



IndiTreat[®] mCRC Explore

TARGET PATIENTS

The target for the **IndiTreat[®] mCRC Explore** test is patients with metastatic colorectal cancer showing tumor progression after at least two previous lines of drug therapy. The aim of treatment is palliative, with the intention to extend survival and/or improve quality of life.

TREATMENT OPTIONS

When a patient shows disease progression after having received second line therapy, one treatment option is to “re-challenge” with oxaliplatin- or irinotecan-based regimens used in first line. Another option is treatment with drugs recommended as third line in international guidelines. These are the multi-targeted kinase inhibitor **regorafenib** or an oral agent that combines **trifluridine** and **tipiracil**. A third option is to explore if the patient benefits from treatment with approved but off-label drug regimens in colorectal cancer such as **mitomycin C** plus **fluorouracil**, **gemcitabine** plus **fluorouracil** or **temozolomide** plus **irinotecan**.

TREATMENT OUTCOME

In general, overall survival in mCRC beyond second line is low -around 5 months with Standard of Care- and the improvement with the off-label use of drugs is modest.

DRUG REGIMEN	MEDIAN OVERALL SURVIVAL	SOURCE
Regorafenib	6.5 months	Grothey et al. <i>Lancet</i> 2013 Jan 26;381 (9863): 303-12
Trifluridine + Tipiracil	7.1 months	Mayer et al. <i>N Engl J Med</i> 2015 May 14, 372 (20): 1909-19
Mitomycin C + Capecitabine	7.5 months	Petrelli et al. <i>Anticancer Drugs</i> 2016 Jul; 27(6): 488-95
Gemcitabine + Capecitabine	6.5 months	Jiménez-Fonseca et al. <i>Clin Transl Oncol</i> 2015 May; 17(5): 416-7
Temozolomide + Irinotecan	*13.8 months	Morano et al. <i>Ann Oncol</i> 2018 Aug 1; 29(8): 1800-1806

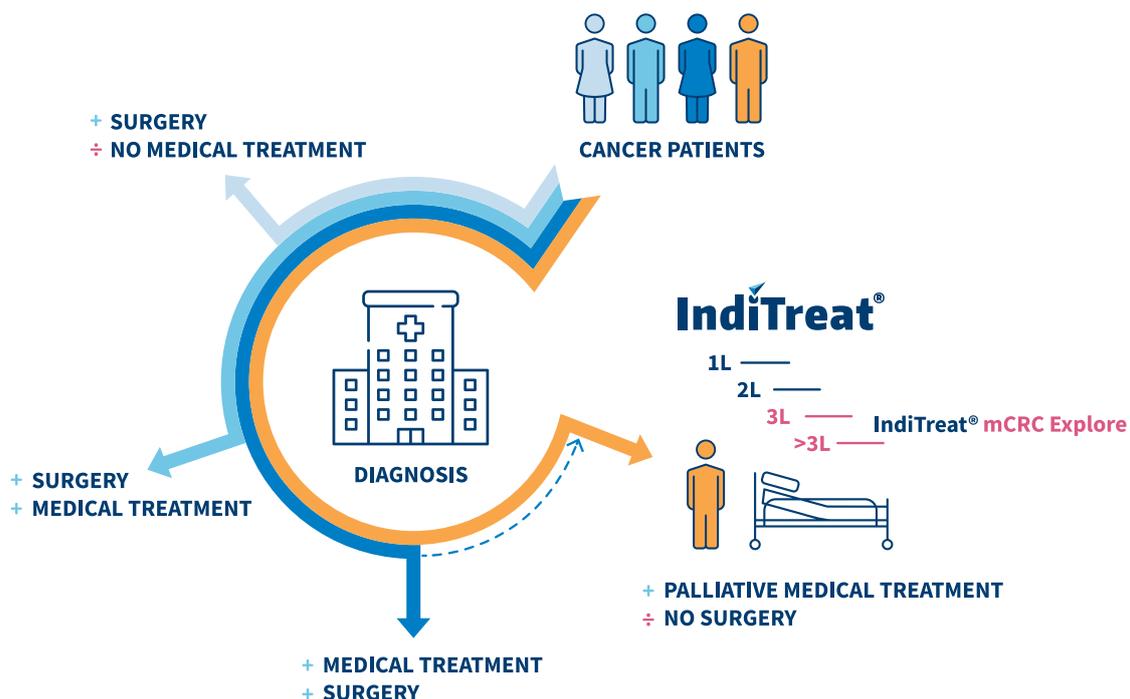
**in irinotecan-sensitive tumors bearing MGMT methylation*

However, the inherent uncertainty of median survival data means that the individual survival of a specific patient will be found within a wide range. The challenge is that there are no biomarkers to predict where in the range a specific patient response will be. Other challenges are that some regimens have significant toxicities and come with financial burden.

VALUE OF GUIDED TREATMENT

The unique value of the **IndiTreat®** test is that the individual patient response is predicted based on tumoroids created from the patient's own tumor sample. This is important for clinical practice, as patients not likely to respond to treatment can be spared an ineffective therapy with troublesome adverse effects. Conversely, patients likely to respond can benefit from a longer Overall Survival than the average one reported in clinical trials.

IndiTreat® mCRC Explore – DRUG PANEL	
Ordering Code: 2CX-01-CRC-03	
Trifluridine + tipiracil	Mitomycin + 5FU
Regorafenib	Temozolamide + irinotecan
Gemcitabine + 5FU	



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