

# New Developments in Cancer Treatment

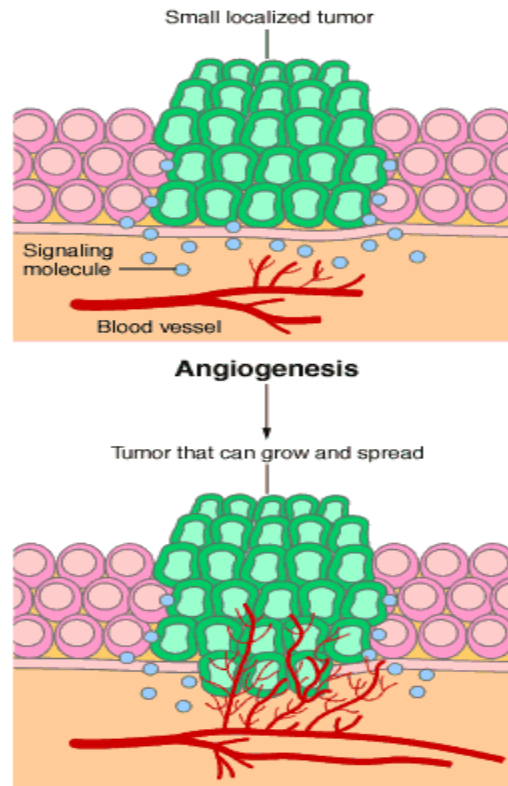
Ian Rabinowitz MD



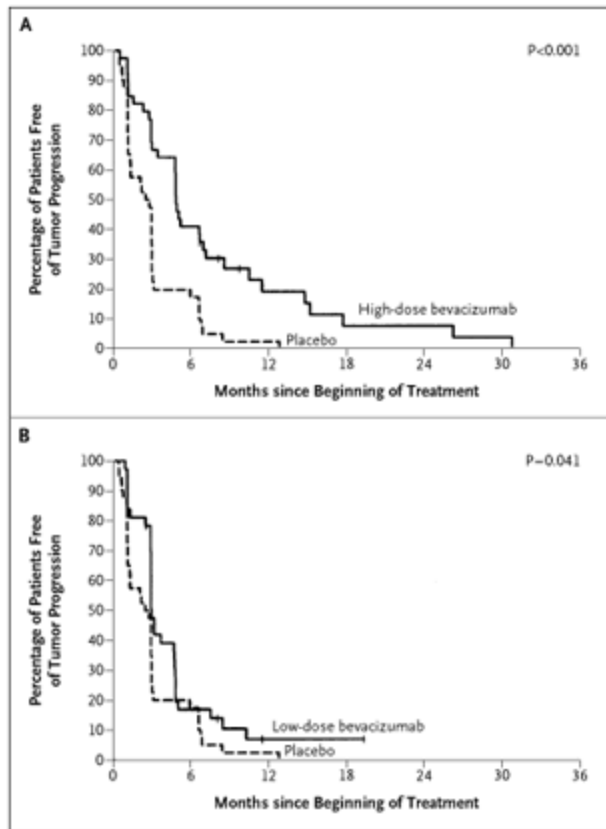
# Treatment Outline

- Angiogenesis inhibition
- Targeted therapy
- Immunotherapy
- Personalization of therapy
- Genomics and cancer
- Stem cells and cancer

# Angiogenesis in tumors



# Bevacizumab in Renal Cancer



- Bevacizumab, a neutralizing antibody against vascular endothelial growth factor
- A randomized, double-blind, phase 2 trial was conducted comparing placebo with bevacizumab at doses of 3 and 10 mg/ kg, given q2 weeks
- After 116 patients randomly assigned to treatment groups, the trial was stopped early

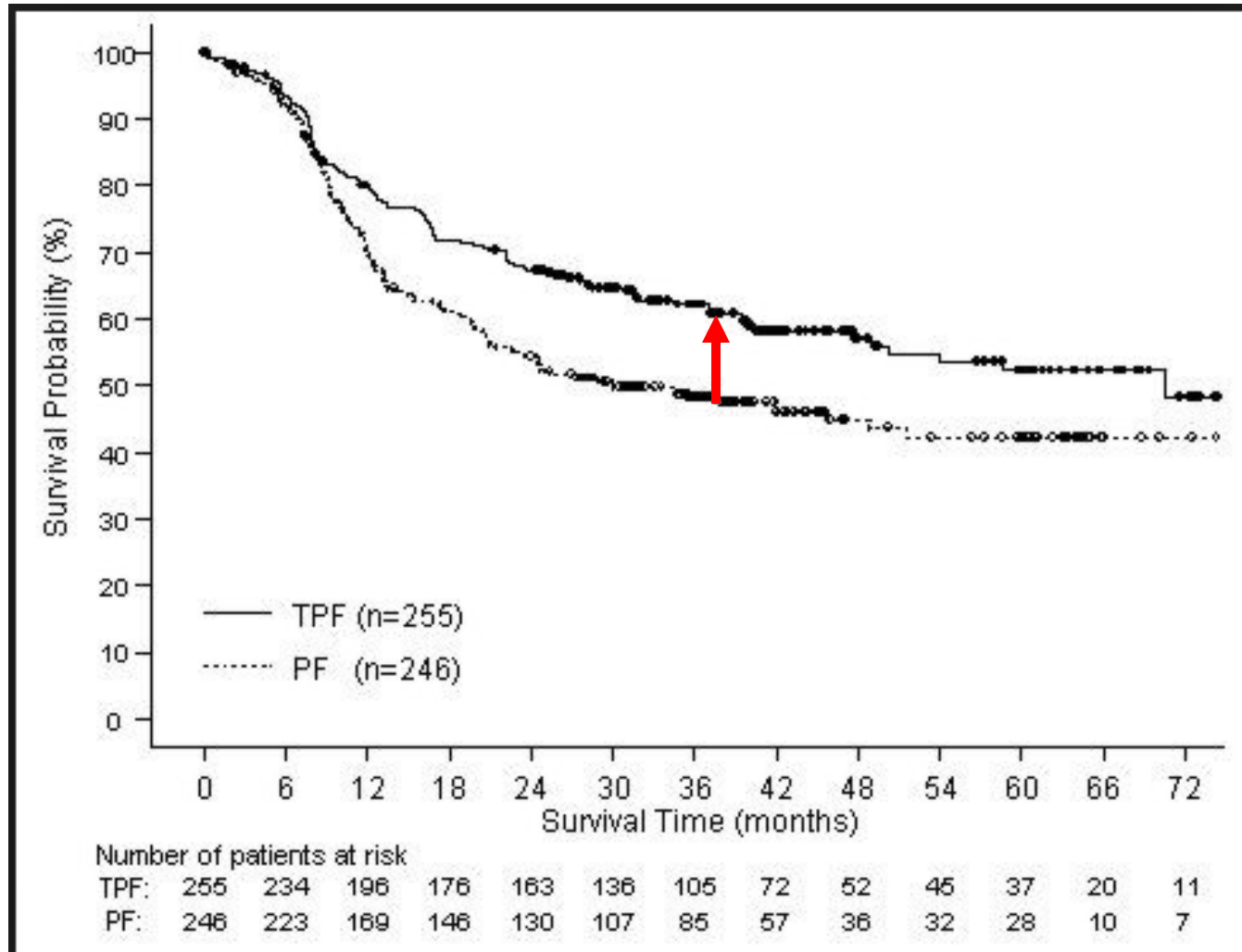
# Bevacizumab

- Improve survival in:
  - Colon cancer
  - Lung cancer
  - Renal cancer

Many other angiogenesis inhibitors are in the clinic today

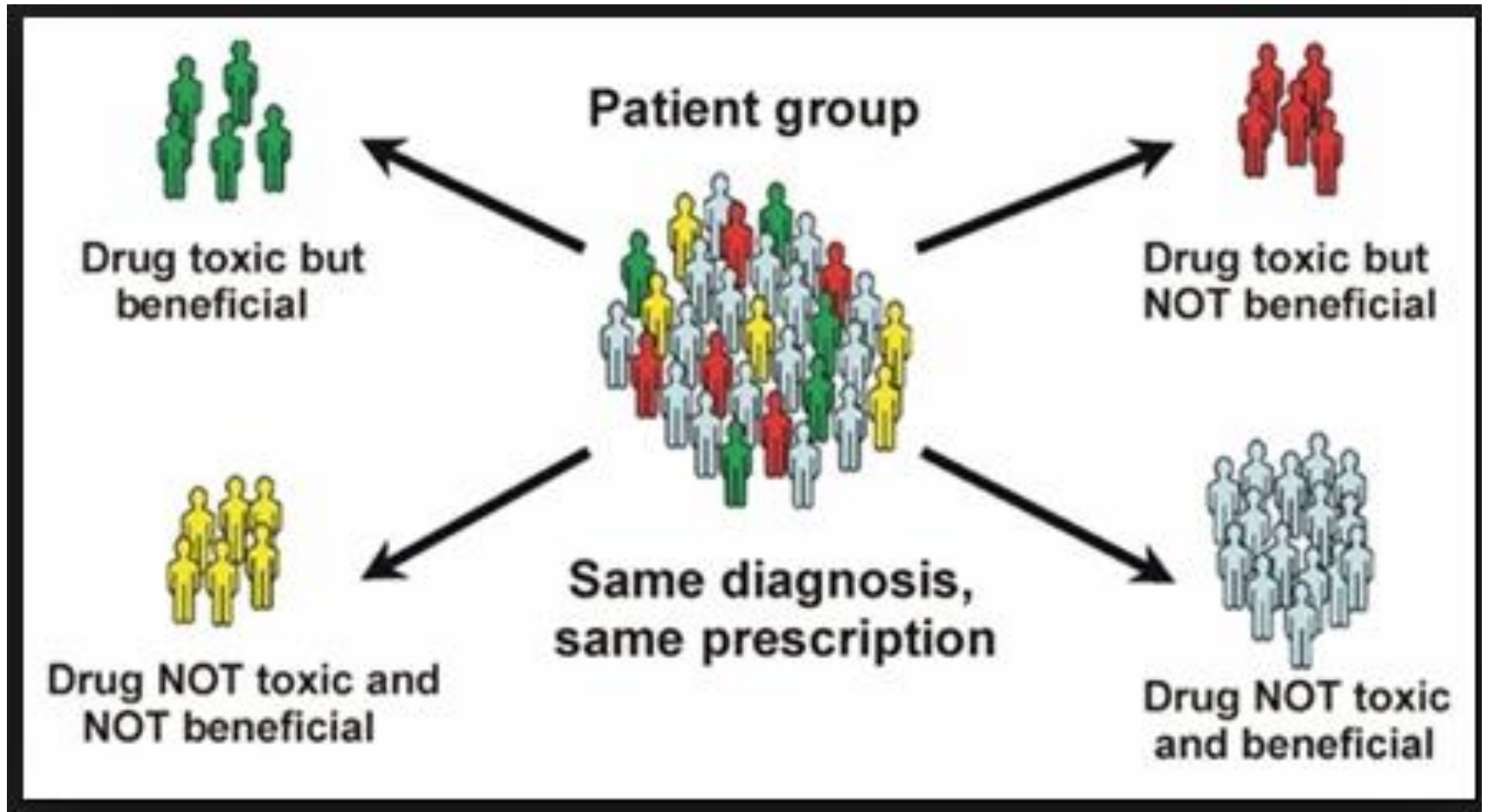
# Advances can come in two flavors

## Improve the efficacy of treatments



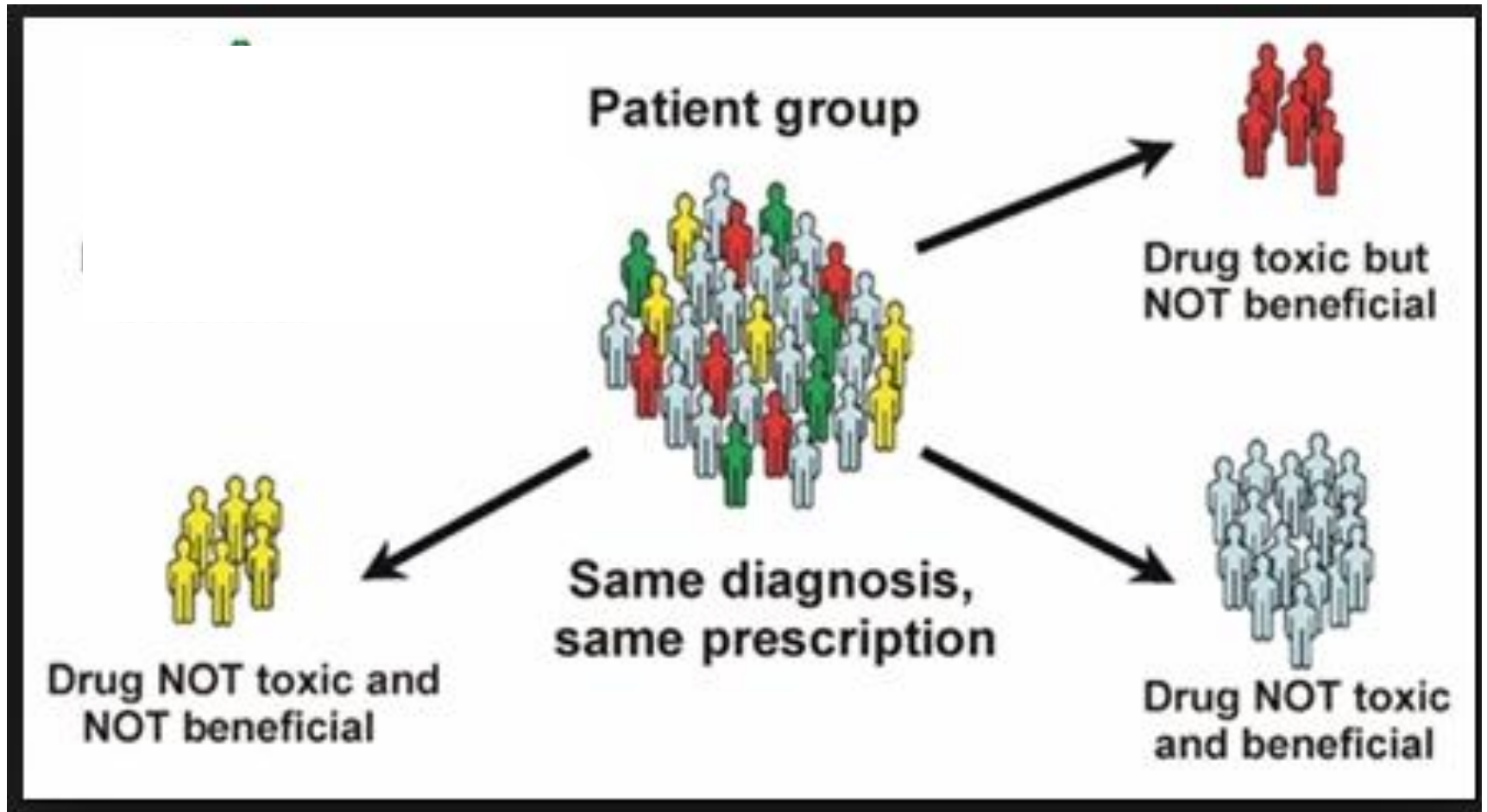
# Advances can come in two flavors

## Personalized treatment



# Advances can come in two flavors

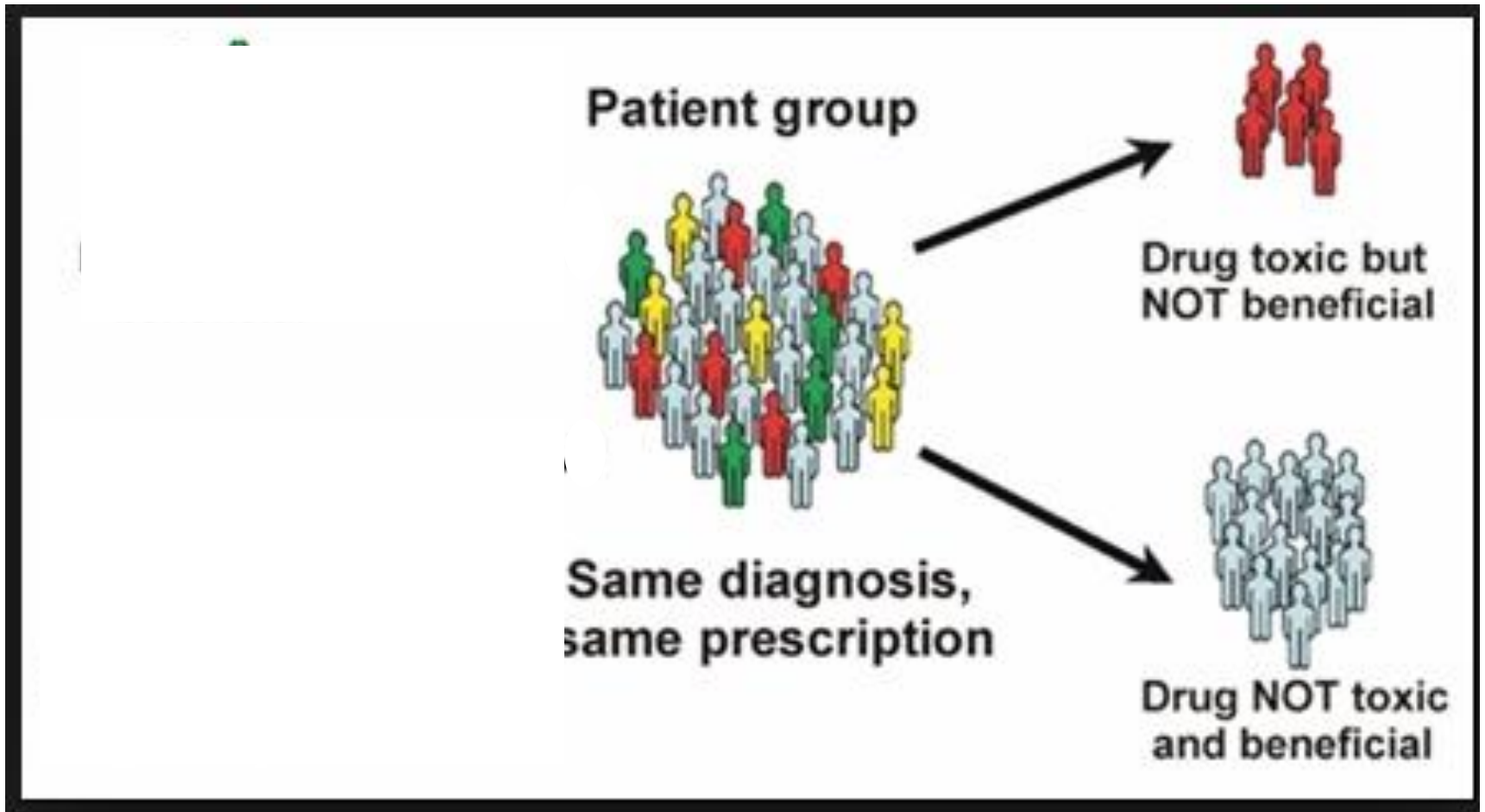
## Personalized treatment





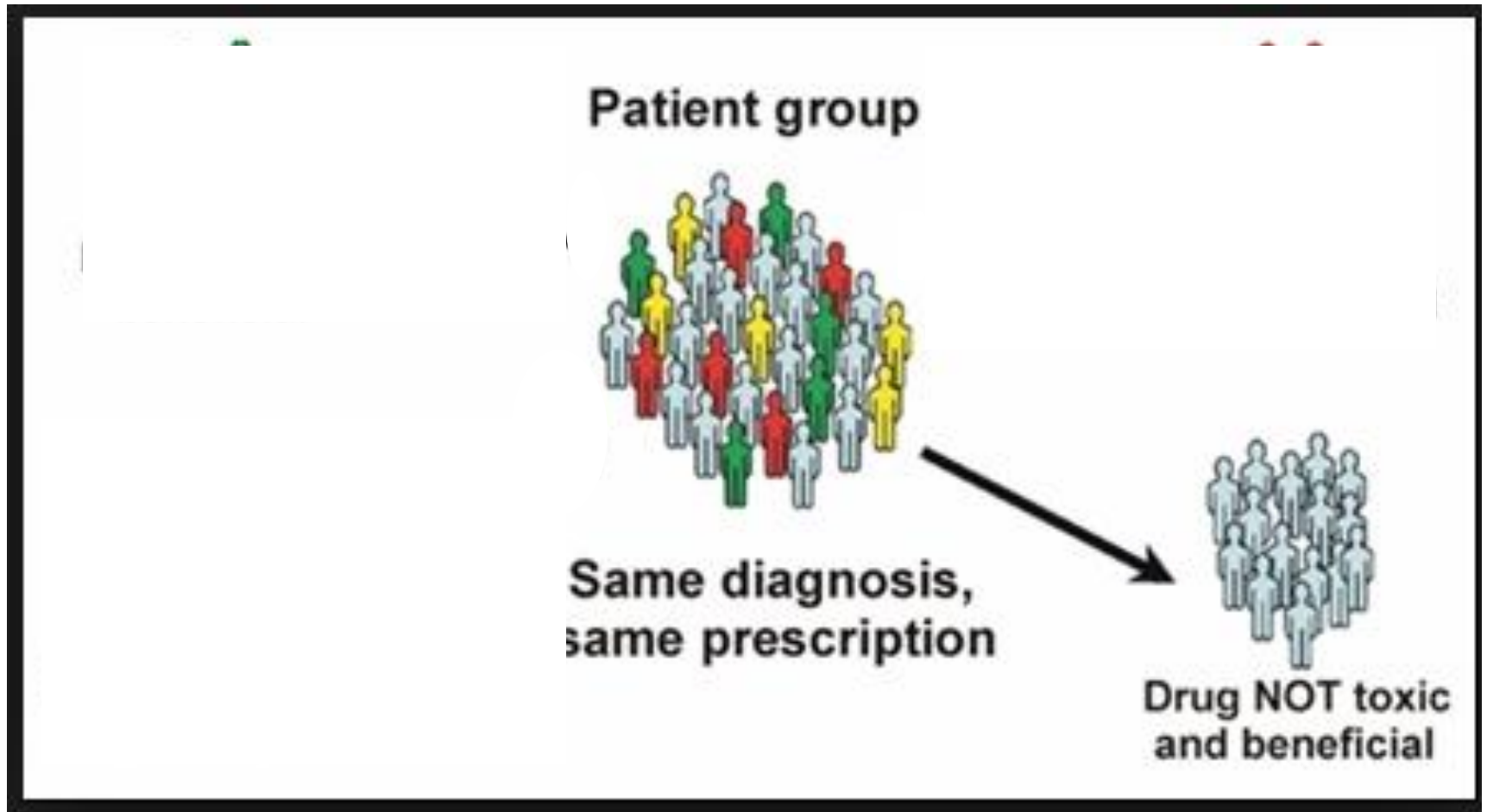
# Advances can come in two flavors

## Personalized treatment



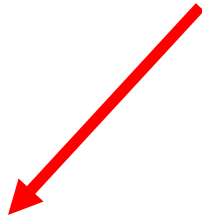
# Advances can come in two flavors

## Personalized treatment



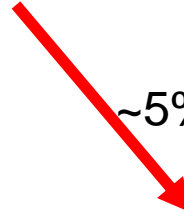
# Targeted therapy in Lung cancer

10% of patients



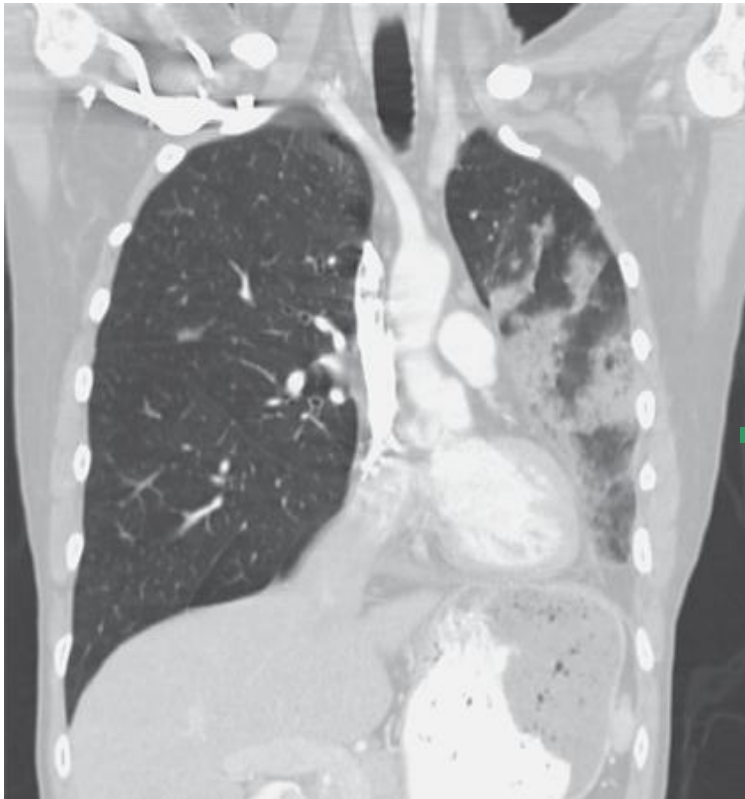
- Patients with NSCLC expressing mutated epidermal growth factor receptors (EGFRs) were randomly assigned to receive either the EGFR kinase inhibitor gefitinib or standard chemotherapy.
- The gefitinib group had a higher response rate (73.7%, vs. 30.7%) and significantly longer median survival (30 vs. 23 months). (NEJM June 2010)

~5% of patients



- A small group of patients with NSCLC have genetic lesions that activate anaplastic lymphoma kinase (ALK).
- Crizotinib, an oral ALK kinase inhibitor, produced a 57% response rate in this subgroup, (NEJM Oct 2010)

CT scan in a representative ALK +ve patient  
at baseline  
and after two cycles of therapy.



Crizotinib



# Examples of mutations guiding therapy in the clinic today

- **+ve**
- EGFR mutations in lung cancer- erlotinib
- B-raf mutations in melanoma- vemurafenib  
BRACA mutations in breast cancer- PARP inhibitors such as olaparib
- Alk translocation in lung cancer/lymphoma- crizotinib
- **-ve**
- K-ras mutations in colon cancer- cetuximab

# Immunotherapy

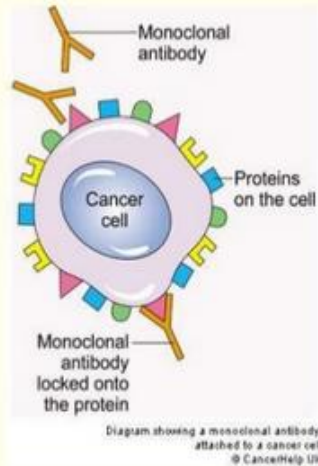
- Use the immune system to prevent or treat neoplasms.
- Goal is to enhance the body's immune response against weakly immunogenic tumors

*WAKE  
UP  
&  
SMELL  
THE  
COFFEE*

# Antibodies recognizing tumor associated antigens

## 3) Treatment of Cancer

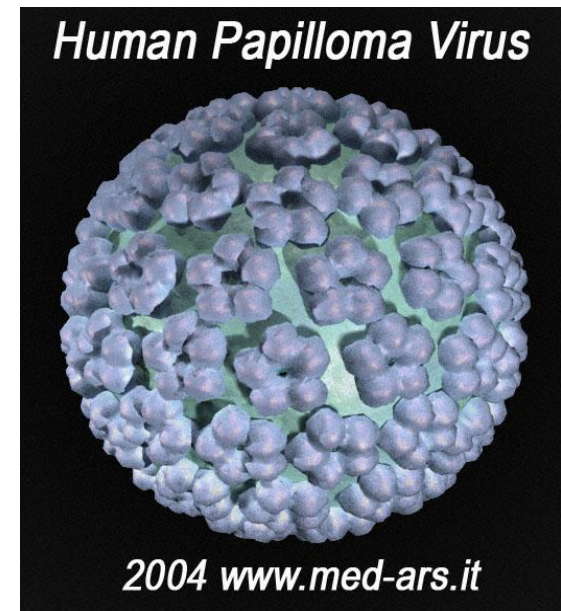
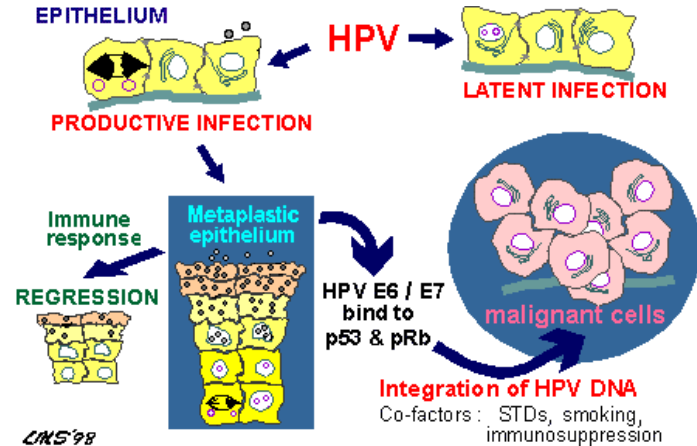
- Cancer cells carry specific tumour-associated antigens (TAA) on their plasma membrane.
- Monoclonal anti-TAA antibodies have been produced.



- *Herceptin* Breast cancer, useful in ~30% of patients
- *Rituximab* B cell lymphoma, used as a single agent or in combination with chemotherapy.
- *Zevalin* is a radio-labelled conjugates of CD20 useful in NHL
- *Brentuximab* used to treat relapsed Hodgkin's lymphoma

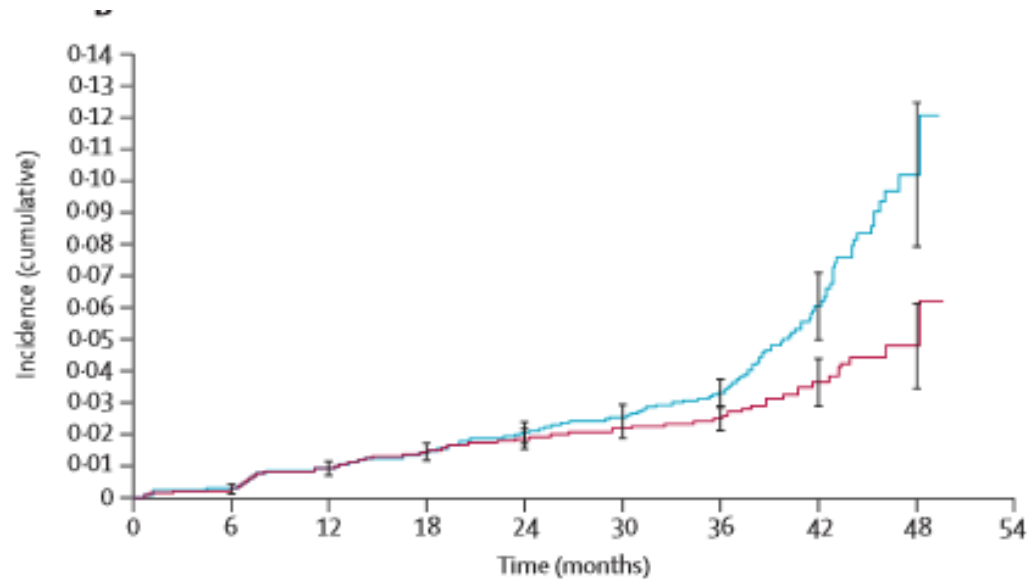
# Vaccine as Primary Prevention

- HPV causes cervical, anal cancer and a subset of head and neck cancers
- Sexually transmitted cancer
- Recently approved vaccine is extremely effective at preventing infection with the two most common strains of HPV



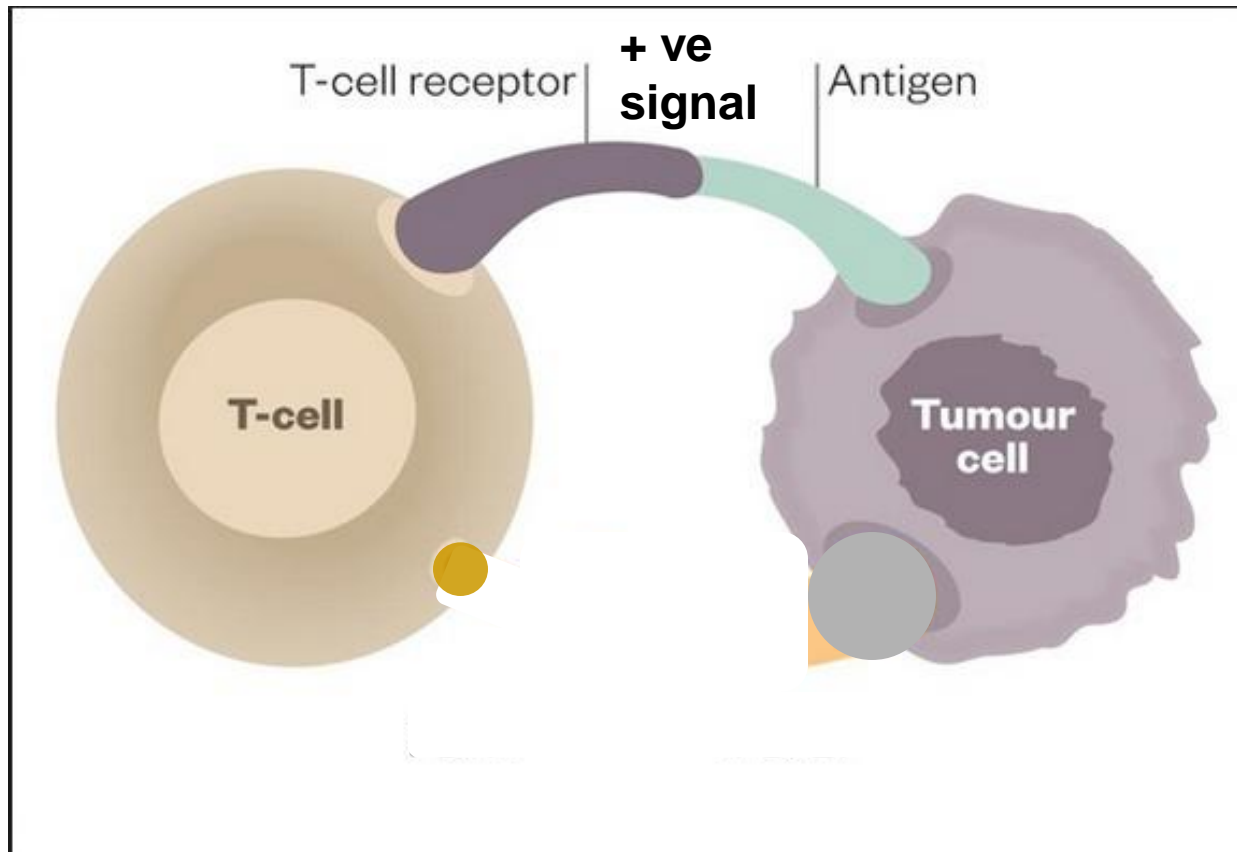


# Reduction of the incidence of pre-cervical cancer with a HPV vaccine vs control

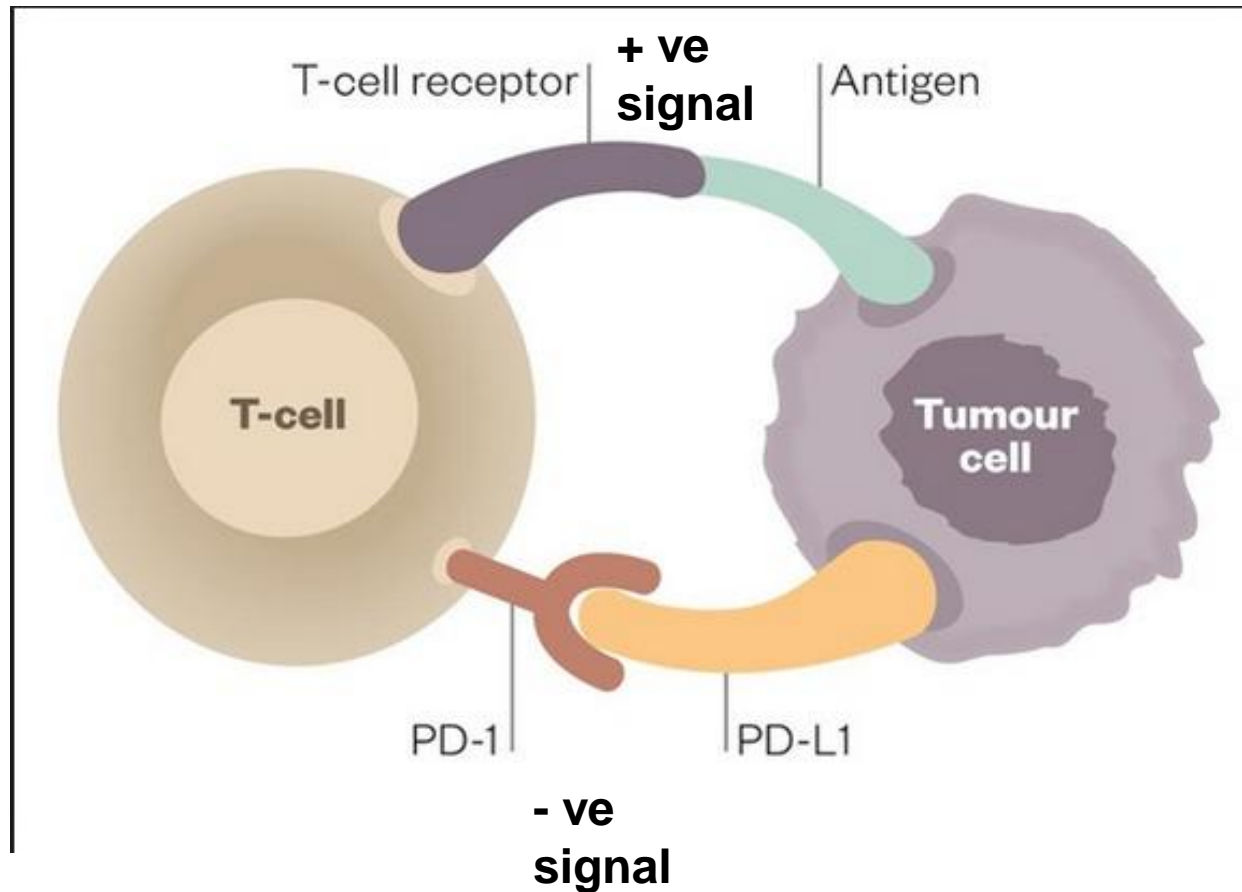


Number at risk		0	6	12	18	24	30	36	42	48	54
Vaccine	8667	8628	8414	8190	7796	7319	3400	622	72	0	
Control	8682	8634	8412	8170	7795	7321	3391	700	62	0	
Number of cases (cumulative)		0	6	12	18	24	30	36	42	48	54
Vaccine	0	19	79	124	158	181	202	218	223	224	
Control	0	26	81	122	173	212	261	301	321	322	

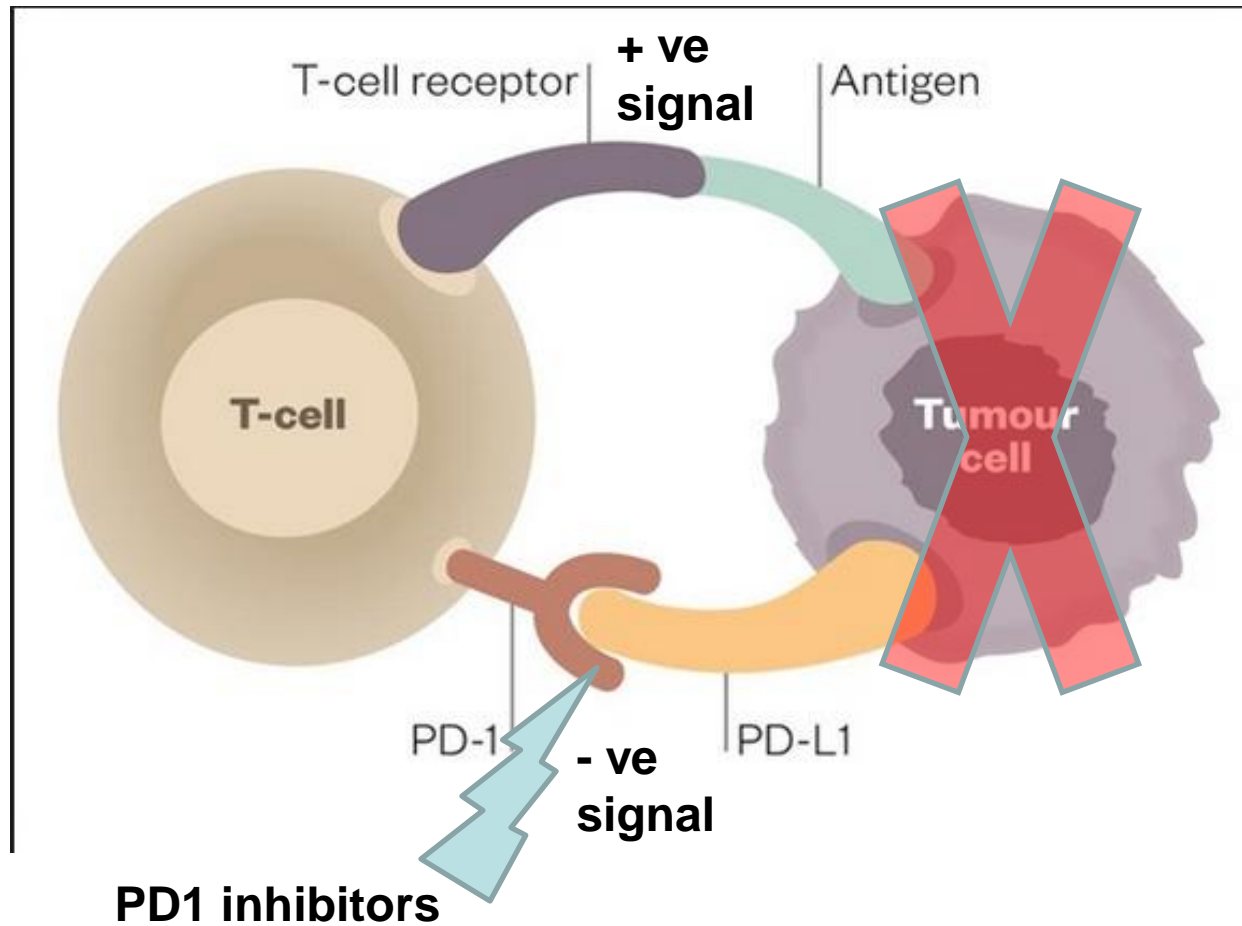
# Check point inhibitors



# Check point inhibitors



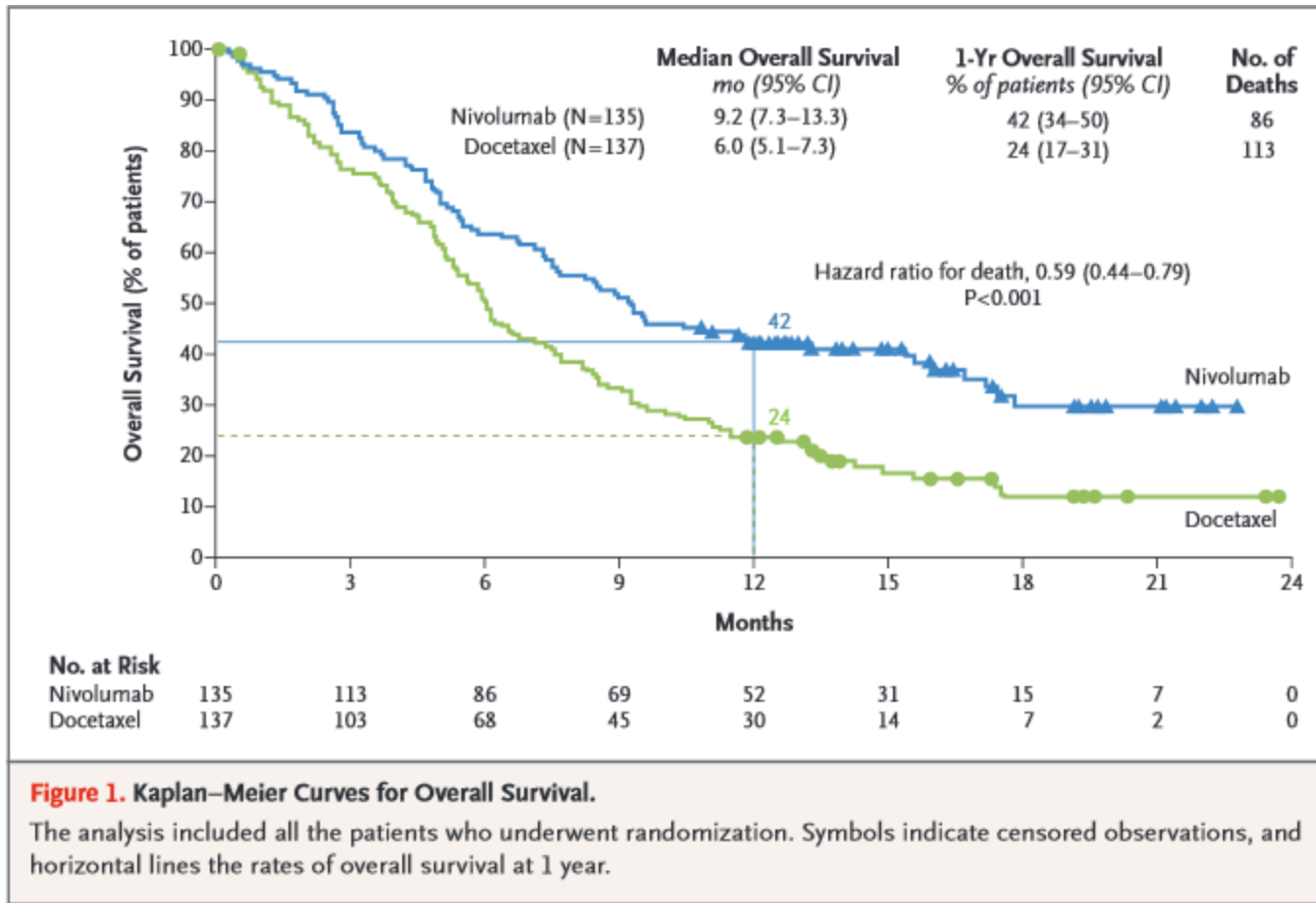
# Check point inhibitor



# PD1 inhibitors in the clinic

- Melanoma
- NSCLC (lung cancer)
- Kidney cancer
- Many more to come

# PD1 inhibitor improves survival over standard chemotherapy in NSCLC

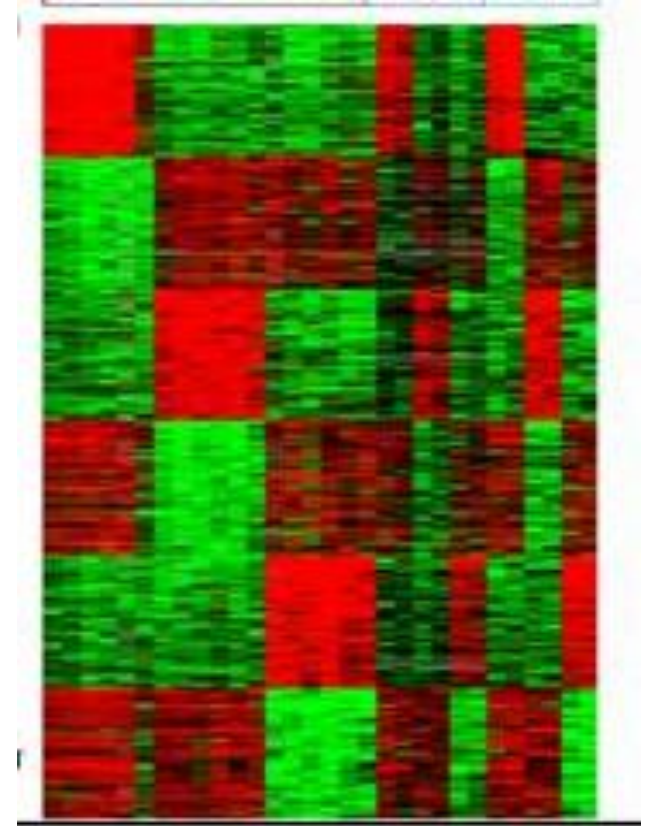


# New Developments in Cancer Treatment

## 4. Prognosis

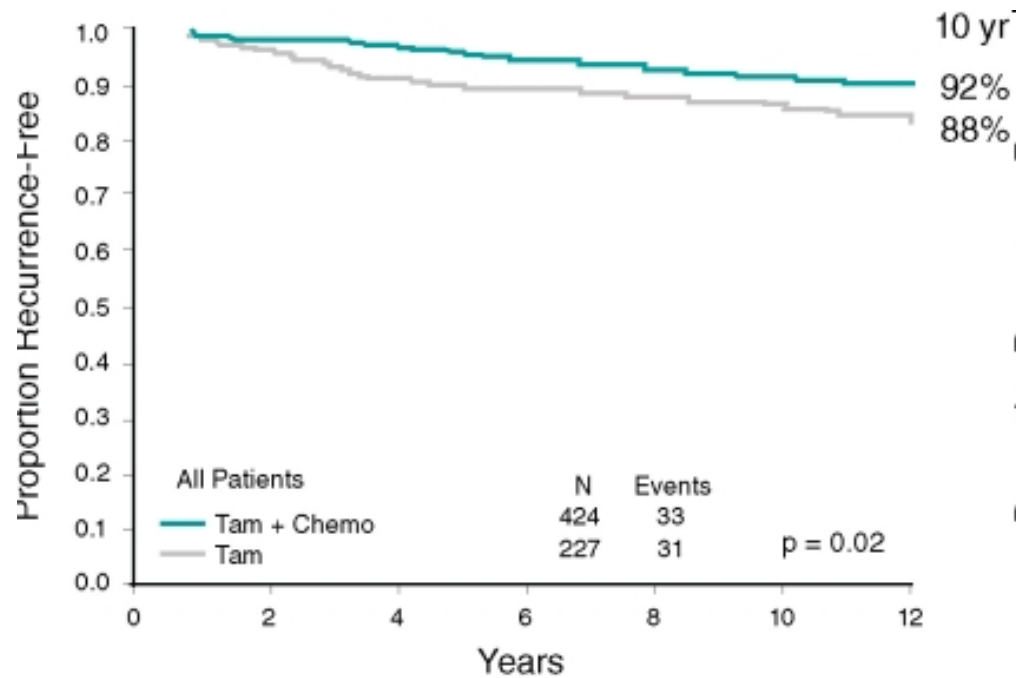
# Micro-array and Oncotype dx

- Women with breast cancer are often offered chemo after definitive surgery removing the primary tumor
- Not all of these patients actually derive benefit from this toxic therapy

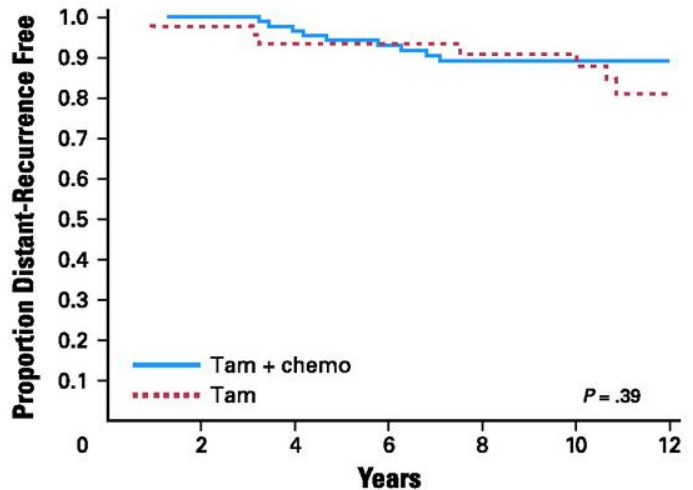




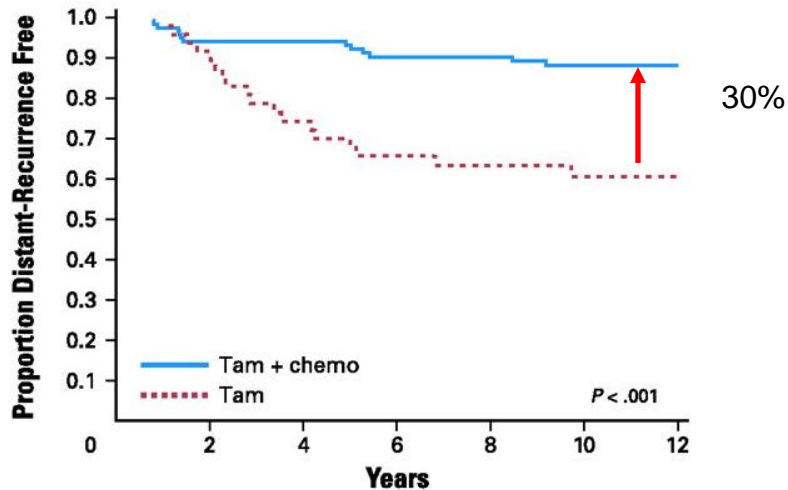
# NSABP B-20 clinical trial (1988-1997). Tamoxifen vs. Tamoxifen + Chemotherapy—All 651 patients.



# Oncotype Dx in Breast Cancer



Low risk subtype:  
Chemo does not help



High risk subtype:  
Chemo helps a lot!

# Reading All the Tumor DNA

- We can find specific mutations in the tumor that could be targeted
- We can classify tumors based on the tumor DNA. This may enable us to find the target that is driving that specific cancer

## CANCER GENOMES COMING FAST

A few examples of fully and partially sequenced cancer genomes and their defining characteristics.

### LUNG CANCER

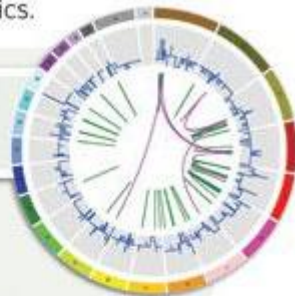
Cancer: small-cell lung carcinoma

- Sequenced: full genome
- Source: NCI-H209 cell line
- Point mutations: 22,910
- Point mutations in gene regions: 134
- Genomic rearrangements: 58
- Copy-number changes: 334

#### Highlights:

Duplication of the *CHD7* gene confirmed in two other small-cell lung carcinoma cell lines.

Source: E. D. Pleasance et al. *Nature* **463**, 184-190 (2010).



### SKIN CANCER

Cancer: metastatic melanoma

- Sequenced: full genome
- Source: COLO-829 cell line
- Point mutations: 33,345
- Point mutations in gene regions: 292
- Genomic rearrangements: 51
- Copy-number changes: 41

#### Highlights:

Patterns of mutation reflect damage by ultraviolet light.

Source: E. D. Pleasance et al. *Nature* **463**, 191-196 (2010).



### BREAST CANCER

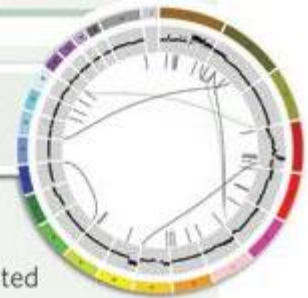
Cancer: basal-like breast cancer

- Sequenced: full genome
- Source: primary tumour, brain metastasis, and tumours transplanted into mice
- Point mutations: 27,173 in primary, 51,710 in metastasis and 109,078 in transplant
- Point mutations in gene regions: 200 in primary, 225 in metastasis, 328 in transplant
- Genomic rearrangements: 34
- Copy-number changes: 155 in primary, 101 in metastasis, 97 in transplant

#### Highlights:

The *CTNNA1* gene encodes a putative suppressor of metastasis that is deleted in all tumour samples.

Source: L. Ding et al. *Nature* **464**, 999-1005 (2010).



### BRAIN CANCER

Cancer: glioblastoma multiforme

- Sequenced: exome (no complete Circos plot)
- Source: 7 patient tumours, 15 tumours transplanted into mice (follow-up sequencing on 21 genes for 83 additional samples)
- Genes containing at least one protein-altering mutation: 685
- Genes containing at least one protein-altering point mutation: 644
- Copy-number changes: 281

#### Highlights:

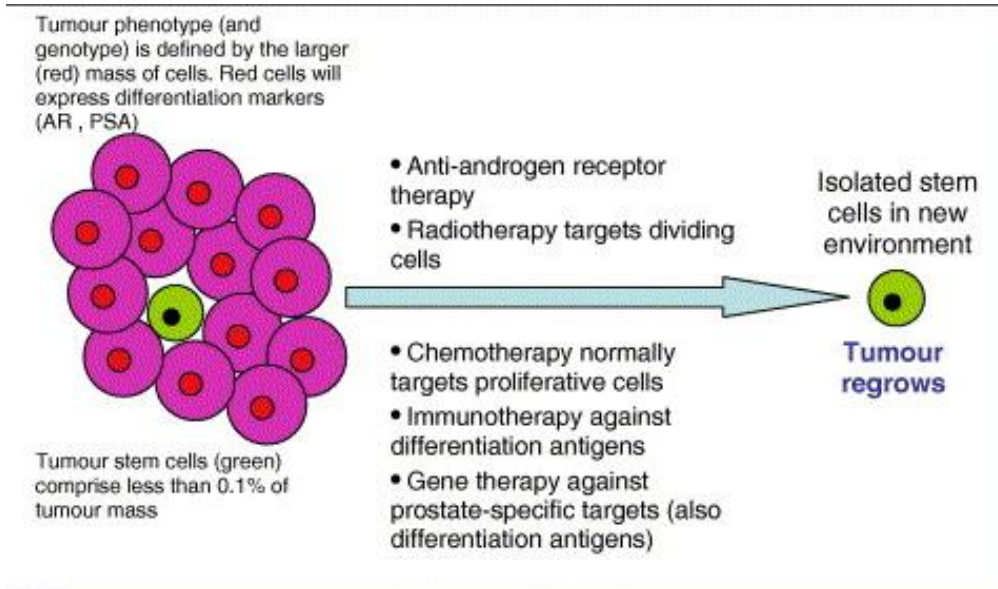
Mutations in the active site of *IDH1* have been found in 12% of patients.

Source: E. R. Mardis et al. *N. Engl. J. Med.* **361**, 1058-1066 (2009).

# Cost of Genome Sequencing

- Human Genome Project cost U.S. taxpayers, about \$2.7 billion in FY 1991 dollars.
- Cost of sequencing a human genome today is ~\$1000-\$5000

# Cancer Stem cell



The root of the cancer tree

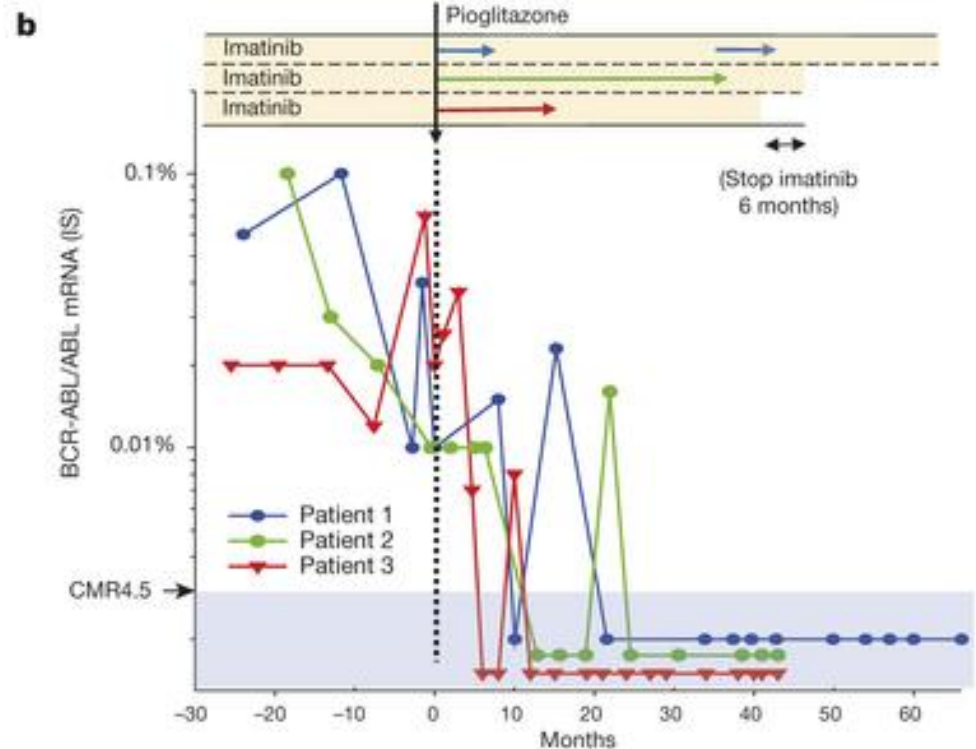
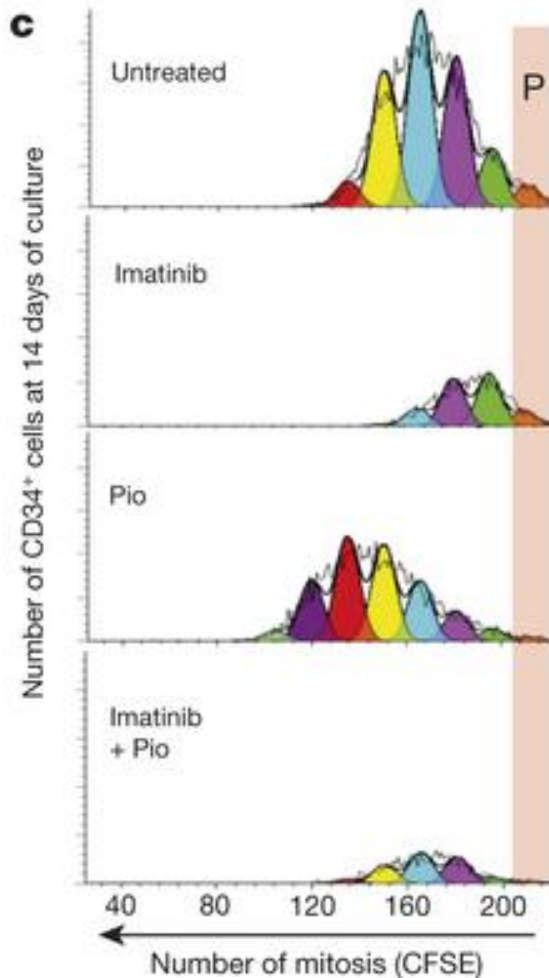


# Cancer stem cells

- Cancer stem cells have been identified for breast, lung, prostate, brain, and leukemia
- Much work needs to be done:
  - characterizing these cells
  - examining their differences to their normal counterparts
  - Developing treatments to eradicate these cells



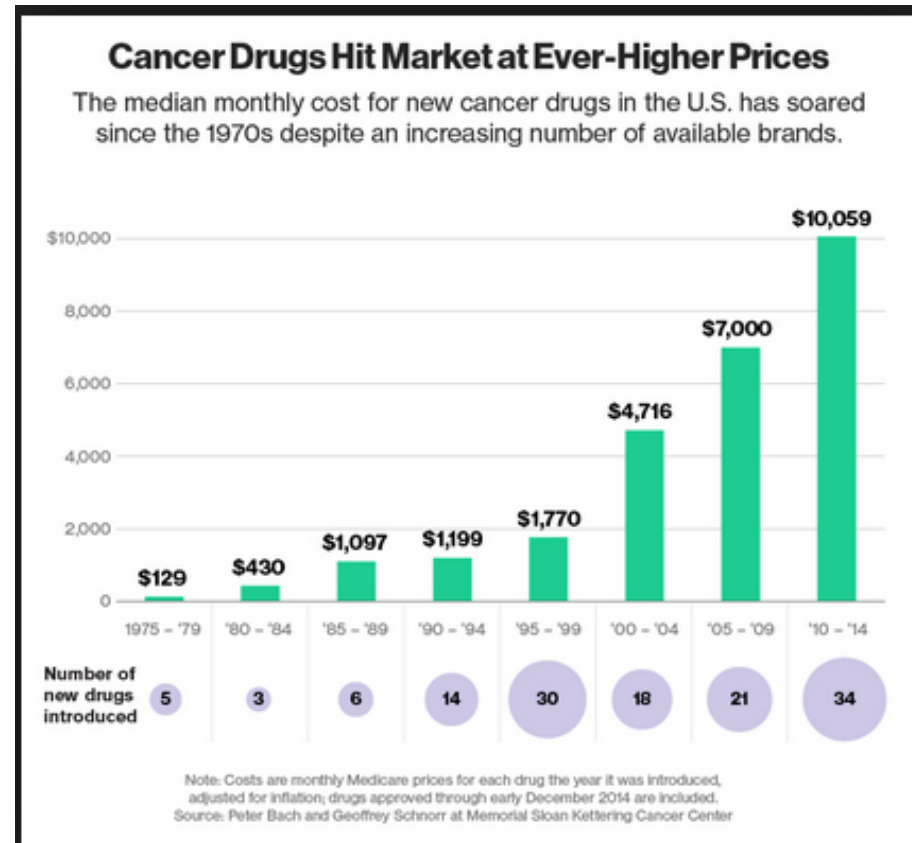
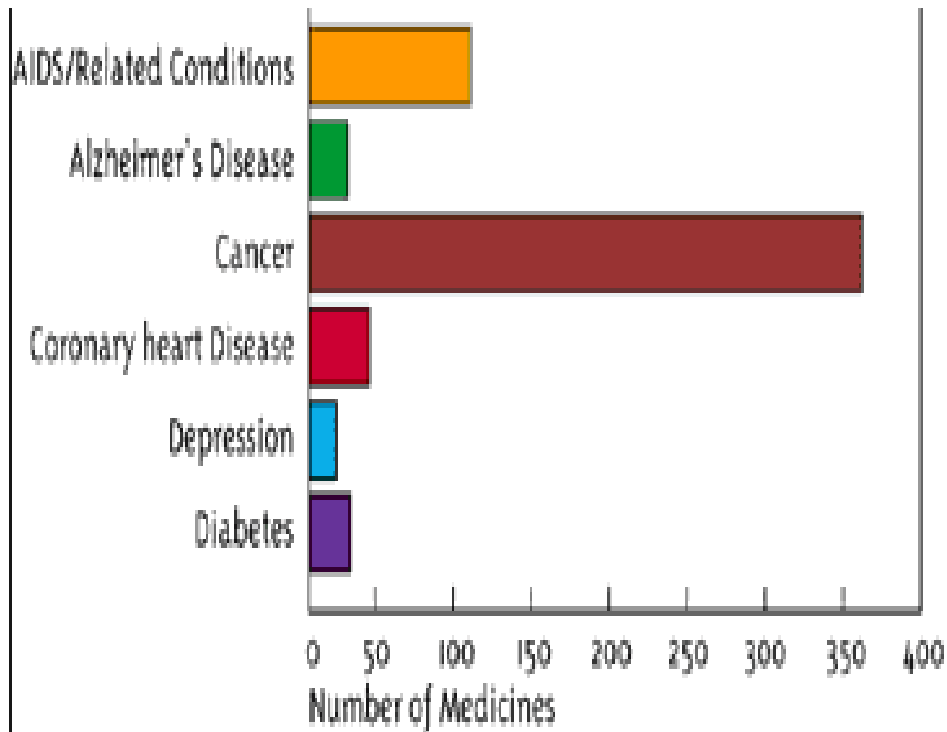
# Imatinib and pioglitazone deplete the CML stem cell



Nature 525,380-383, 2015



# Hope is on the way (but at a cost \$\$\$)



# CANCER RESEARCH & TREATMENT CENTER

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