

### Peptide Receptor Radionuclide Therapy (PRRT)



CommNETS in collaboration with the Australasian Radiopharmaceutical Trials Network (ARTnet) will soon be asking you to participate in an online survey to help us better understand the current availability and utility of functional imaging and Peptide Receptor Radionuclide Therapy (PRRT) within CommNETS.

At the inaugural CommNETS meeting in late 2015, it became evident that there was considerable variability in access as well as application of functional imaging and PRRT and that this variability was not only evident between countries (Australia, Canada and New Zealand), but also within each country itself.

The aims of the survey are to compare and contrast the availability and accessibility of functional imaging and PRRT within CommNETS countries. We also aim to assess attitudes and barriers to access, as well as differing models of multidisciplinary care and institutional protocols for PRRT. It is hoped that the survey will help focus future research efforts and collaboration.

To collect relevant information, the survey is being conducted in two streams – one for medical oncologists and one for nuclear medicine physicians. The first phase was sent to PRRT centres and the next phase will survey Nuclear Medicine and Oncology centres without PRRT.

**Please look out for the CommNETS survey invitation coming soon!**

**Some of the CommNETS team who contributed to the creation and design of the survey**



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### Endpoints: Trial outcomes

We are working on a project, based on the priorities from the last CommNETS meeting that examines the current endpoints in clinical trials and potential alternative treatment response criteria. Given the often indolent nature of NETs and long patient survival, the continued relevance of RECIST criteria has been questioned. In addition, size-based criteria alone appears to be inadequate for the response assessment of targeted therapies and PRRT which are not necessarily associated with tumour shrinkage but often prolonged progression free survival. To improve the evaluation of treatment response in NETs, composite criteria encompassing morphological, functional and clinical responses need to be explored.