Anna La Salvia
University of Turin (Italy)
Department of Medical Oncology
San Luigi Gonzaga Hospital, Orbassano (Turin)

Atypical Bronchial Carcinoid: from research to clinical practice
Case presentation

- 56 years, Romanian male
- No relevant medical history, light smoker

- May 2014 Lobectomy and lymph node dissection, R0
- Lung atypical carcinoid, mitotic count 2/10 HPF, Ki67 7%, Chromogranin A and Synaptophysin positive, focal necrosis, TNM pT3 N2 M0

- Asymptomatic
- Systemic adjuvant treatment\(^1,2\): not done,

→ Follow-up started

1. Öberg K et al, Ann Oncol. 2012; 23: vii120-vii123
Clinical management

- After 6 months:
  - ECOG PS 0, no symptoms, no carcinoid syndrome
- Thoracic abdominal CT scan: at least 3 hepatic and 2 bone lesions (L5, VII right costal arch)

- Somatostatin receptor scintigraphy (SRS): positive
Multidisciplinary tumor board

- Excluded surgical/locoregional approaches

- First-line systemic treatment of low proliferation index and positive SRS advanced PCs

- Nov. 2014 Octreotide LAR 30 mg/month IM

- PCs, pulmonary carcinoids

Octreotide LAR, octreotide long-acting repeatable

Clinical management

- After 6 months: Thoracic abdominal CT scan Hepatic Progression of disease, according to RECIST, 1.1
A phase II, multicentre, randomized trial

Efficacy and Safety of Pasireotide LAR or Everolimus Alone or in Combination in Patients With Advanced Carcinoids of the Lung/Thymus

- Radiologic PD within 12 months
- All treatment lines, treatment-naive
- WHO performance status ≤2
LUNA TRIAL

- **BEST RESPONSE**: Stable Disease according to RECIST, 1.1
- After 15 months: Thoracic abdominal CT scan Hepatic and Bone Progression of disease according to RECIST, 1.1

- Somatostatin receptor scintigraphy (SRS): positive
Treatment options

- **Chemotherapy** → Cisplatin+5-Fluorouracil+Streptozotocin\(^3\)
  Oxaliplatin+Capecitabine (XELOX)\(^4\)
  Temozolomide+/-Capecitabine\(^5,6\)

- **PRRT** (Peptide Receptor Radionuclide Therapy)\(^7\)\(^-\)\(^9\)

- **Clinical trial**

---

3. Turner, Br J Cancer. 2010
5. Ekeblad, Clin Cancer Res. 2007
A phase II, multicentre, single arm, open-label trial

ClinicalTrials.gov Identifier: NCT02698410

- Efficacy and safety of Somatuline Autogel (120 mg/month) in combination with temozolomide (240 mg/day for 5 days/month PO), in progressive well differentiated thoracic NET

- Recruiting patients
BEST RESPONSE → Stable disease according to RECIST, 1.1

After 9 months (Apr.2017): Thoracic abdominal CT scan Stable disease according to RECIST, 1.1
Therapies and responses

- **Octreotide LAR**
  - 30 mg/month
- **Everolimus**
  - 10 mg/day
- **Lanreotide ATG**
  - 120 mg/month plus
    - **Temozolomide**
      - 240 mg/day
      - 5 days/month

6 mo  |  PD  |  6 mo  |  PD  |  15 mo  |  PD  |  9 mo

Surgery
Toxicities

Octreotide
- GR.3-4: NONE
- GR.1-2: Fatigue, Nausea

Everolimus
- GR.3-4: NONE
- GR.1-2: Hyperglycemia, Mucositis

Lanreotide + Temozolomide
- GR.3-4: NONE
- GR.1-2: Nausea
Discussion: Atypical bronchial carcinoids (ACs)

- In N+ radically resected ACs: adjuvant systemic therapy?
- In SRS positive metastatic ACs: SSA or Everolimus upfront?
- Has PRRT a role in the metastatic setting?
- Chemotherapy in metastatic ACs, what a preferred option?