2025 DEBATES AND DIDACTICS in Hematology and Oncology



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JULY 24 - 27, 2025 · SEA ISLAND, GEORGIA

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It's all Greek to me! α , β , and γ emitters in NET theranostics

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2025 Debates and Didactics in Hematology and Oncology

Disclosures (24 months)

- Consultant for Exelixis, AbbVie, Harpoon Therapeutics, ITM, Novartis, Crinetics, Amryt, Camurus, Alphamedix, Chimeric Therapeutics.
- Research funded by Chimeric Therapeutics, Novartis, Genentech, ThermoFisher Scientific, ITM, Camurus, RayzeBio.
- I <u>will</u> discuss off-label and/or investigational use.

Objectives

- ✓ Review the current landscape of diagnostic radionuclides in NET.
- ✓ Describe the current standard of care therapeutic radionuclide in NET.
- ✓ Discuss the subtleties of the experimental radionuclide agents in the NET field.

NET 101

- NETs arise from epithelial endocrine cells distributed throughout the lungs, digestive tract, and pancreas.
- Previously called carcinoid tumors because they are "carcinoma-like."
- Characterized by secretory granules and metal salt uptake.
- These granules can be secreted and lead to assorted functional syndromes.
- ~80% express somatostatin receptors



Reproduced with permission from Halperin and Yao, MD Anderson Manual of Medical Oncology, 3e. Histology of NET. A: H&E; B: CgA

Grade, Stage, Primary Site



Metastatic Grade 1-2 NET

Primary Tumor Site	Median Survival (months)
Appendix	NA
Cecum	98
Colon	14
Lung	24
Pancreas	60
Rectum	33
Small Intestine	103
Stomach	29

Yao et al., J Clin Oncol 2008; 26:3063 Dasari et al., JAMA Oncol. 2017 Oct 1;3(10):1335-1342

SSTR Imaging (1 vs 2 γ emissions)

¹²³I-tyr-3-octreotide SPECT (SINGLE photon emission)



⁶⁸Ga-DOTATOC PET (POSITRON emission)





Hofmann et al., Eur J Nucl Med 2001

Krenning et al., Lancet 1989

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Imaging

- Current common PET agents: ⁶⁸Ga-DOTATATE and ⁶⁴Cu-DOTATATE
- ^{68}Ga has a ~68-minute $t_{1/2}$ and sites need a local radiopharmacy
- ⁶⁴Cu has a ~12.7-hour $t_{1/2}$ and can be drop-shipped
- Some technical adjustments are required based on emissions
- Images generally interchangeable
- Physiologic uptake in pituitary, spleen, kidney/bladder, (occasionally uncinate)
- Uptake > liver (or spleen) is the foundation of therapy

Standard of Care

¹⁷⁷Lu-DOTATATE

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β emitting radionuclide



~0.2 keV/µm ~2-12 mm penetration (10 cells/mm)

Dadgar et al., Theranostics 2025

Peptide Receptor Radionuclide Therapy (PRRT) in midgut NET

- NETTER-1
- ¹⁷⁷Lu-DOTA-Octreotate (DOTATATE): a radioactive isotope conjugated to somatostatin analogue.
- Patients with G1-2 midgut NET, PD on octreotide LAR 30, somatostatin-avid.
- ¹⁷⁷Lu-DOTATATE vs. octreotide LAR 60mg.





Strosberg et al., NEJM 2017; 376:125-135

1L ¹⁷⁷Lu-DOTATATE Improves PFS in G2/3 GEP-NET



HR (9	5% CI)	¹⁷⁷ Lu-Dotatate plus octreotide 30 mg LAR (n=151)	High-dose octreotide 60 mg LAR (control grou n=75)
0.26 (0·16–0·45)	30/86 (35%)	30/48 (63%)
0·37 (0.20-0.71)	25/65 (38%)	16/27 (59%)
- 0.30 (0.16-0.55)	26/70 (37%)	19/35 (54%)
- 0.32 (0.18–0.54)	29/81 (36%)	27/40 (68%)
- 0.36 (0.22–0.59)	43/115 (37%)	27/50 (54%)
0.14 (0.05–0.38)	10/23 (43%)	10/11 (91%)
- 0.31 (0.18–0.53)	29/99 (29%)	25/48 (52%)
0.27 (0·14–0·49)	26/52 (50%)	21/27 (78%)
- 0.34 (0·20–0·56)	39/82 (48%)	27/41 (66%)
0.23 (0.12–0.46)	16/69 (23%)	19/34 (56%)
0·30 (0.13–0.74)	11/45 (24%)	10/21 (48%)
0.22 (0.09–0.49)	11/43 (26%)	14/24 (58%)
- 0.33 (0.20-0.53)	39/100 (39%)	28/44 (64%)
0·31 (0.10–0.89)	9/24 (38%)	6/10 (60%)
0.30 (0·19–0·47)	46/123 (37%)	38/62 (61%)
5 1 totatate Favours con	trol		
	HR (9 	HR (95% Cl) 	HR (95% Cl) ¹⁷⁷ Lu-Dotatate plus octreotide 30 mg LAR (n=151) 0-26 (0-16-0-45) 0-37 (0-20-0-71) 30/86 (35%) 25/65 (38%) 0-30 (0-16-0-55) 0-37 (0-20-0-71) 26/70 (37%) 29/81 (36%) 0-36 (0-22-0-59) 0-14 (0-05-0-38) 43/115 (37%) 10/23 (43%) 0-31 (0-18-0-53) 0-27 (0-14-0-49) 29/99 (29%) 26/52 (50%) 0-34 (0-20-0-56) 0-23 (0-12-0-46) 39/82 (48%) 16/69 (23%) 0-30 (0-13-0-74) 0-34 (0-20-0-56) 0-23 (0-12-0-46) 39/82 (48%) 16/69 (23%) 0-30 (0-13-0-74) 0-34 (0-20-0-56) 0-33 (0-20-0-53) 39/100 (39%) 0-31 (0-10-0-89) 0-30 (0-19-0-47) 9/24 (38%) 46/123 (37%) -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1 -5 1

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Singh, Halperin, Meyerhaug et al., Lancet 2024

ORR With ¹⁷⁷Lu-DOTATATE Across Grade and Primary Site

Subgroup	Complete response, n (%)	Partial response, n (%)	Total responders/N	ORR (95% CI)	Odds ratio (95% CI)
NET grade: Grade 2 ¹⁷⁷ Lu-DOTATATE High-dose octreotide	6 (6.1) 0	34 (34.3) 5 (10.4)	40/99 5/48	40.4 (30.7, 50.7) 10.4 (3.5, 22.7)	5.83 (2.12, 16.00)
NET grade: Grade 3 ¹⁷⁷ Lu-DOTATATE High-dose octreotide	2 (3.8) 0	23 (44.2) 2 (7.4)	25/52 2/27	48.1 (34.0, 62.4) 7.4 (0.9, 24.3)	11.57 (2.48, 53.97)
NET origin: Pancreas ¹⁷⁷ Lu-DOTATATE High-dose octreotide	5 (6.1) 0	37 (45.1) 5 (12.2)	42/82 5/41	51.2 (39.9, 62.4) 12.2 (4.1, 26.2)	7.56 (2.70, 21.19)
NET origin: Small intestine ¹⁷⁷ Lu-DOTATATE High-dose octreotide	1 (2.2) 0	11 (24.4) 1 (4.8)	12/45 1/21	26.7 (14.6, 41.9) 4.8 (0.1, 23.8)	7.27 (0.88, 60.24)

Singh et al., ESMO GI 2024

Investigational Radionuclides





¹⁷⁷Lu-edotreotide

- COMPETE (NCT03049189)
- 309 G1-2 GEP-NET patients with PD over 12 months
- ¹⁷⁷Lu-edotreotide (q12w x 4) vs everolimus (2:1)
- (no concurrent SSA)
- Primary EP PFS
- Stratified by primary site and line of tx

- PFS HR 0.67; 95% CI [0.48, 0.95], stratified p= 0.022
- 23.9 vs 14.1 months

Capdevila et al., ENETS 2025

α emitting radionuclide



- ~80 keV/μm
- ~50-100 μ m penetration
 - (1-2 cells)

²¹²Pb-DOTAMTATE in PRRT-naïve patients

Efficacy in PRRT-naïve subjects with metastatic SSTR+ GEP-NETs

	ALPHAMEDIX-01	ALPHAMEDIX-02	Pooled Results 01/02
N (patients)	8†	36	44
ORR	5/8 responders/total	20/36 responders/total	25/44 responders/total
(95% CI)	62.5% ORR (30.6-86.3%)	55.6% ORR (39.6-70.5%)	56.8% ORR (42.2-70.3%)
DoR Median	NE	17 months	NE
DoR months (95 CI#)	15.2 months, NE	17 months, NE	15.2 months, NE
% with observed DOR of \geq 6 months*	100% (5 of 5)	100% (17 of 17)	100% (22 of 22)
% with observed DOR of ≥ 12 months*	100% (4 of 4)	91% (10 of 11)	93% (14 of 15)

Abbreviations : ORR, Overall Response Rate; DOR, Duration of Response Database extraction May 28, 2024 # asymmetrical *Landmark analysis *GEP-NET subjects at RP2D

The combined ORR from both Phase 1 and 2 is 56.8% (95%CI:42.2-70.3%).



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Strosberg et al., GI ASCO 2025

²¹²Pb-DOTAMTATE in PRRT-naïve patients

Safety overview

	ALP	HAMED	X-01 (N	=8)	ALP	AMEDI	X-02 (N	1=36)	Po	oled P1	& P2(N=	44)
Grade 3-4 AEs, n (%)		2	(25%)			21	(58%)			23	(52%)	
SAEs, n (%)		2	(25%)			11	(31%)			13	(30%)	
Fatal AEs, n (%)		-	(0%)			3	(8%)			3	(7%)	
AE Preferred Term (≥6 subjects, n (%))	All g	rades	Grad	e 3-4	All gi	rades	Gra	de 3-4	All g	rades	Grad	le 3-4
Alopecia	8	(100%)	-	(0%)	33	(92%)	-	(0%)	41	(93%)	-	(0%)
Nausea	7	(88%)		(0%)	34	(94%)	1	(3%)	41	(93%)	1	(2%)
Fatigue	5	(63%)	-	(0%)	34	(94%)	2	(6%)	39	(89%)	2	(5%)
Decreased appetite	1	(13%)	-	(0%)	19	(53%)	1	(3%)	20	(45%)	1	(2%)
Diarrhoea	2	(25%)	-	(0%)	18	(50%)	-	(0%)	20	(45%)	-	(0%)
Dysphagia	:-::	(0%)		(0%)	15	(42%)	1	(3%)	15	(34%)	1	(2%)
Lymphocyte count decreased	3	(38%)	2	(25%)	12	(33%)	9	(25%)	15	(34%)	11	(25%)
Abdominal pain	1	(13%)	-	(0%)	13	(36%)	-	(0%)	14	(32%)	-	(0%)
Vomiting	2	(25%)	-	(0%)	11	(31%)	-	(0%)	13	(30%)	-	(0%)
Weight decreased	3	(38%)	-	(0%)	9	(25%)		(0%)	12	(27%)	-	(0%)
Blood glucose increased	3	(38%)	-	(0%)	6	(17%)	-	(0%)	9	(20%)	-	(0%)
Headache	-	(0%)	-	(0%)	7	(19%)	-	(0%)	7	(16%)	-	(0%)
Alanine aminotransferase increased	2	(25%)	-	(0%)	4	(11%)	1	(3%)	6	(14%)	1	(2%)
Haemoglobin decreased	1	(13%)	-	(0%)	5	(14%)	-	(0%)	6	(14%)	-	(0%)
Bone pain	2	(25%)		(0%)	4	(11%)		(0%)	6	(14%)	-	(0%)
Constipation	-	(0%)	-	(0%)	6	(17%)	1	(3%)	6	(14%)	1	(2%)
COVID-19	-	(0%)	-	(0%)	6	(17%)	-	(0%)	6	(14%)	-	(0%)
Eosinophilia	2	(25%)	1.70	(0%)	4	(11%)	-	(0%)	6	(14%)	-	(0%)
Oesophageal pain		(0%)	-	(0%)	6	(17%)	-	(0%)	6	(14%)	-	(0%)



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Strosberg et al., GI ASCO 2025

225Ac-DOTATATE in PRRT-pretreated patients



ORR 29.4% [10-56%]

Strosberg et al., ASCO GI 2025

225Ac-DOTATATE in PRRT-pretreated patients

TABLE 4. Most frequent AEs (occurring in >2 patients)

Patients, n (%)	RYZ101 120 kBq/kg (N=17)	Patients, n (%)	RYZ101 120 kBq/kg (N=17)
Anemia	10 (58.8)	Constipation	4 (23.5)
Nausea	10 (58.8)	Vomiting	4 (23.5)
Fatigue	9 (52.9)	White blood cell count decreased	4 (23.5)
Weight decreased	8 (47.1)	Alopecia	3 (17.6)
Creatinine renal clearance decreased	6 (35.3)	Blood creatinine increased	3 (17.6)
Hyperglycemia	6 (35.3)	Diabetes mellitus	3 (17.6)
Lymphocyte count decreased	6 (35.3)	Diarrhea	3 (17.6)
Abdominal pain	5 (29.4)	Dyspnea	3 (17.6)
Blood alkaline phosphatase increased	5 (29.4)	Hypertension	3 (17.6)
Hyponatremia	5 (29.4)	Hypokalemia	3 (17.6)
Platelet count decreased	5 (29.4)		

Halperin et al., ASCO 2024

Summary

- PET imaging (opposing γ rays) is common with ⁶⁸Ga or ⁶⁴Cu DOTATATE
- Tumor uptake > liver (or spleen) is foundational for therapy
- ¹⁷⁷Lu-DOTATATE is the current standard beta emitter
- Additional α and β radioligands are under study
- Emerging evidence suggests that they are not necessarily interchangeable.

It's all Greek to me! α , β , and γ emitters in NET theranostics

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