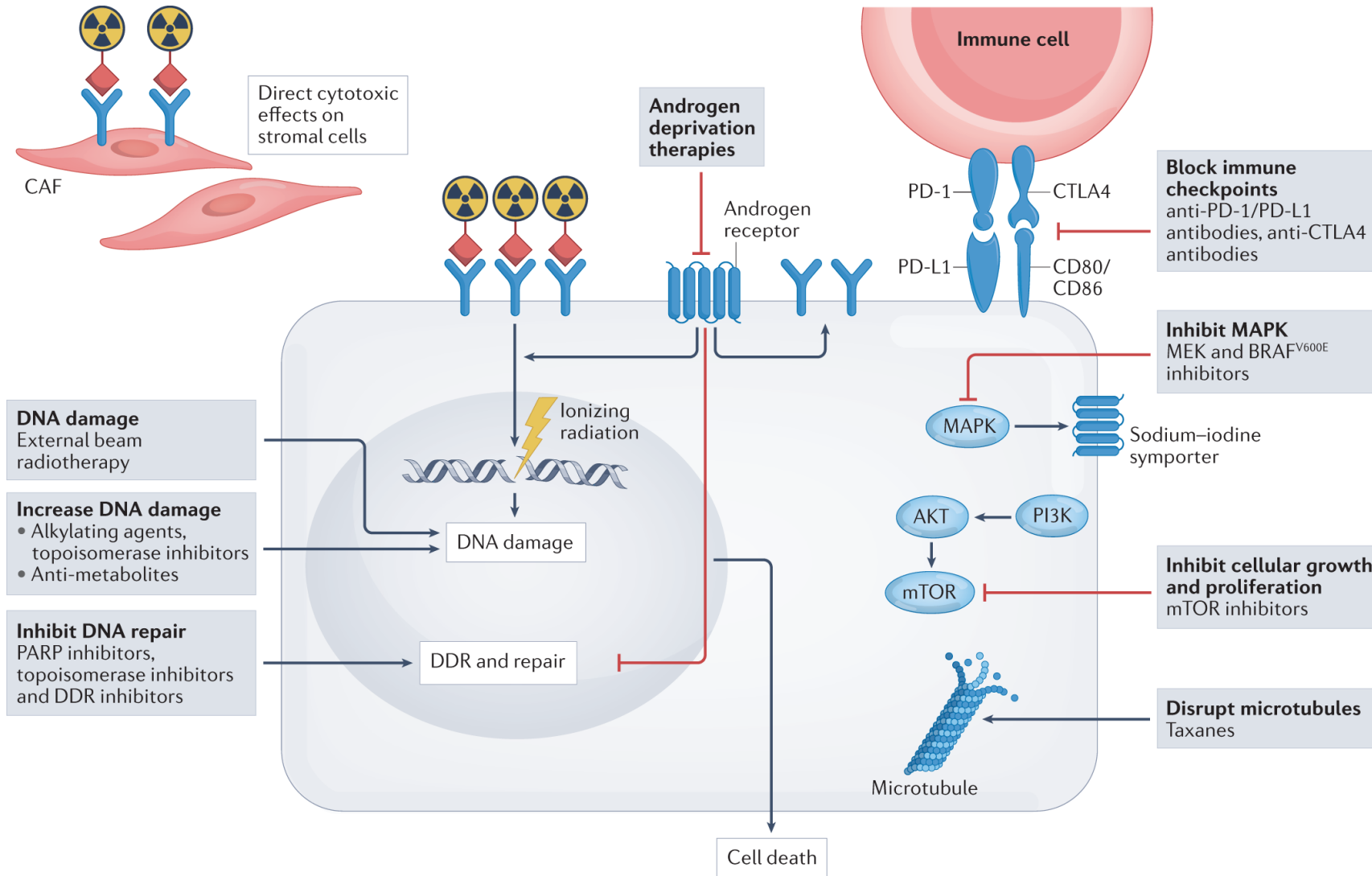


PSA = 2923 ng/ml

PSA = 0.26 ng/ml

PSA < 0.1 ng/ml

Therapeutic Approaches Involving Radiotheranostics



Conclusions and Thoughts

- Theranostics may have application in numerous indications
- Need to develop applications in combination with other treatment modalities
- The growth and expansion in the field is unprecedented – but there are significant challenges in the future e.g., workforce shortages and lack of redundancy in supply chain

Thank You!