WEBVTT

NOTE duration:"01:22:22" NOTE recognizability:0.854

NOTE language:en-us

NOTE Confidence: 0.83776292

 $00:00:00.000 \longrightarrow 00:00:01.050$ So welcome everyone,

NOTE Confidence: 0.83776292

 $00{:}00{:}01.050 \dashrightarrow 00{:}00{:}03.150$ my name is Doctor Pamela Koons

NOTE Confidence: 0.83776292

 $00{:}00{:}03.150 \dashrightarrow 00{:}00{:}05.419$ and I am a GI medical oncologist.

NOTE Confidence: 0.83776292

 $00:00:05.420 \longrightarrow 00:00:08.516$ I am the director of the Center for

NOTE Confidence: 0.83776292

00:00:08.516 --> 00:00:10.542 Gastrointestinal Cancers at Yale Cancer

NOTE Confidence: 0.83776292

 $00{:}00{:}10.542 \dashrightarrow 00{:}00{:}12.517$ Center and Smilow Cancer Hospital.

NOTE Confidence: 0.83776292

 $00:00:12.520 \longrightarrow 00:00:14.805$ This is our kickoff for

NOTE Confidence: 0.83776292

00:00:14.805 --> 00:00:16.633 our spring CME series.

NOTE Confidence: 0.83776292

 $00:00:16.640 \longrightarrow 00:00:19.240$ For the Center for GI cancers we are

NOTE Confidence: 0.83776292

 $00:00:19.240 \longrightarrow 00:00:20.894$ starting to night on neuroendocrine tumors

NOTE Confidence: 0.83776292

 $00{:}00{:}20.894 \dashrightarrow 00{:}00{:}23.700$ and I will be your host on Thursday,

NOTE Confidence: 0.83776292

 $00:00:23.700 \longrightarrow 00:00:24.300$ April 21st.

NOTE Confidence: 0.83776292

 $00:00:24.300 \longrightarrow 00:00:26.700$ We will have a CME on rectal cancer

00:00:26.767 --> 00:00:28.937 hosted by Doctor Michael Cicchini,

NOTE Confidence: 0.83776292

 $00:00:28.940 \longrightarrow 00:00:31.090$ and on Thursday, May 19th.

NOTE Confidence: 0.83776292

 $00{:}00{:}31.090 \dashrightarrow 00{:}00{:}33.176$ We will have a CME on gastric

NOTE Confidence: 0.83776292

00:00:33.176 --> 00:00:35.220 cancers hosted by Doctor Jill Lacy.

NOTE Confidence: 0.92255316

 $00:00:37.530 \longrightarrow 00:00:41.345$ So this evening I have the pleasure

NOTE Confidence: 0.92255316

00:00:41.345 --> 00:00:43.858 of hosting and moderating this

NOTE Confidence: 0.92255316

00:00:43.858 --> 00:00:45.826 talk on neuroendocrine tumors.

NOTE Confidence: 0.92255316

00:00:45.830 --> 00:00:49.304 I will be giving a brief overview of Nets

NOTE Confidence: 0.92255316

 $00:00:49.310 \hspace{0.1in} --> \hspace{0.1in} 00:00:51.518 \hspace{0.1in} 101 \hspace{0.1in} and \hspace{0.1in} then \hspace{0.1in} we'll \hspace{0.1in} help \hspace{0.1in} moderate \hspace{0.1in} the$

Q&A.

NOTE Confidence: 0.92255316

00:00:51.520 --> 00:00:53.430 I'm joined by Doctor Miriam,

NOTE Confidence: 0.92255316

 $00{:}00{:}53.430 \dashrightarrow 00{:}00{:}55.560$ a boy and an assistant professor

NOTE Confidence: 0.92255316

 $00:00:55.560 \longrightarrow 00:00:57.610$ of radiology and nuclear medicine,

NOTE Confidence: 0.92255316

 $00{:}00{:}57.610 \dashrightarrow 00{:}00{:}59.590$ and she will be speaking about

NOTE Confidence: 0.92255316

 $00:00:59.590 \longrightarrow 00:01:01.721$ the role of molecular imaging and

NOTE Confidence: 0.92255316

 $00{:}01{:}01{:}01{.}721 \dashrightarrow 00{:}01{:}03{.}935$ the ranostics in care of patients with

00:01:03.935 --> 00:01:06.772 Nets and doctor Saj Khan and associate

NOTE Confidence: 0.92255316

 $00{:}01{:}06.772 \dashrightarrow 00{:}01{:}08.807$ professor of surgery and surgical.

NOTE Confidence: 0.92255316

 $00:01:08.810 \longrightarrow 00:01:10.638$ Allergy and Section chief

NOTE Confidence: 0.92255316

00:01:10.638 --> 00:01:12.009 of Hepato Pancreato,

NOTE Confidence: 0.92255316

00:01:12.010 --> 00:01:14.266 biliary and mixed tumors will be

NOTE Confidence: 0.92255316

00:01:14.266 --> 00:01:16.688 joining us this evening and talking

NOTE Confidence: 0.92255316

 $00:01:16.688 \longrightarrow 00:01:18.380$ about the surgical management

NOTE Confidence: 0.92255316

 $00:01:18.380 \longrightarrow 00:01:20.750$ of pancreas and small foulness.

NOTE Confidence: 0.92255316

 $00{:}01{:}20.750 \longrightarrow 00{:}01{:}22.649$ So I will just go ahead and get started,

NOTE Confidence: 0.92255316

 $00:01:22.650 \longrightarrow 00:01:24.786$ so I'm just for our audience.

NOTE Confidence: 0.92255316

00:01:24.790 --> 00:01:27.166 Each of our talks will be about 20 minutes.

NOTE Confidence: 0.92255316

00:01:27.170 --> 00:01:28.994 Please feel free to put questions

NOTE Confidence: 0.92255316

 $00:01:28.994 \longrightarrow 00:01:32.060$ in the chat or Q&A throughout.

NOTE Confidence: 0.92255316

 $00:01:32.060 \longrightarrow 00:01:34.130$ We will try to respond with

NOTE Confidence: 0.92255316

 $00:01:34.130 \longrightarrow 00:01:35.510$ a typed response throughout,

NOTE Confidence: 0.92255316

00:01:35.510 --> 00:01:38.759 but we will also have time at the end

 $00:01:38.759 \to 00:01:42.288$ for a through Q&A and you can ask

them.

NOTE Confidence: 0.92255316

 $00:01:42.290 \longrightarrow 00:01:44.818$ These are my disclosures,

NOTE Confidence: 0.92255316

 $00{:}01{:}44.820 \dashrightarrow 00{:}01{:}47.196$ so I'm going to talk briefly about the

NOTE Confidence: 0.92255316

 $00{:}01{:}47.196 \dashrightarrow 00{:}01{:}48.990$ epidemiology and nomenclature of Nets.

NOTE Confidence: 0.92255316

 $00:01:48.990 \longrightarrow 00:01:51.355$ Talk about characteristics that I

NOTE Confidence: 0.92255316

 $00:01:51.355 \longrightarrow 00:01:53.720$ think really impact treatment selection

NOTE Confidence: 0.92255316

00:01:53.792 --> 00:01:56.048 for patients and then talk about

NOTE Confidence: 0.92255316

 $00:01:56.048 \longrightarrow 00:01:58.529$ treatment for hormone and tumor control.

NOTE Confidence: 0.92255316

00:01:58.530 --> 00:02:00.805 I usually like starting with a little

NOTE Confidence: 0.92255316

 $00{:}02{:}00.805 \dashrightarrow 00{:}02{:}02.415$ bit of history so neuroendocrine

NOTE Confidence: 0.92255316

 $00:02:02.415 \longrightarrow 00:02:04.640$ tumors and the description of

NOTE Confidence: 0.92255316

00:02:04.640 --> 00:02:07.570 Nets goes back to the late 1800s,

NOTE Confidence: 0.92255316

 $00:02:07.570 \longrightarrow 00:02:10.900$ and it was really in the early 1900s that.

NOTE Confidence: 0.92255316

 $00{:}02{:}10.900 \dashrightarrow 00{:}02{:}13.990$ Doctor Urban door for a German

NOTE Confidence: 0.92255316

 $00:02:13.990 \longrightarrow 00:02:16.718$ pathologist coined the term carcinoid.

00:02:16.720 --> 00:02:18.904 It meant cancer like and he described

NOTE Confidence: 0.92255316

 $00:02:18.904 \longrightarrow 00:02:21.475$ and felt that there were five key

NOTE Confidence: 0.92255316

 $00:02:21.475 \longrightarrow 00:02:23.039$ characteristics that they were.

NOTE Confidence: 0.92255316

 $00:02:23.040 \longrightarrow 00:02:26.262$ These tumors were small and multifocal

NOTE Confidence: 0.92255316

 $00:02:26.262 \longrightarrow 00:02:28.410$ had undifferentiated cellular formations,

NOTE Confidence: 0.92255316

 $00:02:28.410 \longrightarrow 00:02:30.058$ had well defined borders,

NOTE Confidence: 0.92255316

00:02:30.058 --> 00:02:31.294 no metastatic potential,

NOTE Confidence: 0.92255316

00:02:31.300 --> 00:02:33.376 and were slow growing and harmless,

NOTE Confidence: 0.92255316

 $00:02:33.380 \longrightarrow 00:02:36.230$ and though he contributed really important

NOTE Confidence: 0.92255316

 $00:02:36.230 \longrightarrow 00:02:38.760$ early knowledge about this disease,

NOTE Confidence: 0.92255316

 $00:02:38.760 \longrightarrow 00:02:41.294$ we now know that many of these

NOTE Confidence: 0.92255316

 $00{:}02{:}41.300 \dashrightarrow 00{:}02{:}43.020$ characteristics are not true.

NOTE Confidence: 0.92255316

 $00{:}02{:}43.020 \dashrightarrow 00{:}02{:}45.600$ And I think the term carcinoid

NOTE Confidence: 0.92255316

00:02:45.681 --> 00:02:47.240 and cancer like, unfortunately,

NOTE Confidence: 0.92255316

 $00:02:47.240 \longrightarrow 00:02:50.520$ really slowed the field in terms of our

 $00:02:50.520 \longrightarrow 00:02:52.920$ recognition that these are in fact cancers.

NOTE Confidence: 0.92255316

 $00{:}02{:}52.920 \dashrightarrow 00{:}02{:}55.278$ The term carcinoid is really fallen

NOTE Confidence: 0.92255316

 $00{:}02{:}55.278 \dashrightarrow 00{:}02{:}58.276$ out of favor and instead we are

NOTE Confidence: 0.92255316

 $00:02:58.276 \longrightarrow 00:03:00.546$ using the term neuroendocrine tumor

NOTE Confidence: 0.92255316

 $00:03:00.546 \longrightarrow 00:03:03.199$ and then by which primary site.

NOTE Confidence: 0.92255316

 $00:03:03.200 \longrightarrow 00:03:06.360$ So we have seen an explosion of advances,

NOTE Confidence: 0.92255316

 $00:03:06.360 \longrightarrow 00:03:08.548$ both the rapeutics and diagnostics

NOTE Confidence: 0.92255316

 $00:03:08.548 \longrightarrow 00:03:10.189$ really since 2011.

NOTE Confidence: 0.92255316

 $00{:}03{:}10.190 --> 00{:}03{:}12.731$ So in the 1980s we had strept

NOTE Confidence: 0.92255316

00:03:12.731 --> 00:03:15.339 Zosyn and Ivy alkylating agent,

NOTE Confidence: 0.92255316

 $00{:}03{:}15.340 \dashrightarrow 00{:}03{:}17.780$ and octreotide that was initially

NOTE Confidence: 0.92255316

 $00:03:17.780 \longrightarrow 00:03:19.732$ approved for hormone control,

NOTE Confidence: 0.92255316

 $00:03:19.740 \longrightarrow 00:03:23.198$ and then since 2011 we have had

NOTE Confidence: 0.92255316

 $00:03:23.198 \longrightarrow 00:03:25.958$ therapeutic advances in the areas

NOTE Confidence: 0.92255316

 $00:03:25.958 \longrightarrow 00:03:29.516$ of biologics of everolimus and snib

NOTE Confidence: 0.92255316

 $00:03:29.516 \longrightarrow 00:03:31.960$ somatostatin analogs of lanreotide

 $00:03:31.960 \longrightarrow 00:03:33.586$ to look just at for carcinoid.

NOTE Confidence: 0.92255316

 $00{:}03{:}33.590 --> 00{:}03{:}36.670$ Syndrome, Ludo date in 2018.

NOTE Confidence: 0.92255316

 $00:03:36.670 \longrightarrow 00:03:39.316$ We'll talk about some of the.

NOTE Confidence: 0.92255316

 $00:03:39.320 \longrightarrow 00:03:41.552$ Other systemic agents and then also

NOTE Confidence: 0.92255316

00:03:41.552 --> 00:03:43.919 some of the imaging agents that

NOTE Confidence: 0.92255316

 $00:03:43.919 \longrightarrow 00:03:45.944$ are listed above the timeline.

NOTE Confidence: 0.92255316

 $00:03:45.950 \longrightarrow 00:03:49.182$ I like also sort of nailing down the

NOTE Confidence: 0.92255316

 $00:03:49.182 \longrightarrow 00:03:52.665$ point that Nets are really not that rare,

NOTE Confidence: 0.92255316

 $00:03:52.670 \longrightarrow 00:03:54.428$ so they are rare by incidents,

NOTE Confidence: 0.92255316

 $00:03:54.430 \longrightarrow 00:03:57.196$ so incidents being the number of

NOTE Confidence: 0.92255316

 $00:03:57.196 \longrightarrow 00:03:59.793$ patients diagnosed per year and for

NOTE Confidence: 0.92255316

00:03:59.793 --> 00:04:02.497 this is based on a large Sears study

NOTE Confidence: 0.905978501333333

 $00{:}04{:}02.575 \dashrightarrow 00{:}04{:}04.969$ conducted in 2017 and the incidence

NOTE Confidence: 0.905978501333333

 $00:04:04.969 \longrightarrow 00:04:07.646$ rate for Nets is about 7 per 100,000

NOTE Confidence: 0.905978501333333

 $00:04:07.646 \longrightarrow 00:04:10.214$ and this is in the yellow line on the

 $00:04:10.214 \longrightarrow 00:04:12.002$ figure compared to the blue line,

NOTE Confidence: 0.905978501333333

 $00:04:12.010 \longrightarrow 00:04:14.044$ which is the incidence of all

NOTE Confidence: 0.905978501333333

 $00:04:14.044 \longrightarrow 00:04:15.400$ malignant neoplasms which has

NOTE Confidence: 0.905978501333333

00:04:15.465 --> 00:04:17.019 remained relatively stable.

NOTE Confidence: 0.905978501333333

 $00:04:17.020 \longrightarrow 00:04:19.465$ However, the the prevalence of

NOTE Confidence: 0.905978501333333

00:04:19.465 --> 00:04:21.910 neuroendocrine tumors is actually the

NOTE Confidence: 0.905978501333333

 $00:04:21.991 \longrightarrow 00:04:24.881$ second highest prevalent GI malignancy.

NOTE Confidence: 0.905978501333333

00:04:24.881 --> 00:04:28.016 It exceeds stomach and pancreatic

NOTE Confidence: 0.905978501333333

00:04:28.016 --> 00:04:29.270 adenocarcinoma combined,

NOTE Confidence: 0.905978501333333

 $00:04:29.270 \longrightarrow 00:04:31.930$ and that's likely because this is a

NOTE Confidence: 0.905978501333333

 $00:04:31.930 \longrightarrow 00:04:33.847$ more indolent disease and patients

NOTE Confidence: 0.905978501333333

00:04:33.847 --> 00:04:36.788 live for many years more commonly with

NOTE Confidence: 0.905978501333333

 $00:04:36.788 \longrightarrow 00:04:39.318$ the low grade neuroendocrine tumors.

NOTE Confidence: 0.905978501333333

 $00:04:39.320 \longrightarrow 00:04:41.196$ Nets are epithelial neoplasms

NOTE Confidence: 0.905978501333333

 $00:04:41.196 \longrightarrow 00:04:43.072$ derived from neuroendocrine cells

NOTE Confidence: 0.905978501333333

 $00:04:43.072 \longrightarrow 00:04:44.380$ throughout the body,

00:04:44.380 --> 00:04:46.375 most commonly found in the GI tract,

NOTE Confidence: 0.905978501333333

 $00{:}04{:}46.380 \dashrightarrow 00{:}04{:}48.860$ but also in the lungs and other sites,

NOTE Confidence: 0.905978501333333

 $00:04:48.860 \longrightarrow 00:04:51.450$ and most grow slowly in comparison with

NOTE Confidence: 0.905978501333333

 $00:04:51.450 \longrightarrow 00:04:52.560$ their adenocarcinoma counterparts.

NOTE Confidence: 0.905978501333333

 $00:04:52.560 \longrightarrow 00:04:54.852$ The majority are sporadic and the

NOTE Confidence: 0.905978501333333

 $00:04:54.852 \longrightarrow 00:04:56.784$ minority are associated with familial

NOTE Confidence: 0.905978501333333

 $00:04:56.784 \longrightarrow 00:04:59.508$ syndromes such as me and 1,000,000 two.

NOTE Confidence: 0.905978501333333 00:04:59.508 --> 00:05:00.536 Von Hippel,

NOTE Confidence: 0.905978501333333

 $00:05:00.536 \longrightarrow 00:05:02.078$ Lindau and Neurofibromatosis

NOTE Confidence: 0.905978501333333

 $00{:}05{:}02.078 \dashrightarrow 00{:}05{:}04.502$ pathognomonic for this disease is

NOTE Confidence: 0.905978501333333

 $00{:}05{:}04.502 \dashrightarrow 00{:}05{:}06.542$ the fact that somatostatin receptors

NOTE Confidence: 0.905978501333333

 $00:05:06.542 \longrightarrow 00:05:08.710$ are present on the cell surface

NOTE Confidence: 0.905978501333333

 $00:05:08.710 \longrightarrow 00:05:10.443$ in about 80 to 90%.

NOTE Confidence: 0.905978501333333 00:05:10.443 --> 00:05:11.569 Of netson, NOTE Confidence: 0.905978501333333

 $00:05:11.569 \longrightarrow 00:05:14.384$ this is typically with somatostatin

 $00:05:14.384 \longrightarrow 00:05:15.770$ receptor type 2.

NOTE Confidence: 0.905978501333333

 $00{:}05{:}15.770 \dashrightarrow 00{:}05{:}17.464$ The diagnostic work up and I will

NOTE Confidence: 0.905978501333333

00:05:17.464 --> 00:05:19.544 say if you take away one thing from

NOTE Confidence: 0.905978501333333

 $00:05:19.544 \longrightarrow 00:05:21.213$ this is that the cross sectional

NOTE Confidence: 0.905978501333333

 $00:05:21.213 \longrightarrow 00:05:23.446$ imaging is really the mainstay of how

NOTE Confidence: 0.905978501333333

 $00:05:23.446 \longrightarrow 00:05:25.874$ we monitor the patients with Nets.

NOTE Confidence: 0.905978501333333

 $00{:}05{:}25.874 \dashrightarrow 00{:}05{:}28.550$ Either a multiphasic CT and that

NOTE Confidence: 0.905978501333333

 $00:05:28.636 \longrightarrow 00:05:30.826$ arterial phase is critical if

NOTE Confidence: 0.905978501333333

 $00:05:30.826 \longrightarrow 00:05:33.580$ you're ordering a CT scan or an

NOTE Confidence: 0.905978501333333

 $00:05:33.580 \longrightarrow 00:05:34.546$ MRI somatostatin receptor.

NOTE Confidence: 0.905978501333333

 $00{:}05{:}34.546 \dashrightarrow 00{:}05{:}36.724$ Imaging is important but is not

NOTE Confidence: 0.905978501333333

 $00:05:36.724 \longrightarrow 00:05:38.546$ the primary modality with which

NOTE Confidence: 0.905978501333333

 $00:05:38.546 \longrightarrow 00:05:39.930$ we image these patients.

NOTE Confidence: 0.905978501333333

 $00:05:39.930 \longrightarrow 00:05:41.946$ These are done commonly at time of

NOTE Confidence: 0.905978501333333

 $00:05:41.946 \longrightarrow 00:05:43.540$ diagnosis and for patients with

NOTE Confidence: 0.905978501333333

 $00{:}05{:}43.540 \dashrightarrow 00{:}05{:}45.538$ metastatic disease we may do them.

00:05:45.540 --> 00:05:47.650 Annually or every two years,

NOTE Confidence: 0.905978501333333

 $00:05:47.650 \longrightarrow 00:05:49.204$ somatostatin receptor imaging

NOTE Confidence: 0.905978501333333

 $00:05:49.204 \longrightarrow 00:05:52.180$ is now used with gallium 68,

NOTE Confidence: 0.905978501333333

 $00:05:52.180 \longrightarrow 00:05:53.980$ dotatate pet or copper 64,

NOTE Confidence: 0.905978501333333

 $00:05:53.980 \longrightarrow 00:05:55.380$ and I'm going to actually.

NOTE Confidence: 0.905978501333333

 $00:05:55.380 \longrightarrow 00:05:56.856$ This will be a little bit of a teaser.

NOTE Confidence: 0.905978501333333

 $00:05:56.860 \longrightarrow 00:05:58.603$ I'm going to let doctor a boy

NOTE Confidence: 0.905978501333333

 $00{:}05{:}58.603 \mathrel{--}{>} 00{:}06{:}00.380$ and talk more about somatostatin

NOTE Confidence: 0.905978501333333

 $00:06:00.380 \longrightarrow 00:06:01.838$ receptor based imaging.

NOTE Confidence: 0.905978501333333

 $00{:}06{:}01.840 \dashrightarrow 00{:}06{:}03.856$ The tissue diagnosis we like to

NOTE Confidence: 0.905978501333333

 $00:06:03.856 \longrightarrow 00:06:06.182$ know the primary site if we can

NOTE Confidence: 0.905978501333333

 $00:06:06.182 \longrightarrow 00:06:08.006$ identify it and four key data

NOTE Confidence: 0.905978501333333

 $00{:}06{:}08.006 \dashrightarrow 00{:}06{:}09.963$ elements are important when you're

NOTE Confidence: 0.905978501333333

 $00:06:09.963 \longrightarrow 00:06:11.938$ looking at a pathology report.

NOTE Confidence: 0.905978501333333

 $00:06:11.940 \dashrightarrow 00:06:16.357$ The Who grade Ki 67 mitotic index.

 $00:06:16.360 \longrightarrow 00:06:17.371$ Degree of differentiation.

NOTE Confidence: 0.905978501333333

 $00:06:17.371 \longrightarrow 00:06:19.730$ We'll talk about that in a moment.

NOTE Confidence: 0.905978501333333

 $00:06:19.730 \longrightarrow 00:06:21.686$ And then tumor markers or hormones

NOTE Confidence: 0.905978501333333

 $00:06:21.686 \longrightarrow 00:06:23.510$ are important for this disease,

NOTE Confidence: 0.905978501333333

 $00:06:23.510 \longrightarrow 00:06:27.062$ but I will say that tumor markers such

NOTE Confidence: 0.905978501333333

00:06:27.062 --> 00:06:29.623 as chromogranin or neuron specific

NOTE Confidence: 0.905978501333333

 $00{:}06{:}29.623 \dashrightarrow 00{:}06{:}32.245$ enolase or pancreas statin often

NOTE Confidence: 0.905978501333333

00:06:32.245 --> 00:06:35.275 fluctuate and may not actually track

NOTE Confidence: 0.905978501333333

 $00:06:35.275 \longrightarrow 00:06:38.220$ with what's happening radiographically.

NOTE Confidence: 0.905978501333333

 $00:06:38.220 \longrightarrow 00:06:41.166$ The field has swung away from

NOTE Confidence: 0.905978501333333

 $00{:}06{:}41.166 \dashrightarrow 00{:}06{:}43.645$ using these and I often don't use

NOTE Confidence: 0.905978501333333

00:06:43.645 --> 00:06:45.546 chroma granite a now because really

NOTE Confidence: 0.905978501333333

 $00:06:45.546 \longrightarrow 00:06:47.598$ the gold standard is the imaging.

NOTE Confidence: 0.905978501333333

 $00:06:47.600 \longrightarrow 00:06:48.177$ Hormones,

NOTE Confidence: 0.905978501333333

 $00:06:48.177 \longrightarrow 00:06:48.754$ however,

NOTE Confidence: 0.905978501333333

00:06:48.754 --> 00:06:54.000 such as serotonin or 24 hour urine 5 hiaa,

 $00:06:54.000 \longrightarrow 00:06:56.219$ which is a byproduct or a metabolite

NOTE Confidence: 0.90597850133333300:06:56.219 --> 00:06:56.853 of serotonin.

NOTE Confidence: 0.905978501333333

 $00:06:56.860 \longrightarrow 00:07:00.486$ Those can be useful and should be

NOTE Confidence: 0.905978501333333

00:07:00.486 --> 00:07:01.522 tracked overtime.

NOTE Confidence: 0.905978501333333

 $00:07:01.530 \longrightarrow 00:07:05.193$ So I find that there are really six key

NOTE Confidence: 0.905978501333333

 $00:07:05.193 \longrightarrow 00:07:07.104$ characteristics that impact treatment

NOTE Confidence: 0.905978501333333

00:07:07.104 --> 00:07:09.948 hormone status stage and burden of

NOTE Confidence: 0.905978501333333

 $00{:}07{:}09.948 \dashrightarrow 00{:}07{:}12.428$ disease grade and differentiation.

NOTE Confidence: 0.905978501333333

00:07:12.430 --> 00:07:13.642 Pace of growth,

NOTE Confidence: 0.905978501333333

 $00:07:13.642 \longrightarrow 00:07:15.258$ primary site and somatostatin

NOTE Confidence: 0.905978501333333

 $00:07:15.258 \longrightarrow 00:07:16.066$ receptor status.

NOTE Confidence: 0.905978501333333

00:07:16.070 --> 00:07:17.967 I'll spend just a moment on each

NOTE Confidence: 0.905978501333333

00:07:17.967 --> 00:07:19.583 of these just to really set

NOTE Confidence: 0.905978501333333

 $00:07:19.583 \longrightarrow 00:07:21.312$ the stage in terms of how we

NOTE Confidence: 0.926439371785714

 $00:07:21.378 \longrightarrow 00:07:23.108$ talk about and think about

 $00:07:23.108 \longrightarrow 00:07:24.146$ treatments for nuts.

NOTE Confidence: 0.926439371785714

 $00:07:24.150 \longrightarrow 00:07:27.246$ So a functional neuroendocrine tumor is

NOTE Confidence: 0.926439371785714

00:07:27.246 --> 00:07:30.348 defined as a patient who has symptoms

NOTE Confidence: 0.926439371785714

 $00:07:30.348 \longrightarrow 00:07:32.078$ from a measurable hormone that's

NOTE Confidence: 0.926439371785714

 $00:07:32.078 \longrightarrow 00:07:34.188$ in either the urine or the blood.

NOTE Confidence: 0.926439371785714

 $00:07:34.190 \longrightarrow 00:07:35.950$ Carcinoid syndrome is a

NOTE Confidence: 0.926439371785714

 $00:07:35.950 \longrightarrow 00:07:37.710$ classic example of that.

NOTE Confidence: 0.926439371785714

 $00:07:37.710 \longrightarrow 00:07:39.858$ 10% of patients with small intestine

NOTE Confidence: 0.926439371785714

 $00{:}07{:}39.858 \dashrightarrow 00{:}07{:}41.290$ Nets have carcinoid syndrome,

NOTE Confidence: 0.926439371785714

00:07:41.290 --> 00:07:44.274 and it's due to production of peptides and

NOTE Confidence: 0.926439371785714

 $00:07:44.274 \longrightarrow 00:07:47.367$ am means such as serotonin or five hiaa,

NOTE Confidence: 0.926439371785714

00:07:47.370 --> 00:07:49.884 and it can cause Flushing Venus

NOTE Confidence: 0.926439371785714

 $00{:}07{:}49.884 \dashrightarrow 00{:}07{:}52.023$ telangiectasis as shown in this

NOTE Confidence: 0.926439371785714

00:07:52.023 --> 00:07:54.315 picture on on the left diarrhea.

NOTE Confidence: 0.926439371785714

00:07:54.320 --> 00:07:56.768 Bronchospasm, valvular fibrosis,

NOTE Confidence: 0.926439371785714

 $00:07:56.768 \longrightarrow 00:07:58.400$ and hypotension.

 $00:07:58.400 \longrightarrow 00:08:00.928$ This is also a picture of a of

NOTE Confidence: 0.926439371785714

00:08:00.928 --> 00:08:02.540 the pulmonary and tricuspid

NOTE Confidence: 0.926439371785714

 $00:08:02.540 \longrightarrow 00:08:04.800$ valves that are very fibrotic.

NOTE Confidence: 0.926439371785714

 $00:08:04.800 \longrightarrow 00:08:07.425$ Pancreatic neuroendocrine tumors can also

NOTE Confidence: 0.926439371785714

00:08:07.425 --> 00:08:11.078 secrete hormones in about 40\% of patients,

NOTE Confidence: 0.926439371785714

00:08:11.078 --> 00:08:12.626 most commonly insulin,

NOTE Confidence: 0.926439371785714

 $00:08:12.630 \longrightarrow 00:08:14.580$ followed by gastrin,

NOTE Confidence: 0.926439371785714

 $00{:}08{:}14.580 \dashrightarrow 00{:}08{:}17.830$ Glucagon and vaso intestinal polypeptide,

NOTE Confidence: 0.926439371785714

 $00:08:17.830 \longrightarrow 00:08:20.154$ and the symptoms are really defined by

NOTE Confidence: 0.926439371785714

 $00:08:20.154 \longrightarrow 00:08:21.978$ the hormones secreted and nonfunctional.

NOTE Confidence: 0.926439371785714

00:08:21.978 --> 00:08:24.876 Nets are defined as patients who are

NOTE Confidence: 0.926439371785714

 $00:08:24.876 \longrightarrow 00:08:27.049$ either asymptomatic or have symptoms

NOTE Confidence: 0.926439371785714

 $00{:}08{:}27.049 \dashrightarrow 00{:}08{:}29.575$ that are not from hormone access.

NOTE Confidence: 0.878234082727273

 $00:08:31.610 \longrightarrow 00:08:33.162$ So stage and grade.

NOTE Confidence: 0.878234082727273

00:08:33.162 --> 00:08:36.150 I think this is I really try to

 $00:08:36.150 \longrightarrow 00:08:37.650$ describe this to patients 'cause

NOTE Confidence: 0.878234082727273

 $00{:}08{:}37.650 \dashrightarrow 00{:}08{:}39.537$ I think for patients in particular

NOTE Confidence: 0.878234082727273

 $00:08:39.537 \longrightarrow 00:08:41.107$ this can be very confusing.

NOTE Confidence: 0.878234082727273

 $00:08:41.110 \longrightarrow 00:08:43.710$ So to this audience however,

NOTE Confidence: 0.878234082727273

 $00:08:43.710 \longrightarrow 00:08:45.910$ stage is very familiar term.

NOTE Confidence: 0.878234082727273

 $00:08:45.910 \longrightarrow 00:08:47.870$ What's interesting is that

NOTE Confidence: 0.878234082727273

 $00{:}08{:}47.870 \dashrightarrow 00{:}08{:}50.320$ the AJC staging criteria have

NOTE Confidence: 0.878234082727273

 $00:08:50.320 \longrightarrow 00:08:52.907$ only included Nets since 2010.

NOTE Confidence: 0.878234082727273

 $00:08:52.910 \longrightarrow 00:08:55.182$ This is a really nice picture here

NOTE Confidence: 0.878234082727273

 $00:08:55.182 \longrightarrow 00:08:57.287$ of a localized pancreatic net,

NOTE Confidence: 0.878234082727273

 $00{:}08{:}57.290 \longrightarrow 00{:}08{:}59.971$ which will show in the video and

NOTE Confidence: 0.878234082727273

00:08:59.971 --> 00:09:01.919 a metastatic pancreatic net with

NOTE Confidence: 0.878234082727273

 $00:09:01.919 \longrightarrow 00:09:03.729$ high degree of liver burden.

NOTE Confidence: 0.878234082727273

 $00:09:03.730 \longrightarrow 00:09:05.430$ As you can see here,

NOTE Confidence: 0.878234082727273

 $00:09:05.430 \longrightarrow 00:09:06.828$ grade is really what the cells

NOTE Confidence: 0.878234082727273

 $00{:}09{:}06.828 \dashrightarrow 00{:}09{:}08.320$ look like under the microscope.

 $00:09:08.320 \longrightarrow 00:09:09.624$ Low grade is slower,

NOTE Confidence: 0.878234082727273

 $00:09:09.624 \longrightarrow 00:09:11.580$ growing higher grade is faster growing.

NOTE Confidence: 0.878234082727273

 $00:09:11.580 \longrightarrow 00:09:14.016$ We really base this on the Ki

NOTE Confidence: 0.878234082727273

00:09:14.016 --> 00:09:15.630 67 in mitotic index.

NOTE Confidence: 0.878234082727273

00:09:15.630 --> 00:09:17.842 The 2019 digestive WHO

NOTE Confidence: 0.878234082727273

 $00:09:17.842 \longrightarrow 00:09:20.607$ classification is the most recent.

NOTE Confidence: 0.878234082727273

 $00:09:20.610 \longrightarrow 00:09:22.706$ I'm next to the Red Arrow is a.

NOTE Confidence: 0.878234082727273

 $00{:}09{:}22.710 \longrightarrow 00{:}09{:}25.188$ New change that was made to this

NOTE Confidence: 0.878234082727273

 $00:09:25.190 \longrightarrow 00:09:27.310$ so we have well differentiated.

NOTE Confidence: 0.878234082727273

 $00:09:27.310 \longrightarrow 00:09:30.914$ Net grade 1/2 and three and poorly

NOTE Confidence: 0.878234082727273

 $00:09:30.914 \longrightarrow 00:09:32.510$ differentiated nurkin carcinoma

NOTE Confidence: 0.878234082727273

 $00:09:32.510 \longrightarrow 00:09:35.655$ grade 3 and that's divided into

NOTE Confidence: 0.878234082727273

 $00{:}09{:}35.655 \dashrightarrow 00{:}09{:}37.650$ small cell and large cell.

NOTE Confidence: 0.878234082727273

00:09:37.650 --> 00:09:39.295 When I didn't put on this slide

NOTE Confidence: 0.878234082727273

 $00:09:39.295 \longrightarrow 00:09:41.158$ is kind of the breakdown of the

00:09:41.158 --> 00:09:42.528 Ki 67 in mitotic index,

NOTE Confidence: 0.878234082727273

 $00{:}09{:}42.530 \dashrightarrow 00{:}09{:}44.558$ but really the take away from

NOTE Confidence: 0.878234082727273

 $00:09:44.558 \longrightarrow 00:09:46.679$ this is that clinically we treat

NOTE Confidence: 0.878234082727273

 $00:09:46.679 \longrightarrow 00:09:48.785$ the grade one and two well

NOTE Confidence: 0.878234082727273

 $00:09:48.785 \longrightarrow 00:09:50.510$ differentiated Nets very similarly.

NOTE Confidence: 0.878234082727273

 $00:09:50.510 \longrightarrow 00:09:52.760$ This well differentiated grade 3

NOTE Confidence: 0.878234082727273

 $00:09:52.760 \longrightarrow 00:09:55.890$ net is a relatively new category.

NOTE Confidence: 0.878234082727273

 $00:09:55.890 \longrightarrow 00:09:57.941$ I think that we have to treat

NOTE Confidence: 0.878234082727273

 $00:09:57.941 \longrightarrow 00:09:59.919$ based on the individual patients

NOTE Confidence: 0.878234082727273

 $00:09:59.919 \longrightarrow 00:10:01.967$ biology bulk of disease.

NOTE Confidence: 0.878234082727273

 $00{:}10{:}01.970 \dashrightarrow 00{:}10{:}03.870$ The poorly differentiated nerd acon

NOTE Confidence: 0.878234082727273

 $00{:}10{:}03.870 \dashrightarrow 00{:}10{:}06.245$ carcinomas are treated very differently.

NOTE Confidence: 0.878234082727273

 $00:10:06.250 \longrightarrow 00:10:08.714$ That will not be the primary topic of.

NOTE Confidence: 0.878234082727273

 $00:10:08.720 \dashrightarrow 00:10:10.694$ Kind of the subsequent slides on treatment.

NOTE Confidence: 0.878234082727273

00:10:10.700 --> 00:10:12.805 That's typically those patients are

NOTE Confidence: 0.878234082727273

 $00:10:12.805 \longrightarrow 00:10:15.520$ typically treated with platinum at openside.

 $00:10:15.520 \longrightarrow 00:10:16.536$ So pace of growth,

NOTE Confidence: 0.878234082727273

 $00:10:16.536 \longrightarrow 00:10:17.904$ something I was getting to really

NOTE Confidence: 0.878234082727273

 $00:10:17.904 \longrightarrow 00:10:19.380$ does inform our treatment selection.

NOTE Confidence: 0.878234082727273

 $00:10:19.380 \longrightarrow 00:10:21.396$ We may need a patient with a

NOTE Confidence: 0.878234082727273

 $00:10:21.396 \longrightarrow 00:10:23.677$ metastatic low grade net who has very

NOTE Confidence: 0.878234082727273

 $00:10:23.677 \longrightarrow 00:10:25.372$ stable disease or slow progression,

NOTE Confidence: 0.878234082727273

 $00:10:25.380 \longrightarrow 00:10:27.336$ or may have more rapid progression.

NOTE Confidence: 0.878234082727273

 $00{:}10{:}27.340 \dashrightarrow 00{:}10{:}29.482$ Some of those patients may not

NOTE Confidence: 0.878234082727273

 $00:10:29.482 \longrightarrow 00:10:30.553$ need treatment initially.

NOTE Confidence: 0.878234082727273

 $00:10:30.560 \longrightarrow 00:10:32.568$ Observation may be appropriate,

NOTE Confidence: 0.878234082727273

 $00:10:32.568 \longrightarrow 00:10:35.580$ whereas others may have high burden

NOTE Confidence: 0.878234082727273

 $00:10:35.657 \longrightarrow 00:10:37.949$ of disease or symptoms from tumor

NOTE Confidence: 0.878234082727273

 $00{:}10{:}37.949 \dashrightarrow 00{:}10{:}40.680$ bulk and they may need treatment.

NOTE Confidence: 0.878234082727273

 $00:10:40.680 \longrightarrow 00:10:41.874$ Primary site matters,

NOTE Confidence: 0.878234082727273

00:10:41.874 --> 00:10:45.150 I know this is a GI focused talk,

00:10:45.150 --> 00:10:47.173 but Nets can happen in almost any

NOTE Confidence: 0.878234082727273

 $00{:}10{:}47.173 \dashrightarrow 00{:}10{:}49.120$ organ in the small intestine.

NOTE Confidence: 0.878234082727273

 $00:10:49.120 \longrightarrow 00:10:52.056$ Most commonly that is one of the most

NOTE Confidence: 0.878234082727273

 $00:10:52.056 \longrightarrow 00:10:54.998$ common sites we see commonly in the ilium,

NOTE Confidence: 0.878234082727273

 $00:10:55.000 \longrightarrow 00:10:57.250$ but we will also see pancreatic

NOTE Confidence: 0.878234082727273

00:10:57.250 --> 00:11:00.000 Nets and other Nets in the GI tract,

NOTE Confidence: 0.878234082727273

 $00:11:00.000 \longrightarrow 00:11:02.280$ and many clinical trials and treatments

NOTE Confidence: 0.878234082727273

 $00:11:02.280 \longrightarrow 00:11:04.799$ are really tailored based on primary site.

NOTE Confidence: 0.878234082727273 00:11:04.800 --> 00:11:05.296 Therefore,

NOTE Confidence: 0.878234082727273

00:11:05.296 --> 00:11:07.776 FDA approvals are sometimes limited

NOTE Confidence: 0.878234082727273

 $00{:}11{:}07.776 \dashrightarrow 00{:}11{:}09.760$ specifically to primary sites.

NOTE Confidence: 0.878234082727273

 $00:11:09.760 \longrightarrow 00:11:12.212$ One example of that.

NOTE Confidence: 0.878234082727273

 $00:11:12.212 \longrightarrow 00:11:15.277$ Is synonym for pancreatic Nets.

NOTE Confidence: 0.878234082727273

 $00:11:15.280 \longrightarrow 00:11:17.165$ We now know that somatostatin

NOTE Confidence: 0.878234082727273

 $00:11:17.165 \longrightarrow 00:11:19.050$ receptor status is critical both

NOTE Confidence: 0.878234082727273

 $00:11:19.117 \longrightarrow 00:11:20.697$ for diagnosis and therapy.

 $00:11:20.700 \longrightarrow 00:11:20.953$ Again,

NOTE Confidence: 0.878234082727273

 $00:11:20.953 \longrightarrow 00:11:23.560$ I'm going to let Doctor boy and go into this.

NOTE Confidence: 0.878234082727273

 $00:11:23.560 \longrightarrow 00:11:25.205$ This is an interesting picture

NOTE Confidence: 0.878234082727273

00:11:25.205 --> 00:11:27.286 just to show an octreoscan which

NOTE Confidence: 0.878234082727273

00:11:27.286 --> 00:11:29.136 has now really completely been

NOTE Confidence: 0.878234082727273

 $00:11:29.136 \longrightarrow 00:11:30.616$ replaced by gallium dotate.

NOTE Confidence: 0.878234082727273

 $00:11:30.620 \longrightarrow 00:11:33.892$ This is the same patient image with an

NOTE Confidence: 0.878234082727273

 $00{:}11{:}33.892 \dashrightarrow 00{:}11{:}36.638$ octreoscan and a gallium 68 dotate pet,

NOTE Confidence: 0.878234082727273

 $00:11:36.640 \longrightarrow 00:11:39.608$ and you can see that the resolution is

NOTE Confidence: 0.878234082727273

 $00:11:39.608 \longrightarrow 00:11:42.396$ far superior with the pet based imaging.

NOTE Confidence: 0.776700743043478

00:11:42.400 --> 00:11:44.560 So now we're going to launch in the next

NOTE Confidence: 0.776700743043478

 $00:11:44.560 \longrightarrow 00:11:46.984$ sort of the final half of my presentation

NOTE Confidence: 0.776700743043478

 $00{:}11{:}46.984 \dashrightarrow 00{:}11{:}49.020$ on general treatment categories for nuts.

NOTE Confidence: 0.776700743043478

00:11:49.020 --> 00:11:50.812 I will go into some of the specifics

NOTE Confidence: 0.776700743043478

 $00:11:50.812 \longrightarrow 00:11:52.795$ just so that you have access to this.

00:11:52.800 --> 00:11:55.558 If you choose to watch this again,

NOTE Confidence: 0.776700743043478

 $00:11:55.560 \longrightarrow 00:11:57.660$ so we have 4 main categories,

NOTE Confidence: 0.776700743043478

00:11:57.660 --> 00:12:00.660 somatostatin analogs, peptide receptor,

NOTE Confidence: 0.776700743043478

00:12:00.660 --> 00:12:02.727 radionuclide therapy, biologics,

NOTE Confidence: 0.776700743043478

00:12:02.727 --> 00:12:04.428 and cytotoxic chemotherapy,

NOTE Confidence: 0.776700743043478

00:12:04.428 --> 00:12:10.008 I am going to really focus my conversation or

NOTE Confidence: 0.776700743043478

 $00:12:10.008 \longrightarrow 00:12:13.493$ presentation to night on antitumor treatments.

NOTE Confidence: 0.776700743043478

 $00:12:13.500 \longrightarrow 00:12:15.110$ Just a brief comment that we know.

NOTE Confidence: 0.776700743043478

 $00:12:15.110 \longrightarrow 00:12:16.418$ So not a statin.

NOTE Confidence: 0.776700743043478

00:12:16.418 --> 00:12:18.053 Analogs were really initially developed

NOTE Confidence: 0.776700743043478

 $00:12:18.053 \longrightarrow 00:12:20.451$ for a hormone control and remain as the

NOTE Confidence: 0.776700743043478

00:12:20.451 --> 00:12:22.848 primary tool that we use for hormone control,

NOTE Confidence: 0.776700743043478

 $00:12:22.850 \longrightarrow 00:12:24.110$ but I'm not going to go

NOTE Confidence: 0.776700743043478

 $00:12:24.110 \longrightarrow 00:12:25.410$ into just for sake of time.

NOTE Confidence: 0.776700743043478

00:12:25.410 --> 00:12:28.070 Details on hormone control tonight,

NOTE Confidence: 0.776700743043478

 $00{:}12{:}28.070 \dashrightarrow 00{:}12{:}29.696$ so somatostatin receptors

 $00:12:29.696 \longrightarrow 00:12:31.864$ and and the ranostics again,

NOTE Confidence: 0.776700743043478

 $00:12:31.870 \longrightarrow 00:12:33.417$ I'm going to just use this to

NOTE Confidence: 0.776700743043478

00:12:33.417 --> 00:12:34.970 talk about some of the therapies.

NOTE Confidence: 0.776700743043478

00:12:34.970 --> 00:12:37.554 Dr Abovyan will go into this as well,

NOTE Confidence: 0.776700743043478

 $00:12:37.560 \longrightarrow 00:12:39.590$ but in terms of my cartoon here,

NOTE Confidence: 0.776700743043478

00:12:39.590 --> 00:12:41.704 imagine you have a patient in population

NOTE Confidence: 0.776700743043478

 $00:12:41.704 \longrightarrow 00:12:44.098$ for whom you would like to select out.

NOTE Confidence: 0.776700743043478

 $00:12:44.100 \longrightarrow 00:12:46.018$ Do they have a receptor on the

NOTE Confidence: 0.776700743043478

00:12:46.018 --> 00:12:47.250 surface of their cells?

NOTE Confidence: 0.776700743043478

 $00:12:47.250 \longrightarrow 00:12:48.726$ We do in fact have that.

NOTE Confidence: 0.776700743043478

00:12:48.730 --> 00:12:51.658 So with the gallium 68 or copper 64 pets,

NOTE Confidence: 0.776700743043478

00:12:51.658 --> 00:12:52.994 we select out those

NOTE Confidence: 0.776700743043478

00:12:52.994 --> 00:12:54.330 patients using that imaging,

NOTE Confidence: 0.776700743043478

 $00{:}12{:}54.330 \dashrightarrow 00{:}12{:}56.378$ and then we in fact have a targeted

NOTE Confidence: 0.776700743043478

 $00:12:56.378 \longrightarrow 00:12:58.007$ therapy that goes to that target.

 $00:12:58.010 \longrightarrow 00:12:59.326$ So that's theranostics Dr.

NOTE Confidence: 0.776700743043478

 $00:12:59.326 \longrightarrow 00:13:01.300$ Boy and will focus on that.

NOTE Confidence: 0.776700743043478

00:13:01.300 --> 00:13:03.148 When I described this to patients,

NOTE Confidence: 0.776700743043478

 $00:13:03.150 \longrightarrow 00:13:05.376$ I used the lock and key

NOTE Confidence: 0.776700743043478

 $00:13:05.376 \longrightarrow 00:13:06.489$ description or analogy.

NOTE Confidence: 0.776700743043478

 $00:13:06.490 \longrightarrow 00:13:08.938$ I think that helps them understand

NOTE Confidence: 0.776700743043478

00:13:08.938 --> 00:13:11.210 why we use somatostatin analogs,

NOTE Confidence: 0.776700743043478

 $00:13:11.210 \longrightarrow 00:13:13.464$ why we use the Dota Tate imaging.

NOTE Confidence: 0.776700743043478

 $00:13:13.470 \longrightarrow 00:13:15.300$ So think of the somatostatin

NOTE Confidence: 0.776700743043478

 $00:13:15.300 \longrightarrow 00:13:17.376$ receptor as the lock, the.

NOTE Confidence: 0.776700743043478

 $00{:}13{:}17.376 \dashrightarrow 00{:}13{:}19.800$ Key is the peptide,

NOTE Confidence: 0.776700743043478

 $00:13:19.800 \longrightarrow 00:13:22.116$ and then there's a reporting unit.

NOTE Confidence: 0.776700743043478

 $00:13:22.120 \longrightarrow 00:13:23.940$ So for somatostatin analogs,

NOTE Confidence: 0.776700743043478

 $00:13:23.940 \longrightarrow 00:13:26.670$ we actually have two trials that

NOTE Confidence: 0.776700743043478

 $00:13:26.750 \longrightarrow 00:13:28.988$ demonstrated antitumor effect.

NOTE Confidence: 0.776700743043478

 $00:13:28.990 \longrightarrow 00:13:31.564$ The Pro MID study demonstrated the

00:13:31.564 --> 00:13:33.910 effect of octreotide versus placebo,

NOTE Confidence: 0.776700743043478

 $00:13:33.910 \longrightarrow 00:13:36.826$ and the clarinet study demonstrated the

NOTE Confidence: 0.776700743043478

 $00:13:36.826 \longrightarrow 00:13:39.370$ effectiveness of lanreotide versus placebo.

NOTE Confidence: 0.776700743043478

00:13:39.370 --> 00:13:43.142 Both had a primary endpoint of of

NOTE Confidence: 0.776700743043478

 $00:13:43.142 \longrightarrow 00:13:45.046$ the permits that it was time to

NOTE Confidence: 0.776700743043478

 $00:13:45.046 \longrightarrow 00:13:46.657$ progression and that the clarinet

NOTE Confidence: 0.776700743043478

00:13:46.657 --> 00:13:48.342 study was progression free survival

NOTE Confidence: 0.776700743043478

 $00{:}13{:}48.342 \dashrightarrow 00{:}13{:}50.416$ and they both should have benefit

NOTE Confidence: 0.776700743043478

 $00:13:50.416 \longrightarrow 00:13:51.540$ over placebo octreotide.

NOTE Confidence: 0.776700743043478

 $00{:}13{:}51.540 \dashrightarrow 00{:}13{:}54.690$ Is not formally does not have a

NOTE Confidence: 0.776700743043478

 $00:13:54.690 \longrightarrow 00:13:57.930$ formal FDA label for antitumor effect.

NOTE Confidence: 0.776700743043478

00:13:57.930 --> 00:13:59.766 It is primarily in hormone control,

NOTE Confidence: 0.776700743043478 00:13:59.770 --> 00:14:00.793 but it is. NOTE Confidence: 0.776700743043478

00:14:00.793 --> 00:14:02.498 These two agents are often

NOTE Confidence: 0.776700743043478

 $00:14:02.498 \longrightarrow 00:14:03.180$ used interchangeably.

00:14:03.180 --> 00:14:05.010 Landry Tide was FDA approved

NOTE Confidence: 0.776700743043478

 $00:14:05.010 \longrightarrow 00:14:07.340$ in 2014 as an antitumor agent.

NOTE Confidence: 0.939434646153846

 $00:14:09.650 \longrightarrow 00:14:11.106$ I'd like to put this up because I

NOTE Confidence: 0.939434646153846

 $00:14:11.106 \longrightarrow 00:14:13.206$ get asked this a lot. So how do we

NOTE Confidence: 0.939434646153846

00:14:13.206 --> 00:14:15.030 think about dosing for tumor control?

NOTE Confidence: 0.939434646153846

00:14:15.030 --> 00:14:17.844 Octreotide LARC is usually used at the

NOTE Confidence: 0.939434646153846

 $00:14:17.844 \longrightarrow 00:14:20.795$ 30 milligram I am monthly dose and

NOTE Confidence: 0.939434646153846

00:14:20.795 --> 00:14:23.334 lanreotide at 120 milligrams deep. Subq.

NOTE Confidence: 0.939434646153846

 $00:14:23.334 \longrightarrow 00:14:26.871$ There is no need to overlap with short

NOTE Confidence: 0.939434646153846

00:14:26.871 --> 00:14:28.930 acting unless it's a functional tumor.

NOTE Confidence: 0.939434646153846

00:14:28.930 --> 00:14:31.396 I think there was data years ago that we

NOTE Confidence: 0.939434646153846

 $00{:}14{:}31.396 \dashrightarrow 00{:}14{:}33.946$ needed to do a test dose to test for aller gy.

NOTE Confidence: 0.939434646153846

 $00:14:33.950 \longrightarrow 00:14:36.250$ That's not generally needed in

NOTE Confidence: 0.939434646153846

 $00:14:36.250 \longrightarrow 00:14:38.290$ practice and there is little data

NOTE Confidence: 0.939434646153846

 $00:14:38.290 \longrightarrow 00:14:39.870$ to support the routine use.

NOTE Confidence: 0.939434646153846

 $00:14:39.870 \longrightarrow 00:14:42.255$ Above standard dose of somatostatin

 $00:14:42.255 \longrightarrow 00:14:44.163$ analogues for tumor control.

NOTE Confidence: 0.939434646153846

00:14:44.170 --> 00:14:47.217 The side effects include nausha, diarrhea,

NOTE Confidence: 0.939434646153846

00:14:47.217 --> 00:14:50.958 cholelithiasis, and hyperglycemia.

NOTE Confidence: 0.939434646153846

 $00:14:50.960 \longrightarrow 00:14:52.500$ I'm going to go through these quickly.

NOTE Confidence: 0.939434646153846

 $00:14:52.500 \longrightarrow 00:14:54.276$ I have them just kind of as placeholders,

NOTE Confidence: 0.939434646153846

00:14:54.280 --> 00:14:56.275 but Doctor Brian will talk about these,

NOTE Confidence: 0.939434646153846

 $00:14:56.280 \longrightarrow 00:14:59.640$ but we've had incredible advances in

NOTE Confidence: 0.939434646153846

 $00:14:59.640 \longrightarrow 00:15:02.075$ the diagnostics for Nets as well and

NOTE Confidence: 0.939434646153846

 $00{:}15{:}02.075 \dashrightarrow 00{:}15{:}04.611$ there is a very handy paper and I have

NOTE Confidence: 0.939434646153846

 $00:15:04.611 \longrightarrow 00:15:07.275$ this here just as a reference on the

NOTE Confidence: 0.939434646153846

 $00:15:07.275 \longrightarrow 00:15:09.440$ appropriate use criteria for somatostatin

NOTE Confidence: 0.939434646153846

 $00:15:09.440 \longrightarrow 00:15:12.512$ receptor PET imaging and new under consumers.

NOTE Confidence: 0.939434646153846

 $00:15:12.512 \longrightarrow 00:15:14.284$ That's a great reference.

NOTE Confidence: 0.939434646153846

 $00:15:14.290 \longrightarrow 00:15:16.922$ And then in the therapy is something that

NOTE Confidence: 0.939434646153846

 $00:15:16.922 \longrightarrow 00:15:19.486$ also Doctor Boy and will discuss and

00:15:19.486 --> 00:15:21.760 specifically around the Netter one phase,

NOTE Confidence: 0.939434646153846

 $00:15:21.760 \longrightarrow 00:15:22.681$ three clinical trial.

NOTE Confidence: 0.939434646153846

00:15:22.681 --> 00:15:24.830 So I'll mention it just in passing

NOTE Confidence: 0.939434646153846

 $00:15:24.888 \longrightarrow 00:15:26.904$ that this was a study I had the

NOTE Confidence: 0.939434646153846

 $00:15:26.904 \longrightarrow 00:15:28.287$ opportunity to serve as a key.

NOTE Confidence: 0.939434646153846

 $00:15:28.290 \longrightarrow 00:15:29.526$ I when I was at Stanford.

NOTE Confidence: 0.939434646153846

00:15:29.530 --> 00:15:31.708 It's a randomized study that really

NOTE Confidence: 0.939434646153846

 $00:15:31.708 \longrightarrow 00:15:34.596$ set the stage for using their Gnostics

NOTE Confidence: 0.939434646153846

 $00:15:34.596 \longrightarrow 00:15:36.866$ and and specifically alluded it,

NOTE Confidence: 0.939434646153846 00:15:36.870 --> 00:15:37.836 and that's it.

NOTE Confidence: 0.939434646153846

00:15:37.836 --> 00:15:39.124 Was a positive study.

NOTE Confidence: 0.93943464615384600:15:39.130 --> 00:15:40.021 I will give. NOTE Confidence: 0.939434646153846

00:15:40.021 --> 00:15:41.803 I will give that punchline away

NOTE Confidence: 0.939434646153846

 $00:15:41.803 \longrightarrow 00:15:43.090$ for Doctor O'Brien.

NOTE Confidence: 0.939434646153846

00:15:43.090 --> 00:15:44.700 But moving on to some of the

NOTE Confidence: 0.939434646153846

 $00{:}15{:}44.700 \dashrightarrow 00{:}15{:}45.390$ other systemic therapies,

 $00:15:45.390 \longrightarrow 00:15:47.550$ I will spend a few minutes on so.

NOTE Confidence: 0.939434646153846

 $00:15:47.550 \longrightarrow 00:15:49.860$ Everolimus is approved for pancreatic

NOTE Confidence: 0.939434646153846

 $00:15:49.860 \longrightarrow 00:15:53.269$ net and non functional GI and lung Nets.

NOTE Confidence: 0.939434646153846

 $00:15:53.270 \longrightarrow 00:15:55.540$ This is an inventory inhibitor.

NOTE Confidence: 0.939434646153846

 $00:15:55.540 \longrightarrow 00:15:57.965$ There were sister studies Radiant

NOTE Confidence: 0.939434646153846

 $00:15:57.965 \longrightarrow 00:16:01.580$ three and Radiant four and.

NOTE Confidence: 0.939434646153846

 $00:16:01.580 \longrightarrow 00:16:03.536$ Both of them showed a progression

NOTE Confidence: 0.939434646153846

 $00:16:03.536 \longrightarrow 00:16:04.840$ free survival benefit in

NOTE Confidence: 0.939434646153846

00:16:04.898 --> 00:16:06.359 these patient populations,

NOTE Confidence: 0.939434646153846

 $00:16:06.360 \longrightarrow 00:16:08.000$ and they were both approved.

NOTE Confidence: 0.939434646153846

00:16:08.000 --> 00:16:10.793 So for pancreatic net in 2011 and

NOTE Confidence: 0.939434646153846

 $00:16:10.793 \longrightarrow 00:16:13.718$ for GI and lung Nets in 2016.

NOTE Confidence: 0.939434646153846

 $00{:}16{:}13.720 \dashrightarrow 00{:}16{:}15.710$ And tyrosine kinase inhibitors also

NOTE Confidence: 0.939434646153846

 $00:16:15.710 \longrightarrow 00:16:18.200$ have a role in neuroendocrine tumors.

NOTE Confidence: 0.939434646153846

 $00:16:18.200 \longrightarrow 00:16:20.576$ Sonett nib was approved on the

 $00:16:20.576 \longrightarrow 00:16:23.063$ basis of this randomized study in

NOTE Confidence: 0.939434646153846

 $00{:}16{:}23.063 \dashrightarrow 00{:}16{:}24.915$ patients with well differentiated

NOTE Confidence: 0.939434646153846

 $00:16:24.915 \longrightarrow 00:16:26.304$ advanced pancreatic Nets.

NOTE Confidence: 0.939434646153846

 $00:16:26.310 \longrightarrow 00:16:28.443$ So that's the one that I said we don't

NOTE Confidence: 0.939434646153846

 $00:16:28.443 \longrightarrow 00:16:30.520$ yet have a tyrosine kinase inhibitor

NOTE Confidence: 0.939434646153846

 $00:16:30.520 \longrightarrow 00:16:32.300$ approved for small bowel Nets.

NOTE Confidence: 0.939434646153846

 $00:16:32.300 \longrightarrow 00:16:34.070$ This was also approved on the

NOTE Confidence: 0.939434646153846

 $00:16:34.070 \longrightarrow 00:16:35.860$ basis of a PFS benefit.

NOTE Confidence: 0.939434646153846

 $00:16:35.860 \longrightarrow 00:16:38.085$ You'll notice that most neuroendocrine

NOTE Confidence: 0.939434646153846

 $00:16:38.085 \longrightarrow 00:16:40.310$ tumor clinical trials have progression

NOTE Confidence: 0.939434646153846

 $00{:}16{:}40.369 \dashrightarrow 00{:}16{:}42.445$ free survival as a primary endpoint,

NOTE Confidence: 0.939434646153846

 $00:16:42.450 \longrightarrow 00:16:44.550$ and that's because OS.

NOTE Confidence: 0.939434646153846

 $00:16:44.550 \longrightarrow 00:16:47.114$ Is an impractical endpoint given

NOTE Confidence: 0.939434646153846

 $00:16:47.114 \longrightarrow 00:16:49.898$ that patients tend to receive many

NOTE Confidence: 0.939434646153846

 $00:16:49.898 \longrightarrow 00:16:51.739$ subsequent therapies after these

NOTE Confidence: 0.939434646153846

 $00{:}16{:}51.739 \dashrightarrow 00{:}16{:}53.983$ clinical trials and it be given

 $00:16:53.983 \longrightarrow 00:16:56.010$ the indolence of the disease,

NOTE Confidence: 0.939434646153846

 $00:16:56.010 \longrightarrow 00:16:57.270$ it would be too difficult,

NOTE Confidence: 0.939434646153846

00:16:57.270 --> 00:16:58.202 practically speaking,

NOTE Confidence: 0.939434646153846

 $00:16:58.202 \longrightarrow 00:17:00.066$ to use overall survival.

NOTE Confidence: 0.939434646153846

 $00:17:00.070 \longrightarrow 00:17:03.790$ So this was approved in 2011.

NOTE Confidence: 0.939434646153846

00:17:03.790 --> 00:17:06.198 Sir Afatinib is not yet FDA approved.

NOTE Confidence: 0.939434646153846

 $00:17:06.200 \longrightarrow 00:17:08.540$ It is under FDA review.

NOTE Confidence: 0.93943464615384600:17:08.540 --> 00:17:09.090 At present,

NOTE Confidence: 0.939434646153846

 $00:17:09.090 \longrightarrow 00:17:11.015$ this was on the basis of two

NOTE Confidence: 0.939434646153846

 $00{:}17{:}11.015 \dashrightarrow 00{:}17{:}12.622$ large studies conducted in China

NOTE Confidence: 0.939434646153846

 $00:17:12.622 \longrightarrow 00:17:14.212$ and then a phase one.

NOTE Confidence: 0.939434646153846

 $00:17:14.220 \longrightarrow 00:17:15.900$ Two study that has been

NOTE Confidence: 0.939434646153846

 $00{:}17{:}15.900 \dashrightarrow 00{:}17{:}17.580$ conducted in the United States

NOTE Confidence: 0.953139839166667

 $00:17:17.651 \longrightarrow 00:17:20.004$ in a more traditionally Western population.

NOTE Confidence: 0.953139839166667

 $00:17:20.004 \longrightarrow 00:17:23.160$ But this was positive in both

 $00:17:23.238 \longrightarrow 00:17:26.098$ pancreatic and extra pancreatic Nets.

NOTE Confidence: 0.953139839166667

 $00:17:26.100 \longrightarrow 00:17:28.410$ And is, I suspect that at some

NOTE Confidence: 0.953139839166667

00:17:28.410 --> 00:17:30.160 point this spring or summer,

NOTE Confidence: 0.953139839166667

 $00:17:30.160 \longrightarrow 00:17:33.576$ we will have a decision from the FDA.

NOTE Confidence: 0.953139839166667

 $00:17:33.580 \longrightarrow 00:17:35.932$ I'd like to mention a study on

NOTE Confidence: 0.953139839166667

00:17:35.932 --> 00:17:38.220 chemotherapy that I had the opportunity

NOTE Confidence: 0.953139839166667

 $00:17:38.220 \longrightarrow 00:17:40.235$ to lead for pancreatic Nets,

NOTE Confidence: 0.953139839166667

 $00:17:40.240 \longrightarrow 00:17:43.848$ so this was a study of temozolomide versus

NOTE Confidence: 0.953139839166667

 $00:17:43.848 \longrightarrow 00:17:46.162$ capecitabine intimas Olumide for grade

NOTE Confidence: 0.953139839166667

 $00:17:46.162 \longrightarrow 00:17:48.832$ one or two metastatic pancreatic Nets.

NOTE Confidence: 0.953139839166667

00:17:48.840 --> 00:17:51.438 This was a study that ultimately

NOTE Confidence: 0.953139839166667

 $00{:}17{:}51.438 \dashrightarrow 00{:}17{:}54.870$ demonstrated that Caped M was superior to

NOTE Confidence: 0.953139839166667

 $00:17:54.870 \longrightarrow 00:17:57.575$ temozolomide alone and median progression.

NOTE Confidence: 0.953139839166667

 $00:17:57.580 \longrightarrow 00:18:00.808$ Free survival was about 23 months

NOTE Confidence: 0.953139839166667

 $00:18:00.808 \longrightarrow 00:18:03.949$ for the combination versus 14 months.

NOTE Confidence: 0.953139839166667

 $00:18:03.950 \longrightarrow 00:18:06.392$ For Thomas Olumide at the time

00:18:06.392 --> 00:18:08.020 of the initial analysis,

NOTE Confidence: 0.953139839166667

 $00:18:08.020 \longrightarrow 00:18:10.799$ it appeared as if there was an

NOTE Confidence: 0.953139839166667

 $00{:}18{:}10.799 \dashrightarrow 00{:}18{:}12.650$ overall survival benefit benefit.

NOTE Confidence: 0.953139839166667 00:18:12.650 --> 00:18:13.538 Stay tuned. NOTE Confidence: 0.953139839166667

00:18:13.538 --> 00:18:16.202 We have the final analysis submitted

NOTE Confidence: 0.953139839166667

 $00:18:16.202 \longrightarrow 00:18:19.918$ to ASCO for an updated analysis.

NOTE Confidence: 0.953139839166667

 $00:18:19.920 \longrightarrow 00:18:21.691$ I think one of the key takeaways

NOTE Confidence: 0.953139839166667

 $00:18:21.691 \longrightarrow 00:18:23.984$ of this is that we see a higher

NOTE Confidence: 0.953139839166667

 $00{:}18{:}23.984 \dashrightarrow 00{:}18{:}25.840$ response rate than we've seen really

NOTE Confidence: 0.953139839166667

 $00:18:25.840 \longrightarrow 00:18:27.760$ for any of the other therapies.

NOTE Confidence: 0.953139839166667

00:18:27.760 --> 00:18:29.158 I did not go into that,

NOTE Confidence: 0.953139839166667

00:18:29.160 --> 00:18:32.840 but somatostatin analogues, mtor inhibitors,

NOTE Confidence: 0.953139839166667

 $00{:}18{:}32.840 \dashrightarrow 00{:}18{:}35.582$ tyrosine kinase inhibitors all have a

NOTE Confidence: 0.953139839166667

 $00:18:35.582 \dashrightarrow 00:18:39.250$ you know 5% or less objective response rate.

NOTE Confidence: 0.953139839166667

 $00:18:39.250 \longrightarrow 00:18:41.776$ So for patients with pancreatic Nets

00:18:41.776 --> 00:18:44.220 who need objective tumor shrinkage,

NOTE Confidence: 0.953139839166667

 $00:18:44.220 \longrightarrow 00:18:46.385$ these are actually very good

NOTE Confidence: 0.953139839166667

 $00:18:46.385 \longrightarrow 00:18:48.117$ therapies to think about.

NOTE Confidence: 0.953139839166667

 $00:18:48.120 \longrightarrow 00:18:49.560$ So let's wrap this up.

NOTE Confidence: 0.953139839166667

 $00:18:49.560 \longrightarrow 00:18:50.600$ I think I have.

NOTE Confidence: 0.953139839166667

 $00:18:50.600 \longrightarrow 00:18:51.380$ Two slides left.

NOTE Confidence: 0.953139839166667

 $00:18:51.380 \longrightarrow 00:18:53.109$ So how do we really think about

NOTE Confidence: 0.953139839166667

 $00:18:53.109 \longrightarrow 00:18:54.420$ sequencing that these treatments?

NOTE Confidence: 0.953139839166667

00:18:54.420 --> 00:18:55.281 It's very confusing.

NOTE Confidence: 0.953139839166667

00:18:55.281 --> 00:18:57.003 We're actually in a fortunate place

NOTE Confidence: 0.953139839166667

00:18:57.003 --> 00:18:58.875 now of having a number of therapies,

NOTE Confidence: 0.953139839166667

00:18:58.880 --> 00:19:00.490 but it gets very difficult to know

NOTE Confidence: 0.953139839166667

 $00:19:00.490 \longrightarrow 00:19:02.437$ what order in which we should use them,

NOTE Confidence: 0.953139839166667

 $00{:}19{:}02.440 \dashrightarrow 00{:}19{:}04.928$ so this is adapted from Nancy CN guidelines,

NOTE Confidence: 0.953139839166667

00:19:04.930 --> 00:19:07.380 so I would say commonly a first

NOTE Confidence: 0.953139839166667

 $00:19:07.380 \longrightarrow 00:19:09.620$ line treatment is either observation

 $00:19:09.620 \longrightarrow 00:19:11.856$ or octreotide or lanreotide,

NOTE Confidence: 0.953139839166667

 $00:19:11.860 \longrightarrow 00:19:14.044$ but where it gets very confusing as

NOTE Confidence: 0.953139839166667

 $00:19:14.044 \longrightarrow 00:19:15.860$ thinking about second line therapies.

NOTE Confidence: 0.953139839166667

 $00:19:15.860 \longrightarrow 00:19:17.673$ So I have a handy table to

NOTE Confidence: 0.953139839166667

 $00:19:17.673 \longrightarrow 00:19:19.219$ help you think about that,

NOTE Confidence: 0.953139839166667

 $00:19:19.220 \longrightarrow 00:19:20.370$ and I've put them in.

NOTE Confidence: 0.953139839166667

00:19:20.370 --> 00:19:22.708 Order of how I generally will think

NOTE Confidence: 0.953139839166667

 $00:19:22.708 \longrightarrow 00:19:23.710$ about using them.

NOTE Confidence: 0.953139839166667

 $00{:}19{:}23.710 \dashrightarrow 00{:}19{:}27.158$ I often will consider using PRT or Ludo

NOTE Confidence: 0.953139839166667

 $00{:}19{:}27.158 \dashrightarrow 00{:}19{:}30.610$ tape or lutathera as the as it's also

NOTE Confidence: 0.953139839166667

 $00:19:30.610 \longrightarrow 00:19:32.650$ called in the second line setting.

NOTE Confidence: 0.953139839166667

 $00:19:32.650 \longrightarrow 00:19:35.191$ It has a modest response rate of

NOTE Confidence: 0.953139839166667

00:19:35.191 --> 00:19:38.110 about 18% along PFS and is well

NOTE Confidence: 0.953139839166667

00:19:38.110 --> 00:19:40.734 tolerated and we do have to take care

NOTE Confidence: 0.953139839166667

00:19:40.734 --> 00:19:43.286 if patients GFR is less than 30 but

 $00:19:43.286 \longrightarrow 00:19:46.408$ we are developing more experience with them.

NOTE Confidence: 0.953139839166667

 $00:19:46.410 \longrightarrow 00:19:48.875$ The chemotherapy tamela mining capecitabine

NOTE Confidence: 0.953139839166667

00:19:48.875 --> 00:19:51.340 has the highest response rate.

NOTE Confidence: 0.953139839166667

 $00:19:51.340 \longrightarrow 00:19:53.170$ And should be considered for

NOTE Confidence: 0.953139839166667

 $00:19:53.170 \longrightarrow 00:19:55.000$ patients with pancreatic Nets who

NOTE Confidence: 0.953139839166667

 $00:19:55.064 \longrightarrow 00:19:56.660$ need an objective response.

NOTE Confidence: 0.953139839166667

00:19:56.660 --> 00:19:58.280 It does have higher adverse

NOTE Confidence: 0.953139839166667

 $00:19:58.280 \longrightarrow 00:19:59.576$ events for older patients.

NOTE Confidence: 0.953139839166667

 $00:19:59.580 \longrightarrow 00:20:03.006$ I will sometimes consider temozolomide alone.

NOTE Confidence: 0.953139839166667

 $00:20:03.010 \longrightarrow 00:20:04.530$ Forever Elemicin soon if they

NOTE Confidence: 0.953139839166667

 $00:20:04.530 \longrightarrow 00:20:06.430$ both have very low response rates,

NOTE Confidence: 0.953139839166667

 $00:20:06.430 \longrightarrow 00:20:09.150$ the PFS is about a year best for

NOTE Confidence: 0.953139839166667

 $00:20:09.150 \longrightarrow 00:20:10.050$ low volume disease,

NOTE Confidence: 0.953139839166667

 $00:20:10.050 \longrightarrow 00:20:12.738$ but I find that the adverse event

NOTE Confidence: 0.953139839166667

 $00:20:12.738 \longrightarrow 00:20:15.359$ profile is tough for both of these.

NOTE Confidence: 0.953139839166667

 $00{:}20{:}15.360 \to 00{:}20{:}17.125$ Everyone ever really miss in

00:20:17.125 --> 00:20:18.890 particular is good for insulinoma

NOTE Confidence: 0.953139839166667

 $00:20:18.954 \longrightarrow 00:20:20.949$ because it can cause hyperglycemia,

NOTE Confidence: 0.953139839166667

 $00:20:20.950 \longrightarrow 00:20:23.578$ but it's tough and can cause

NOTE Confidence: 0.953139839166667

00:20:23.578 --> 00:20:25.330 pneumonitis and the hyperglycemia

NOTE Confidence: 0.953139839166667

 $00{:}20{:}25.407 \dashrightarrow 00{:}20{:}27.927$ can be difficult for patients

NOTE Confidence: 0.953139839166667

 $00:20:27.927 \longrightarrow 00:20:29.439$ with uncontrolled diabetes.

NOTE Confidence: 0.953139839166667

 $00:20:29.440 \longrightarrow 00:20:30.880$ So takeaways I hope you've

NOTE Confidence: 0.953139839166667

 $00:20:30.880 \longrightarrow 00:20:32.320$ learned that Nets are not

NOTE Confidence: 0.859887359166667

 $00:20:32.384 \longrightarrow 00:20:33.924$ that rare. They are deserving

NOTE Confidence: 0.859887359166667

00:20:33.924 --> 00:20:35.236 of high quality basic,

NOTE Confidence: 0.859887359166667

 $00:20:35.240 \longrightarrow 00:20:37.190$ translational and clinical research efforts.

NOTE Confidence: 0.859887359166667

 $00{:}20{:}37.190 \dashrightarrow 00{:}20{:}38.670$ We've had incredible advances

NOTE Confidence: 0.859887359166667

 $00:20:38.670 \longrightarrow 00:20:40.520$ in the last 10 years.

NOTE Confidence: 0.859887359166667

00:20:40.520 --> 00:20:42.218 PRT is really a game changer

NOTE Confidence: 0.859887359166667

00:20:42.218 --> 00:20:44.405 and I expect the next decade of

 $00:20:44.405 \longrightarrow 00:20:46.050$ clinical trials to be looking

NOTE Confidence: 0.859887359166667

 $00:20:46.050 \longrightarrow 00:20:48.105$ at better patient selection,

NOTE Confidence: 0.859887359166667

 $00:20:48.105 \longrightarrow 00:20:50.405$ minimizing toxicities and increasing

NOTE Confidence: 0.859887359166667

 $00:20:50.405 \longrightarrow 00:20:52.219$ efficacy and multidisciplinary care

NOTE Confidence: 0.859887359166667

 $00:20:52.219 \longrightarrow 00:20:55.584$ and team science is really key for this

NOTE Confidence: 0.859887359166667

00:20:55.584 --> 00:20:57.740 disease so I am going to stop share.

NOTE Confidence: 0.859887359166667

00:20:57.740 --> 00:20:59.486 I think I'm close to time.

NOTE Confidence: 0.859887359166667

 $00:20:59.490 \longrightarrow 00:21:01.674$ I am going to pass the baton to

NOTE Confidence: 0.859887359166667

 $00{:}21{:}01.674 \longrightarrow 00{:}21{:}03.376$ Doctor Abovyan and then Doctor Boyd

NOTE Confidence: 0.859887359166667

 $00:21:03.376 \longrightarrow 00:21:05.368$ if you can then pass that baton

NOTE Confidence: 0.859887359166667

 $00{:}21{:}05.368 \dashrightarrow 00{:}21{:}07.405$ when you're done to Doctor Khan and

NOTE Confidence: 0.859887359166667

00:21:07.405 --> 00:21:09.656 then we will do a Q and a great.

NOTE Confidence: 0.597898

 $00:21:15.590 \longrightarrow 00:21:19.460$ Thank you doctor Kuntz. This was fantastic.

NOTE Confidence: 0.334057785

 $00:21:19.460 \longrightarrow 00:21:20.969$ Sam my screen.

NOTE Confidence: 0.875899366363636

 $00:21:31.900 \longrightarrow 00:21:34.161$ So I'm going to talk about the

NOTE Confidence: 0.875899366363636

 $00:21:34.161 \longrightarrow 00:21:35.740$ role of molecular imaging,

 $00:21:35.740 \longrightarrow 00:21:38.012$ and there are Gnostics in the care of

NOTE Confidence: 0.875899366363636

 $00:21:38.012 \longrightarrow 00:21:40.236$ patients with neural neoplasms I'm in.

NOTE Confidence: 0.875899366363636

00:21:40.236 --> 00:21:42.768 I'm at Yale Department of Radiology

NOTE Confidence: 0.875899366363636

00:21:42.768 --> 00:21:45.668 and I am in a nuclear medicine

NOTE Confidence: 0.875899366363636

00:21:45.668 --> 00:21:47.268 and new radiology sections.

NOTE Confidence: 0.734698471842105

 $00:21:49.750 \longrightarrow 00:21:52.558$ For disclosures, I have a research

NOTE Confidence: 0.734698471842105

 $00:21:52.558 \longrightarrow 00:21:55.699$ collaboration with vistage imaging and I do

NOTE Confidence: 0.734698471842105

 $00{:}21{:}55.699 \dashrightarrow 00{:}21{:}58.093$ clinical trials with Blue Earth diagnostics.

NOTE Confidence: 0.734698471842105

00:21:58.100 --> 00:22:00.088 We're going to start a little bit

NOTE Confidence: 0.734698471842105

 $00:22:00.088 \longrightarrow 00:22:01.993$ with standard imaging, CT, and MRI,

NOTE Confidence: 0.734698471842105

 $00:22:01.993 \longrightarrow 00:22:05.153$ but we're not going to focus on this

NOTE Confidence: 0.734698471842105

 $00:22:05.153 \longrightarrow 00:22:08.030$ imaging modalities because they're pretty

NOTE Confidence: 0.734698471842105

 $00{:}22{:}08.030 \dashrightarrow 00{:}22{:}11.428$ well understood in the community and just

NOTE Confidence: 0.734698471842105

 $00{:}22{:}11.428 \dashrightarrow 00{:}22{:}14.132$ kind of going over the basics of it.

NOTE Confidence: 0.734698471842105

 $00:22:14.140 \longrightarrow 00:22:17.178$ For carcinoid tumors, we can do very

 $00:22:17.178 \longrightarrow 00:22:20.217$ nice chest imaging with CT of the chest.

NOTE Confidence: 0.734698471842105

 $00{:}22{:}20.220 \dashrightarrow 00{:}22{:}22.768$ We can do contrast and noncontrast imaging,

NOTE Confidence: 0.734698471842105

 $00:22:22.770 \longrightarrow 00:22:25.350$ and here is an example of

NOTE Confidence: 0.734698471842105

 $00:22:25.350 \longrightarrow 00:22:27.070$ a lung carcinoid lesion.

NOTE Confidence: 0.734698471842105

 $00:22:27.070 \longrightarrow 00:22:29.374$ For pancreatic neuroendocrine

NOTE Confidence: 0.734698471842105

 $00:22:29.374 \longrightarrow 00:22:33.982$ tumors we can do CT imaging.

NOTE Confidence: 0.734698471842105

00:22:33.990 --> 00:22:35.139 Enhance CT imaging,

NOTE Confidence: 0.734698471842105

00:22:35.139 --> 00:22:38.841 but we can also do MRI and here you

NOTE Confidence: 0.734698471842105

 $00{:}22{:}38.841 \dashrightarrow 00{:}22{:}41.643$ see actually a patient with pancreatic

NOTE Confidence: 0.734698471842105

 $00:22:41.643 \longrightarrow 00:22:45.100$ tail or entropy neoplasm that is

NOTE Confidence: 0.734698471842105

 $00{:}22{:}45.100 \to 00{:}22{:}46.840$ heterogeneous solid and partially cystic

NOTE Confidence: 0.734698471842105

 $00:22:46.840 \longrightarrow 00:22:49.380$ and you can see that it's actually

NOTE Confidence: 0.734698471842105

 $00{:}22{:}49.380 \dashrightarrow 00{:}22{:}52.620$ sometimes difficult to evaluate.

NOTE Confidence: 0.734698471842105

00:22:52.620 --> 00:22:55.742 We can also do MRI imaging with

NOTE Confidence: 0.734698471842105

 $00:22:55.742 \longrightarrow 00:22:56.634$ abdominal MRI.

NOTE Confidence: 0.734698471842105

 $00:22:56.640 \longrightarrow 00:22:58.344$ You can do it with contrast

 $00:22:58.344 \longrightarrow 00:22:59.196$ and without contrast,

NOTE Confidence: 0.734698471842105

 $00{:}22{:}59.200 \dashrightarrow 00{:}23{:}03.736$ and you can evaluate in this particular

NOTE Confidence: 0.734698471842105

 $00:23:03.736 \longrightarrow 00:23:07.620$ patient static liver lesions within the.

NOTE Confidence: 0.734698471842105

00:23:07.620 --> 00:23:09.454 This MRI pretty well and this actually

NOTE Confidence: 0.734698471842105

 $00:23:09.454 \longrightarrow 00:23:11.178$ is same patient that progressed in

NOTE Confidence: 0.734698471842105

 $00:23:11.178 \longrightarrow 00:23:12.954$ development has to season the liver.

NOTE Confidence: 0.84837526125

00:23:14.970 --> 00:23:18.645 But we want to also start imaging

NOTE Confidence: 0.84837526125

 $00:23:18.645 \longrightarrow 00:23:20.988$ beyond standard anatomical imaging

NOTE Confidence: 0.84837526125

 $00:23:20.988 \longrightarrow 00:23:23.562$ with molecular imaging and with

NOTE Confidence: 0.84837526125

 $00:23:23.562 \longrightarrow 00:23:25.066$ standard and understandable imaging

NOTE Confidence: 0.84837526125

 $00:23:25.066 \longrightarrow 00:23:28.028$ we can see a lot of the basics of

NOTE Confidence: 0.84837526125

00:23:28.028 --> 00:23:30.574 the of of the anatomy you can see

NOTE Confidence: 0.84837526125

 $00{:}23{:}30.574 \dashrightarrow 00{:}23{:}32.389$ actually delineate the borders of

NOTE Confidence: 0.84837526125

 $00:23:32.389 \longrightarrow 00:23:34.708$ the tumor and where they're located,

NOTE Confidence: 0.84837526125

 $00:23:34.708 \longrightarrow 00:23:38.025$ but it's really hard to say what is

 $00:23:38.025 \longrightarrow 00:23:40.175$ the characteristics of the tumor,

NOTE Confidence: 0.84837526125

 $00:23:40.180 \longrightarrow 00:23:42.280$ so we're very good at defining the

NOTE Confidence: 0.84837526125

 $00:23:42.280 \longrightarrow 00:23:44.536$ anatomy and the location and the extent

NOTE Confidence: 0.84837526125

 $00:23:44.536 \longrightarrow 00:23:47.020$ of the disease and location of disease.

NOTE Confidence: 0.84837526125

 $00:23:47.020 \longrightarrow 00:23:49.100$ But not so much in terms of is

NOTE Confidence: 0.84837526125

 $00{:}23{:}49.100 \dashrightarrow 00{:}23{:}51.099$ the same neuroendocrine tumor.

NOTE Confidence: 0.84837526125

 $00:23:51.100 \longrightarrow 00:23:52.276$ If you just look at the lover?

NOTE Confidence: 0.84837526125

 $00:23:52.280 \longrightarrow 00:23:55.070$ Or is this something else?

NOTE Confidence: 0.84837526125

 $00{:}23{:}55.070 \dashrightarrow 00{:}23{:}57.996$ What's really nice is that you can

NOTE Confidence: 0.84837526125

 $00:23:57.996 \longrightarrow 00:24:00.645$ actually use targeted imaging to describe

NOTE Confidence: 0.84837526125

 $00{:}24{:}00.645 \dashrightarrow 00{:}24{:}03.725$ the receptors on the surface of tumors,

NOTE Confidence: 0.84837526125

 $00:24:03.730 \longrightarrow 00:24:05.810$ and you can characterize these.

NOTE Confidence: 0.84837526125

00:24:05.810 --> 00:24:07.898 Reset these unjust imaging

NOTE Confidence: 0.84837526125

 $00:24:07.898 \longrightarrow 00:24:11.030$ without having to do a biopsy.

NOTE Confidence: 0.84837526125

 $00:24:11.030 \longrightarrow 00:24:12.914$ And this is an example of

NOTE Confidence: 0.84837526125

 $00:24:12.914 \longrightarrow 00:24:14.170$ a gallium dotatate PET,

 $00:24:14.170 \longrightarrow 00:24:16.210$ which I'll describe this little alphabet.

NOTE Confidence: 0.84837526125

00:24:16.210 --> 00:24:18.905 So soup in the next few slides,

NOTE Confidence: 0.84837526125

 $00:24:18.910 \longrightarrow 00:24:22.354$ but what it allows you to do

NOTE Confidence: 0.84837526125

 $00:24:22.354 \longrightarrow 00:24:24.397$ is to visualize semantics.

NOTE Confidence: 0.84837526125

00:24:24.397 --> 00:24:27.232 Some of some analog binding

NOTE Confidence: 0.84837526125

 $00:24:27.232 \longrightarrow 00:24:29.500$ to a somatostatin receptor,

NOTE Confidence: 0.84837526125

 $00:24:29.500 \longrightarrow 00:24:31.908$ and being able to see it light

NOTE Confidence: 0.84837526125

 $00:24:31.908 \longrightarrow 00:24:33.820$ up on this Cam.

NOTE Confidence: 0.84837526125

 $00:24:33.820 \longrightarrow 00:24:35.854$ I'm so glad Doctor Kunz mentioned

NOTE Confidence: 0.84837526125

 $00:24:35.854 \longrightarrow 00:24:38.309$ that tree a scam that used to be

NOTE Confidence: 0.84837526125

 $00{:}24{:}38.309 \dashrightarrow 00{:}24{:}41.336$ the standard way of trying to see

NOTE Confidence: 0.84837526125

 $00:24:41.336 \longrightarrow 00:24:43.180$ some exciting receptor receptor

NOTE Confidence: 0.84837526125

00:24:43.261 --> 00:24:44.848 expression on tumors.

NOTE Confidence: 0.84837526125

 $00{:}24{:}44.850 \dashrightarrow 00{:}24{:}45.734$ And as you can see,

NOTE Confidence: 0.84837526125

 $00:24:45.734 \longrightarrow 00:24:47.256$ these are not very good images

 $00:24:47.256 \longrightarrow 00:24:49.764$ and they're very hard to see.

NOTE Confidence: 0.84837526125

 $00:24:49.770 \longrightarrow 00:24:51.345$ And it's very difficult to

NOTE Confidence: 0.84837526125

 $00:24:51.345 \longrightarrow 00:24:52.920$ tell where the tumor is,

NOTE Confidence: 0.84837526125

 $00:24:52.920 \longrightarrow 00:24:54.318$ and this is actually the same

NOTE Confidence: 0.84837526125

00:24:54.318 --> 00:24:55.670 patient I showed you earlier.

NOTE Confidence: 0.84837526125

00:24:55.670 --> 00:24:58.058 With pancreatic tail tumor,

NOTE Confidence: 0.84837526125

 $00:24:58.058 \longrightarrow 00:25:01.043$ and you can barely see

NOTE Confidence: 0.84837526125

 $00:25:01.050 \longrightarrow 00:25:02.598$ where this illusion is,

NOTE Confidence: 0.84837526125

 $00{:}25{:}02.598 \to 00{:}25{:}04.920$ and this is a planar imaging,

NOTE Confidence: 0.84837526125

 $00:25:04.920 \longrightarrow 00:25:06.570$ and if we did SPECT,

NOTE Confidence: 0.84837526125

 $00{:}25{:}06.570 \dashrightarrow 00{:}25{:}09.450$ we could localize it to

NOTE Confidence: 0.84837526125

 $00:25:09.450 \longrightarrow 00:25:10.966$ the left upper quadrant,

NOTE Confidence: 0.84837526125

 $00:25:10.966 \longrightarrow 00:25:13.665$ but it would be very difficult to

NOTE Confidence: 0.84837526125

00:25:13.665 --> 00:25:16.136 localize it to the pancreas very well.

NOTE Confidence: 0.84837526125

 $00:25:16.140 \longrightarrow 00:25:18.198$ Also, if there were smaller lesions,

NOTE Confidence: 0.84837526125

 $00:25:18.200 \longrightarrow 00:25:20.118$ we wouldn't be able to see it.

 $00:25:20.120 \longrightarrow 00:25:22.843$ And here's an example of a trio

NOTE Confidence: 0.84837526125

 $00{:}25{:}22.843 \dashrightarrow 00{:}25{:}25.403$ scan being lined up right next

NOTE Confidence: 0.84837526125

00:25:25.403 --> 00:25:27.588 to door dotate scan gallium

NOTE Confidence: 0.84837526125

00:25:27.588 --> 00:25:29.686 dotatate pet in the same patient,

NOTE Confidence: 0.84837526125

 $00:25:29.686 \longrightarrow 00:25:31.510$ and you can see how many

NOTE Confidence: 0.84837526125

 $00:25:31.580 \longrightarrow 00:25:33.268$ lesions are being missed.

NOTE Confidence: 0.84837526125

 $00:25:33.270 \longrightarrow 00:25:35.076$ An actress can that can be

NOTE Confidence: 0.84837526125

00:25:35.076 --> 00:25:37.069 clearly seen on the pet C team.

NOTE Confidence: 0.786035933333333

 $00{:}25{:}39.400 \longrightarrow 00{:}25{:}42.955$ But going to the dough depart a

NOTE Confidence: 0.786035933333333

 $00:25:42.955 \longrightarrow 00:25:45.230$ lot of folks ask me Doda what,

NOTE Confidence: 0.7860359333333333

 $00:25:45.230 \longrightarrow 00:25:49.166$ what is this Doda and the alphabet soup

NOTE Confidence: 0.786035933333333

 $00{:}25{:}49.166 \dashrightarrow 00{:}25{:}52.908$ of gallium dotatate gallium dooda talk

NOTE Confidence: 0.786035933333333

 $00:25:52.910 \longrightarrow 00:25:56.270$ lutetium dotatate usually confuses folks,

NOTE Confidence: 0.786035933333333

 $00:25:56.270 \longrightarrow 00:25:59.222$ but there's actually a very nice logic to it.

NOTE Confidence: 0.786035933333333

 $00:25:59.230 \longrightarrow 00:26:01.210$ So let's go over that,

 $00:26:01.210 \longrightarrow 00:26:04.120$ because then you will never question

NOTE Confidence: 0.786035933333333

 $00:26:04.120 \longrightarrow 00:26:06.890$ what what these are. So first,

NOTE Confidence: 0.786035933333333

 $00:26:06.890 \longrightarrow 00:26:09.656$ let's talk about labeling in chemistry.

NOTE Confidence: 0.786035933333333

00:26:09.656 --> 00:26:12.780 When you're thinking about pet pet

NOTE Confidence: 0.786035933333333

00:26:12.780 --> 00:26:15.510 radionuclides such as gallium and copper,

NOTE Confidence: 0.786035933333333

 $00:26:15.510 \longrightarrow 00:26:18.408$ which are used for imaging and pet,

NOTE Confidence: 0.786035933333333

00:26:18.410 --> 00:26:20.222 you cannot just attack,

NOTE Confidence: 0.786035933333333

 $00:26:20.222 \longrightarrow 00:26:22.120$ give them to the patient,

NOTE Confidence: 0.786035933333333

 $00:26:22.120 \longrightarrow 00:26:23.110$ they're actually toxic,

NOTE Confidence: 0.786035933333333

 $00:26:23.110 \longrightarrow 00:26:25.792$ so you need to keep them in the cage,

NOTE Confidence: 0.7860359333333333

 $00:26:25.800 \longrightarrow 00:26:28.170$ and this is a doda cage,

NOTE Confidence: 0.786035933333333

 $00:26:28.170 \longrightarrow 00:26:30.384$ so you would kill 8 the

NOTE Confidence: 0.786035933333333

 $00:26:30.384 \longrightarrow 00:26:32.829$ gallium 68 in this doda cage,

NOTE Confidence: 0.7860359333333333

 $00:26:32.830 \longrightarrow 00:26:35.126$ and what's really nice about this cage.

NOTE Confidence: 0.786035933333333

 $00:26:35.130 \longrightarrow 00:26:36.120$ It has a couple of.

NOTE Confidence: 0.786035933333333

 $00:26:36.120 \longrightarrow 00:26:39.744$ Four different arms and to these arms you

00:26:39.744 --> 00:26:42.659 can actually attach your targeting molecule,

NOTE Confidence: 0.786035933333333

 $00:26:42.659 \longrightarrow 00:26:45.497$ so in this case it's actually

NOTE Confidence: 0.786035933333333

00:26:45.497 --> 00:26:47.579 a tight analog Tate,

NOTE Confidence: 0.786035933333333

 $00:26:47.580 \longrightarrow 00:26:50.240$ so you attach this peptide to the

NOTE Confidence: 0.786035933333333

 $00:26:50.240 \longrightarrow 00:26:53.043$ doda and you have your radionuclide

NOTE Confidence: 0.786035933333333

 $00:26:53.043 \longrightarrow 00:26:55.673$ chelated inside of the Doda.

NOTE Confidence: 0.786035933333333

 $00:26:55.680 \longrightarrow 00:26:58.976$ So there's a very logical name to this.

NOTE Confidence: 0.786035933333333

 $00{:}26{:}58.980 \dashrightarrow 00{:}27{:}00.780$ This value attach it through

NOTE Confidence: 0.786035933333333

 $00:27:00.780 \longrightarrow 00:27:03.076$ the ARM gallium Doda date.

NOTE Confidence: 0.786035933333333

 $00:27:03.076 \longrightarrow 00:27:04.900$ Very simple, right?

NOTE Confidence: 0.7860359333333333

 $00{:}27{:}04.900 \dashrightarrow 00{:}27{:}06.610$ So now that you understand.

NOTE Confidence: 0.786035933333333

00:27:06.610 --> 00:27:09.570 This kind of logic it it becomes very

NOTE Confidence: 0.786035933333333

 $00{:}27{:}09.570 \dashrightarrow 00{:}27{:}12.707$ easy to understand how we mean these

NOTE Confidence: 0.786035933333333

 $00{:}27{:}12.710 \dashrightarrow 00{:}27{:}17.092$ scans and with the labeling you can

NOTE Confidence: 0.786035933333333

 $00:27:17.092 \longrightarrow 00:27:20.810$ actually really be able to see this.

 $00:27:20.810 \longrightarrow 00:27:24.104$ So this is a gallium dotate PET CT in

NOTE Confidence: 0.786035933333333

 $00:27:24.104 \longrightarrow 00:27:27.669$ a patient with multiple metastases.

NOTE Confidence: 0.786035933333333

 $00:27:27.670 \longrightarrow 00:27:29.730$ Some medicine receptor positive liver

NOTE Confidence: 0.786035933333333

 $00:27:29.730 \longrightarrow 00:27:32.129$ metastases and you can actually see

NOTE Confidence: 0.786035933333333

 $00:27:32.129 \longrightarrow 00:27:34.033$ that there is also a period where

NOTE Confidence: 0.786035933333333

 $00:27:34.033 \longrightarrow 00:27:36.190$ did metastasis in the lymph node

NOTE Confidence: 0.786035933333333

 $00:27:36.190 \longrightarrow 00:27:38.432$ that's outside of the liver and

NOTE Confidence: 0.786035933333333

 $00:27:38.432 \longrightarrow 00:27:42.110$ here you have kidneys and bladder.

NOTE Confidence: 0.786035933333333

 $00:27:42.110 \longrightarrow 00:27:44.702$ So it really helps you evaluate

NOTE Confidence: 0.786035933333333

 $00:27:44.702 \longrightarrow 00:27:47.078$ the patients in terms of the

NOTE Confidence: 0.786035933333333

 $00{:}27{:}47.078 \dashrightarrow 00{:}27{:}48.209$ appropriate use criteria.

NOTE Confidence: 0.786035933333333

00:27:48.210 --> 00:27:51.364 I'm so glad Doctor Kunz had a full

NOTE Confidence: 0.786035933333333

 $00:27:51.364 \longrightarrow 00:27:53.590$ slide on this in terms of evaluating.

NOTE Confidence: 0.7860359333333333

 $00{:}27{:}53.590 \dashrightarrow 00{:}27{:}57.086$ Not all patients need to be getting gallium

NOTE Confidence: 0.786035933333333

 $00:27:57.086 \longrightarrow 00:28:00.852$ daughter take pets and there's there.

NOTE Confidence: 0.786035933333333

 $00:28:00.852 \longrightarrow 00:28:03.384$ We're still truly evaluating exactly where

 $00:28:03.384 \longrightarrow 00:28:06.669$ and when we should be doing these scans,

NOTE Confidence: 0.786035933333333

 $00{:}28{:}06.670 \dashrightarrow 00{:}28{:}09.885$ but there's several indications

NOTE Confidence: 0.786035933333333

00:28:09.885 --> 00:28:12.400 that should that that can.

NOTE Confidence: 0.786035933333333

 $00:28:12.400 \longrightarrow 00:28:15.400$ That are appropriate and some of

NOTE Confidence: 0.786035933333333

 $00:28:15.400 \longrightarrow 00:28:18.056$ the most most indicative are the

NOTE Confidence: 0.786035933333333

 $00{:}28{:}18.056 \dashrightarrow 00{:}28{:}19.712$ initial staging after histologic

NOTE Confidence: 0.786035933333333

00:28:19.712 --> 00:28:21.488 diagnosis of neuroendocrine tumor

NOTE Confidence: 0.786035933333333

 $00{:}28{:}21.488 \to 00{:}28{:}23.708$ and localization of primary tumor

NOTE Confidence: 0.786035933333333

 $00:28:23.708 \longrightarrow 00:28:25.760$ and patients 'cause there this.

NOTE Confidence: 0.786035933333333

 $00{:}28{:}25.760 \dashrightarrow 00{:}28{:}28.190$ This skin is so sensitive form

NOTE Confidence: 0.7860359333333333

 $00:28:28.190 \longrightarrow 00:28:29.138$ for for lesions,

NOTE Confidence: 0.786035933333333

 $00:28:29.138 \longrightarrow 00:28:31.794$ so you'll be able to see it and

NOTE Confidence: 0.786035933333333

00:28:31.794 --> 00:28:33.649 then the other very common.

NOTE Confidence: 0.786035933333333

 $00{:}28{:}33.650 {\:\dashrightarrow\:} 00{:}28{:}35.695$ Very important point is selection

NOTE Confidence: 0.786035933333333

00:28:35.695 --> 00:28:38.240 of patients for some meta stat

 $00:28:38.240 \longrightarrow 00:28:39.956$ and receptive targeted therapy

NOTE Confidence: 0.786035933333333

 $00:28:39.956 \longrightarrow 00:28:42.101$ which we'll talk about it.

NOTE Confidence: 0.786035933333333

00:28:42.110 --> 00:28:45.463 Later now what's really nice about this

NOTE Confidence: 0.786035933333333

 $00:28:45.463 \longrightarrow 00:28:48.975$ therapy and this is where it's really

NOTE Confidence: 0.786035933333333

 $00:28:48.975 \longrightarrow 00:28:51.951$ revolutionary in medicine is that you

NOTE Confidence: 0.786035933333333

00:28:52.042 --> 00:28:55.304 can use this method to image your tumor,

NOTE Confidence: 0.786035933333333

 $00:28:55.304 \longrightarrow 00:28:57.464$ so you have your radionuclide.

NOTE Confidence: 0.786035933333333

 $00:28:57.470 \longrightarrow 00:28:59.774$ You have your cage and you

00:28:59.774 --> 00:29:01.310 have your targeting peptide,

NOTE Confidence: 0.786035933333333

 $00:29:01.310 \longrightarrow 00:29:03.984$ but then after you image the tumor,

NOTE Confidence: 0.786035933333333

 $00:29:03.990 \longrightarrow 00:29:07.050$ all you have to do is to pop this one

NOTE Confidence: 0.786035933333333

00:29:07.141 --> 00:29:12.265 out and pop lutetium 177 in so you keep.

NOTE Confidence: 0.786035933333333

 $00:29:12.265 \longrightarrow 00:29:13.325$ A molecule the same.

NOTE Confidence: 0.7860359333333333

 $00{:}29{:}13.330 \dashrightarrow 00{:}29{:}17.649$ You keep the targeting the same but.

NOTE Confidence: 0.767840264

00:29:17.650 --> 00:29:21.484 The radionuclide now is actually emitting

NOTE Confidence: 0.767840264

 $00{:}29{:}21.484 \dashrightarrow 00{:}29{:}26.688$ beta particles that can can act as a

 $00:29:26.688 \longrightarrow 00:29:29.336$ therapeutic for neuroendocrine tumors.

NOTE Confidence: 0.767840264

 $00:29:29.340 \longrightarrow 00:29:31.839$ So this would be called very logically.

NOTE Confidence: 0.767840264

00:29:31.840 --> 00:29:33.674 I know you're you're thinking about this.

NOTE Confidence: 0.767840264

 $00:29:33.680 \longrightarrow 00:29:36.480$ Lu teach to Doda tape.

NOTE Confidence: 0.767840264

 $00:29:36.480 \longrightarrow 00:29:38.560$ There you go. Very simple.

NOTE Confidence: 0.767840264

 $00:29:38.560 \longrightarrow 00:29:40.594$ So we imaged with gallium dotatate

NOTE Confidence: 0.767840264

 $00:29:40.594 \longrightarrow 00:29:42.806$ and we treat it with lutetium

NOTE Confidence: 0.767840264

 $00:29:42.806 \longrightarrow 00:29:45.164$ dotatate and the only thing that

NOTE Confidence: 0.767840264

 $00:29:45.164 \longrightarrow 00:29:47.648$ changed was the radionuclide inside.

NOTE Confidence: 0.767840264

 $00:29:47.650 \longrightarrow 00:29:50.778$ So you know this drop whatever we imaged.

NOTE Confidence: 0.767840264

 $00:29:50.780 \longrightarrow 00:29:54.218$ That's exactly where the treatment went.

NOTE Confidence: 0.767840264

00:29:54.220 --> 00:29:56.660 Now we don't just have to do lutetium,

NOTE Confidence: 0.767840264

00:29:56.660 --> 00:30:00.648 we can also use other radionuclides

NOTE Confidence: 0.767840264

 $00:30:00.648 \longrightarrow 00:30:03.902$ such as alpha emitters and here

NOTE Confidence: 0.767840264

 $00:30:03.902 \longrightarrow 00:30:06.079$ at Yale we're now are approved to

 $00:30:06.079 \longrightarrow 00:30:08.342$ start doing this and it's very

NOTE Confidence: 0.767840264

 $00:30:08.342 \longrightarrow 00:30:10.222$ exciting new development to start

NOTE Confidence: 0.767840264

 $00:30:10.292 \longrightarrow 00:30:12.497$ doing these therapies in patients.

NOTE Confidence: 0.767840264

00:30:12.500 --> 00:30:16.496 So how do these alpha and beta emitters work?

NOTE Confidence: 0.767840264

 $00:30:16.500 \longrightarrow 00:30:20.307$ Well for lutetium and this is an image from.

NOTE Confidence: 0.7648798

 $00:30:22.880 \longrightarrow 00:30:27.245$ AAA a website where basically describes

NOTE Confidence: 0.7648798

 $00{:}30{:}27.245 \dashrightarrow 00{:}30{:}30{:}860$ the mechanism of luthera and you

NOTE Confidence: 0.7648798

 $00:30:30.860 \longrightarrow 00:30:33.620$ administer the drug intravenously.

NOTE Confidence: 0.7648798

 $00:30:33.620 \longrightarrow 00:30:36.560$ The drug gets taken up into the

NOTE Confidence: 0.7648798

 $00:30:36.560 \longrightarrow 00:30:37.820$ neuroendocrine tumor sides.

NOTE Confidence: 0.7648798

 $00{:}30{:}37.820 \dashrightarrow 00{:}30{:}39.992$ The drug binds to the receptors

NOTE Confidence: 0.7648798

 $00:30:39.992 \longrightarrow 00:30:42.365$ on the tumor sides and gets

NOTE Confidence: 0.7648798

 $00{:}30{:}42.365 \dashrightarrow 00{:}30{:}44.485$ internalized inside of the cell.

NOTE Confidence: 0.7648798

 $00:30:44.490 \longrightarrow 00:30:47.725$ Through endocytosis and the radionuclide

NOTE Confidence: 0.7648798

00:30:47.725 --> 00:30:50.960 emits its particles beta particles,

NOTE Confidence: 0.7648798

 $00:30:50.960 \longrightarrow 00:30:55.656$ or if using that actinium type of therapy.

 $00:30:55.660 \longrightarrow 00:30:57.900$ Luther, it's really the beta

NOTE Confidence: 0.7648798

 $00:30:57.900 \longrightarrow 00:30:59.692$ particles because it's lutetium

NOTE Confidence: 0.7648798

 $00:30:59.700 \longrightarrow 00:31:03.060$ 177 and that can cause DNA damage.

NOTE Confidence: 0.7648798

 $00:31:03.060 \longrightarrow 00:31:05.468$ And once you have DNA damage you can

NOTE Confidence: 0.7648798

 $00{:}31{:}05.468 \dashrightarrow 00{:}31{:}07.807$ that can lead to tumor cell death.

NOTE Confidence: 0.7648798

 $00:31:07.810 \longrightarrow 00:31:10.869$ And that's and that's the main mechanism.

NOTE Confidence: 0.7648798

 $00:31:10.870 \longrightarrow 00:31:14.510$ So to just kind of overview this again

NOTE Confidence: 0.7648798

 $00{:}31{:}14.510 \dashrightarrow 00{:}31{:}16.910$ in terms of image guided the rapy,

NOTE Confidence: 0.7648798

00:31:16.910 --> 00:31:19.808 you can select patients for whether

NOTE Confidence: 0.7648798

 $00:31:19.808 \longrightarrow 00:31:23.263$ they are eligible for this kind of

NOTE Confidence: 0.7648798

 $00:31:23.263 \longrightarrow 00:31:25.648$ therapy with your imaging agent,

NOTE Confidence: 0.7648798

00:31:25.650 --> 00:31:26.506 gallium dotatate.

NOTE Confidence: 0.7648798

 $00{:}31{:}26.506 \dashrightarrow 00{:}31{:}29.930$ And you can see if the patient expresses

NOTE Confidence: 0.7648798

 $00:31:30.003 \longrightarrow 00:31:33.243$ this amount of statin receptors in the body,

NOTE Confidence: 0.7648798

 $00:31:33.250 \longrightarrow 00:31:34.880$ and in this particular patient

 $00:31:34.880 \longrightarrow 00:31:36.510$ there are multiple metastatic lesion

NOTE Confidence: 0.7648798

 $00:31:36.568 \longrightarrow 00:31:38.080$ that can take up the targeting.

NOTE Confidence: 0.7648798

00:31:38.080 --> 00:31:38.539 Molecule,

NOTE Confidence: 0.7648798

 $00:31:38.539 \longrightarrow 00:31:41.752$ then you bring the patient in and

NOTE Confidence: 0.7648798

00:31:41.752 --> 00:31:44.429 you provide intravenous therapy.

NOTE Confidence: 0.7648798

 $00:31:44.430 \longrightarrow 00:31:46.590$ And that is basically the same

NOTE Confidence: 0.7648798

 $00:31:46.590 \longrightarrow 00:31:48.030$ as the imaging agent,

NOTE Confidence: 0.7648798

 $00:31:48.030 \longrightarrow 00:31:50.440$ except it has the radionuclide

NOTE Confidence: 0.7648798

00:31:50.440 --> 00:31:52.368 that causes DNA damage.

NOTE Confidence: 0.7648798

 $00:31:52.370 \longrightarrow 00:31:54.598$ And what's really interesting

NOTE Confidence: 0.7648798

 $00:31:54.598 \longrightarrow 00:31:59.350$ is that lutetium can also emit.

NOTE Confidence: 0.7648798

 $00:31:59.350 \longrightarrow 00:32:01.966$ Image trace that you can see on camera

NOTE Confidence: 0.7648798

 $00:32:01.966 \longrightarrow 00:32:04.647$ on gamma camera and you can basically

NOTE Confidence: 0.7648798

 $00:32:04.650 \longrightarrow 00:32:07.980$ see exactly where lutetium dotatate went.

NOTE Confidence: 0.7648798

 $00:32:07.980 \longrightarrow 00:32:09.535$ Now it's not as crisp

NOTE Confidence: 0.7648798

 $00:32:09.535 \longrightarrow 00:32:11.090$ and beautiful as pet CT,

 $00:32:11.090 \longrightarrow 00:32:13.665$ but you can actually see

NOTE Confidence: 0.7648798

 $00:32:13.665 \longrightarrow 00:32:15.725$ where this therapy went.

NOTE Confidence: 0.7648798

00:32:15.730 --> 00:32:18.415 And you can actually start

NOTE Confidence: 0.7648798

 $00:32:18.415 \longrightarrow 00:32:20.026$ doing those symmetry.

NOTE Confidence: 0.7648798

 $00:32:20.030 \longrightarrow 00:32:23.720$ These images so this kind of technology

NOTE Confidence: 0.7648798

 $00:32:23.720 \longrightarrow 00:32:25.975$ allows selection of right patient

NOTE Confidence: 0.7648798

 $00:32:25.975 \longrightarrow 00:32:28.742$ and providing the right drug for

NOTE Confidence: 0.7648798

 $00:32:28.742 \longrightarrow 00:32:30.922$ the patient and in neuroendocrine

NOTE Confidence: 0.7648798

 $00{:}32{:}30.922 \dashrightarrow 00{:}32{:}33.547$ tumors that has really changed how

NOTE Confidence: 0.7648798

 $00:32:33.547 \longrightarrow 00:32:35.947$ we change how we treat patients.

NOTE Confidence: 0.7648798

 $00:32:35.950 \longrightarrow 00:32:38.938$ So the indications for lutetium dotatate.

NOTE Confidence: 0.889463958571429

 $00:32:41.070 \longrightarrow 00:32:43.898$ So these are the GI neuroendocrine tumors

NOTE Confidence: 0.889463958571429

 $00{:}32{:}43.898 \dashrightarrow 00{:}32{:}47.100$ and they have to be well differentiated.

NOTE Confidence: 0.889463958571429

 $00:32:47.100 \longrightarrow 00:32:48.728$ G1 and G2 tumors.

NOTE Confidence: 0.889463958571429

 $00:32:48.728 \longrightarrow 00:32:51.170$ We need to confirm some metastatic

 $00:32:51.254 \longrightarrow 00:32:54.164$ receptor expression and that can be

NOTE Confidence: 0.889463958571429

 $00:32:54.164 \longrightarrow 00:32:56.739$ done with gallium dotatate PET CT.

NOTE Confidence: 0.889463958571429

 $00:32:56.740 \longrightarrow 00:32:58.948$ We're still allowed to use octreoscan

NOTE Confidence: 0.889463958571429

 $00:32:58.948 \longrightarrow 00:33:01.390$ and sometimes we will use it if

NOTE Confidence: 0.889463958571429

00:33:01.390 --> 00:33:03.490 insurance will deny that the pet city,

NOTE Confidence: 0.889463958571429

 $00:33:03.490 \longrightarrow 00:33:05.296$ but you really want to be

NOTE Confidence: 0.889463958571429

 $00:33:05.296 \longrightarrow 00:33:07.069$ doing this with a pet CT.

NOTE Confidence: 0.889463958571429

 $00:33:07.070 \longrightarrow 00:33:09.476$ We also evaluate bone marrow function,

NOTE Confidence: 0.889463958571429

 $00:33:09.480 \longrightarrow 00:33:11.260$ renal function, and liver function.

NOTE Confidence: 0.889463958571429

 $00:33:11.260 \longrightarrow 00:33:15.108$ Yes, and this is the point where nuclear

NOTE Confidence: 0.889463958571429

 $00{:}33{:}15.108 \dashrightarrow 00{:}33{:}17.644$ medicine physicians are starting to

NOTE Confidence: 0.889463958571429

 $00:33:17.644 \longrightarrow 00:33:20.038$ become partners with oncologists and

NOTE Confidence: 0.889463958571429

 $00:33:20.038 \longrightarrow 00:33:22.834$ surgeons in treatment of these patients.

NOTE Confidence: 0.889463958571429

 $00:33:22.840 \longrightarrow 00:33:24.947$ Because we no longer just read the

NOTE Confidence: 0.889463958571429

00:33:24.947 --> 00:33:26.460 images were actually evaluated.

NOTE Confidence: 0.889463958571429

 $00:33:26.460 \longrightarrow 00:33:27.915$ Whether the patient is eligible

 $00:33:27.915 \longrightarrow 00:33:29.940$ for the study and we evaluate,

NOTE Confidence: 0.889463958571429

 $00{:}33{:}29.940 \to 00{:}33{:}32.580$ follow up, and we do those symmetry.

NOTE Confidence: 0.889463958571429

00:33:32.580 --> 00:33:35.744 And this is of patient oriented,

NOTE Confidence: 0.889463958571429

00:33:35.744 --> 00:33:38.704 patient facing role for nuclear

NOTE Confidence: 0.889463958571429

 $00:33:38.704 \longrightarrow 00:33:42.336$ medicine physicians and radiologists.

NOTE Confidence: 0.889463958571429

 $00:33:42.336 \longrightarrow 00:33:43.559$ Now.

NOTE Confidence: 0.889463958571429

 $00:33:43.560 \longrightarrow 00:33:46.254$ Even though the letter one has

NOTE Confidence: 0.889463958571429

 $00{:}33{:}46.254 \dashrightarrow 00{:}33{:}48.050$ established the parameters for

NOTE Confidence: 0.889463958571429

 $00:33:48.133 \longrightarrow 00:33:50.664$ treatment of patients with Sarah,

NOTE Confidence: 0.889463958571429

 $00:33:50.664 \longrightarrow 00:33:53.120$ but we are still,

NOTE Confidence: 0.889463958571429

 $00:33:53.120 \longrightarrow 00:33:55.796$ we're still figuring out the exact

NOTE Confidence: 0.889463958571429

 $00:33:55.796 \longrightarrow 00:33:58.072$ guidelines for which patients will

NOTE Confidence: 0.889463958571429

 $00{:}33{:}58.072 \dashrightarrow 00{:}33{:}59.846$ benefit most, and they're still.

NOTE Confidence: 0.889463958571429

 $00:33:59.846 \longrightarrow 00:34:01.718$ There's a lot of active research

NOTE Confidence: 0.889463958571429

 $00:34:01.718 \longrightarrow 00:34:03.020$ going on in this field,

 $00:34:03.020 \longrightarrow 00:34:05.388$ and it's very exciting to be part of

NOTE Confidence: 0.889463958571429

 $00{:}34{:}05.388 \dashrightarrow 00{:}34{:}07.527$ this field as we're expanding beyond

NOTE Confidence: 0.889463958571429

 $00:34:07.527 \longrightarrow 00:34:09.980$ the netter one. Trial indications.

NOTE Confidence: 0.793383492

00:34:12.340 --> 00:34:13.604 But you're probably thinking,

NOTE Confidence: 0.793383492

 $00:34:13.604 \longrightarrow 00:34:16.428$ well, what about FDG?

NOTE Confidence: 0.793383492

00:34:16.430 --> 00:34:18.932 GS News and pretty much every

NOTE Confidence: 0.793383492

 $00{:}34{:}18.932 \dashrightarrow 00{:}34{:}21.070$ other on cological indication.

NOTE Confidence: 0.793383492

00:34:21.070 --> 00:34:23.430 How about your endocrine tumors?

NOTE Confidence: 0.793383492

 $00:34:23.430 \longrightarrow 00:34:27.548$ Well, a lot of the well differentiated

NOTE Confidence: 0.793383492

 $00:34:27.550 \longrightarrow 00:34:29.986$ G1 on your endocrine tumors are

NOTE Confidence: 0.793383492

 $00{:}34{:}29.986 \dashrightarrow 00{:}34{:}31.204$ actually not hypermetabolic,

NOTE Confidence: 0.793383492

 $00:34:31.210 \longrightarrow 00:34:33.268$ so we there's really no no role

NOTE Confidence: 0.793383492

00:34:33.268 --> 00:34:36.362 for our DG in the in the well in

NOTE Confidence: 0.793383492

 $00:34:36.362 \longrightarrow 00:34:37.790$ the well differentiated once,

NOTE Confidence: 0.793383492

 $00:34:37.790 \longrightarrow 00:34:40.405$ and there is the spectrum

NOTE Confidence: 0.793383492

 $00:34:40.405 \longrightarrow 00:34:44.175$ that the tumors will express.

 $00:34:44.175 \longrightarrow 00:34:46.065$ A lot of this medicine receptor

NOTE Confidence: 0.793383492

 $00:34:46.065 \longrightarrow 00:34:47.676$ and will not have as much.

NOTE Confidence: 0.793383492

00:34:47.680 --> 00:34:49.010 Hypermetabolic activity,

NOTE Confidence: 0.793383492

 $00:34:49.010 \longrightarrow 00:34:52.335$ but the higher grade tumors.

NOTE Confidence: 0.793383492

 $00:34:52.340 \longrightarrow 00:34:53.330$ Then you're in different parts.

NOTE Confidence: 0.793383492

 $00:34:53.330 \longrightarrow 00:34:55.980$ Sonoma is Angie 3 tumors.

NOTE Confidence: 0.793383492

 $00:34:55.980 \longrightarrow 00:34:59.060$ They will have hypermetabolic

NOTE Confidence: 0.793383492

 $00{:}34{:}59.060 \dashrightarrow 00{:}35{:}01.560$ activity and there's still a lot of

NOTE Confidence: 0.793383492

 $00:35:01.560 \dashrightarrow 00:35:02.880$ Gray area in between them as well,

NOTE Confidence: 0.793383492

 $00{:}35{:}02.880 \to 00{:}35{:}04.830$ because sometimes they look the

NOTE Confidence: 0.793383492

 $00:35:04.830 \longrightarrow 00:35:06.780$ lower grade tumors will also

NOTE Confidence: 0.793383492

00:35:06.852 --> 00:35:08.739 have hypermetabolic activity,

NOTE Confidence: 0.793383492

 $00{:}35{:}08.740 --> 00{:}35{:}10.535$ but in nuclear medicine we

NOTE Confidence: 0.793383492

 $00:35:10.535 \longrightarrow 00:35:12.330$ have this idea that there's

NOTE Confidence: 0.793383492

 $00:35:12.398 \longrightarrow 00:35:14.459$ dedifferentiation that happens.

 $00:35:14.460 \longrightarrow 00:35:16.210$ So this is a patient with a

NOTE Confidence: 0.793383492

 $00{:}35{:}16.210 \dashrightarrow 00{:}35{:}16.960$ well differentiated neuron,

NOTE Confidence: 0.793383492

 $00:35:16.960 \longrightarrow 00:35:17.982$ different tumor.

NOTE Confidence: 0.793383492

 $00:35:17.982 \longrightarrow 00:35:20.026$ With multiple somatostatin receptor

NOTE Confidence: 0.793383492

 $00:35:20.026 \longrightarrow 00:35:23.515$ avid lesions and this is a patient

NOTE Confidence: 0.793383492

 $00:35:23.515 \longrightarrow 00:35:25.339$ that had dedifferentiation that

NOTE Confidence: 0.793383492

00:35:25.339 --> 00:35:27.658 neural different from which the

NOTE Confidence: 0.793383492

00:35:27.658 --> 00:35:29.410 tumor is now hypermetabolic,

NOTE Confidence: 0.793383492

 $00:35:29.410 \longrightarrow 00:35:32.154$ and this tumor may actually be a

NOTE Confidence: 0.793383492

00:35:32.154 --> 00:35:34.909 photo piknic Ondo Dotate pet as well,

NOTE Confidence: 0.793383492

 $00{:}35{:}34.910 {\:{\mbox{--}}\!>} 00{:}35{:}36.926$ or it can actually expect express

NOTE Confidence: 0.793383492

 $00{:}35{:}36.926 \dashrightarrow 00{:}35{:}38.270$ sounds of medicine receptors,

NOTE Confidence: 0.793383492

 $00:35:38.270 \longrightarrow 00:35:39.782$ but not as many.

NOTE Confidence: 0.793383492

 $00:35:39.782 \longrightarrow 00:35:42.050$ So the exact point where we

NOTE Confidence: 0.793383492

 $00:35:42.145 \longrightarrow 00:35:44.469$ would treat these patients,

NOTE Confidence: 0.793383492

 $00:35:44.470 \longrightarrow 00:35:48.138$ particularly the ones that have FDG uptake.

 $00:35:48.140 \longrightarrow 00:35:50.180$ Is still not fully evaluated,

NOTE Confidence: 0.793383492

 $00:35:50.180 \longrightarrow 00:35:51.680$ but hypermetabolic activity

NOTE Confidence: 0.793383492

 $00:35:51.680 \longrightarrow 00:35:54.680$ within these tumors is seen as

NOTE Confidence: 0.793383492

 $00:35:54.680 \longrightarrow 00:35:57.180$ a poor prognostic marker.

NOTE Confidence: 0.793383492

 $00:35:57.180 \longrightarrow 00:36:00.650$ So in terms of PRT treatment,

NOTE Confidence: 0.793383492

 $00:36:00.650 \longrightarrow 00:36:02.295$ the details for this treatment

NOTE Confidence: 0.793383492

 $00:36:02.295 \longrightarrow 00:36:03.940$ is we do right now.

NOTE Confidence: 0.793383492

 $00:36:03.940 \longrightarrow 00:36:06.325$ Standard dose of 200 millicuries

NOTE Confidence: 0.793383492

 $00{:}36{:}06.325 \dashrightarrow 00{:}36{:}09.800$ every eight weeks and we do 8 cycles.

NOTE Confidence: 0.793383492

 $00:36:09.800 \longrightarrow 00:36:12.719$ During the therapy we do an amino

NOTE Confidence: 0.793383492

 $00:36:12.719 \longrightarrow 00:36:15.360$ acid infusion for renal protection

NOTE Confidence: 0.793383492

 $00{:}36{:}15.360 \dashrightarrow 00{:}36{:}19.590$ and we provide antiemetics for nausea

NOTE Confidence: 0.793383492

 $00{:}36{:}19.590 \dashrightarrow 00{:}36{:}21.815$ and patients usually will continue

NOTE Confidence: 0.793383492

 $00:36:21.815 \longrightarrow 00:36:23.924$ somatostatin and lock therapy at

NOTE Confidence: 0.793383492

00:36:23.924 --> 00:36:26.076 this during PRT treatment now.

 $00:36:26.076 \longrightarrow 00:36:29.806$ None of you are thinking well. What if?

NOTE Confidence: 0.793383492

 $00:36:29.806 \longrightarrow 00:36:34.310$ How do how do we treat a patient?

NOTE Confidence: 0.793383492

 $00:36:34.310 \longrightarrow 00:36:37.236$ Every single patient with the same dose?

NOTE Confidence: 0.793383492

00:36:37.240 --> 00:36:39.328 And you're thinking right,

NOTE Confidence: 0.793383492

 $00:36:39.328 \longrightarrow 00:36:42.460$ the whole field of theranostics right

NOTE Confidence: 0.793383492

 $00{:}36{:}42.551 \dashrightarrow 00{:}36{:}45.100$ now and treatment PRT treatment

NOTE Confidence: 0.793383492

 $00:36:45.100 \longrightarrow 00:36:47.420$ is moving towards personalized

NOTE Confidence: 0.793383492

 $00:36:47.420 \longrightarrow 00:36:50.524$ of symmetry and that is becoming

NOTE Confidence: 0.793383492

00:36:50.524 --> 00:36:53.460 a big talking point with Society

NOTE Confidence: 0.793383492

 $00:36:53.460 \longrightarrow 00:36:55.660$ of nuclear medicine and molecular

NOTE Confidence: 0.793383492

 $00{:}36{:}55.660 {\:{\mbox{--}}}{>} 00{:}36{:}57.880$ imaging and major initiatives.

NOTE Confidence: 0.793383492

 $00{:}36{:}57.880 \dashrightarrow 00{:}36{:}59.680$ Industry are being taken.

NOTE Confidence: 0.814651204

 $00:37:01.750 \longrightarrow 00:37:04.320$ And the reason is there,

NOTE Confidence: 0.814651204

 $00{:}37{:}04.320 \to 00{:}37{:}07.242$ nastix agents are becoming more and

NOTE Confidence: 0.814651204

 $00:37:07.242 \longrightarrow 00:37:09.691$ more available for different cancers

NOTE Confidence: 0.814651204

 $00:37:09.691 \longrightarrow 00:37:12.786$ and in prostate cancer will have a

 $00:37:12.786 \longrightarrow 00:37:15.122$ new theranostic agent that's very

NOTE Confidence: 0.814651204

 $00:37:15.122 \dashrightarrow 00:37:18.594$ likely to be FDA approved next month.

NOTE Confidence: 0.814651204

 $00:37:18.600 \longrightarrow 00:37:21.240$ And with that targeted therapy,

NOTE Confidence: 0.814651204

 $00:37:21.240 \longrightarrow 00:37:23.337$ you want to think about it in a couple

NOTE Confidence: 0.814651204

 $00:37:23.337 \longrightarrow 00:37:25.226$ different ways and just in terms of

NOTE Confidence: 0.814651204

00:37:25.226 --> 00:37:27.158 global way with with their Gnostics,

NOTE Confidence: 0.814651204

 $00:37:27.160 \longrightarrow 00:37:29.449$ you can image the targets such as

NOTE Confidence: 0.814651204

 $00:37:29.449 \longrightarrow 00:37:31.967$ location of the tumors and that way

NOTE Confidence: 0.814651204

 $00:37:31.967 \dashrightarrow 00:37:33.802$ you can provide targeted therapy

NOTE Confidence: 0.814651204

 $00:37:33.802 \longrightarrow 00:37:36.310$ in terms of location of the tumor,

NOTE Confidence: 0.814651204

 $00:37:36.310 \dashrightarrow 00:37:38.123$ because you can see where the drug

NOTE Confidence: 0.814651204

 $00:37:38.123 \longrightarrow 00:37:40.596$ is and then you can just exchange the

NOTE Confidence: 0.814651204

 $00:37:40.596 \dashrightarrow 00:37:42.740$ radionuclide and and target that the rapy.

NOTE Confidence: 0.814651204

 $00:37:42.740 \longrightarrow 00:37:44.896$ You can also think of targeted therapy

NOTE Confidence: 0.814651204

 $00:37:44.896 \longrightarrow 00:37:47.191$ in another way where you target as

 $00:37:47.191 \longrightarrow 00:37:49.147$ particular step in the mechanism of.

NOTE Confidence: 0.814651204

 $00:37:49.150 \longrightarrow 00:37:52.640$ Therapy, and that is targeting

NOTE Confidence: 0.814651204

 $00:37:52.640 \longrightarrow 00:37:55.432$ a specific pathway step.

NOTE Confidence: 0.814651204

 $00:37:55.440 \longrightarrow 00:37:58.430$ So for FDA approved radiopharmaceuticals

NOTE Confidence: 0.814651204

 $00:37:58.430 \longrightarrow 00:38:01.420$ there's really been an explosion

NOTE Confidence: 0.814651204

 $00:38:01.502 \longrightarrow 00:38:03.138$ in the recent years.

NOTE Confidence: 0.814651204

 $00:38:03.140 \dashrightarrow 00:38:06.180$ So it we really kind of started with

NOTE Confidence: 0.814651204

00:38:06.180 --> 00:38:09.754 a cold see lemon cooling for prostate

NOTE Confidence: 0.814651204

 $00{:}38{:}09.754 \dashrightarrow 00{:}38{:}11.992$ cancer and gallium dotatate was

NOTE Confidence: 0.814651204

00:38:11.992 --> 00:38:14.107 approved when you're entering tumors

NOTE Confidence: 0.814651204

 $00:38:14.107 \longrightarrow 00:38:16.664$ in 2016 and then was followed by

NOTE Confidence: 0.814651204

 $00:38:16.664 \longrightarrow 00:38:18.783$ Gallium Delta talk and the difference

NOTE Confidence: 0.814651204

 $00:38:18.783 \longrightarrow 00:38:21.798$ between Tate and talk is in the peptide

NOTE Confidence: 0.814651204

 $00:38:21.798 \longrightarrow 00:38:24.785$ portion of the targeting agent.

NOTE Confidence: 0.814651204

00:38:24.785 --> 00:38:27.550 And in there they work pretty much

NOTE Confidence: 0.814651204

 $00:38:27.550 \longrightarrow 00:38:31.450$ the same in terms of ability to

 $00:38:31.450 \longrightarrow 00:38:33.222$ detect some metastatic receptors.

NOTE Confidence: 0.814651204

 $00:38:33.222 \longrightarrow 00:38:36.887$ We also now have a copper 64

NOTE Confidence: 0.814651204

 $00:38:36.887 \longrightarrow 00:38:39.908$ labeled DOTATATE and.

NOTE Confidence: 0.814651204

 $00:38:39.910 \longrightarrow 00:38:43.606$ The therapy for lutetium builder did was.

NOTE Confidence: 0.814651204

 $00:38:43.610 \longrightarrow 00:38:45.822$ He has also been FDA approved for

NOTE Confidence: 0.814651204

00:38:45.822 --> 00:38:48.328 quite a while now and it was basically

NOTE Confidence: 0.814651204

00:38:48.328 --> 00:38:50.700 approved based on the meter one trial,

NOTE Confidence: 0.814651204

 $00:38:50.700 \longrightarrow 00:38:53.032$ which showed improved progression

NOTE Confidence: 0.814651204

 $00:38:53.032 \dashrightarrow 00:38:57.166$ free survival in these patients and I

NOTE Confidence: 0.814651204

00:38:57.166 --> 00:39:00.424 really appreciate Doctor Koontz going over.

NOTE Confidence: 0.814651204

 $00:39:00.430 \longrightarrow 00:39:04.451$ For this so for future directions we

NOTE Confidence: 0.814651204

 $00{:}39{:}04.451 \dashrightarrow 00{:}39{:}07.697$ have to evaluate PRT efficacy and

NOTE Confidence: 0.814651204

 $00{:}39{:}07.697 \dashrightarrow 00{:}39{:}10.250$ higher grade neuroendocrine neoplasms.

NOTE Confidence: 0.814651204

 $00:39:10.250 \longrightarrow 00:39:14.186$ We're also working on personalized symmetry,

NOTE Confidence: 0.814651204

 $00:39:14.190 \longrightarrow 00:39:17.060$ so providing the right dose to the

00:39:17.060 --> 00:39:19.302 patient and hopefully see better

NOTE Confidence: 0.814651204

00:39:19.302 --> 00:39:20.706 outcomes in patients,

NOTE Confidence: 0.814651204

 $00:39:20.710 \longrightarrow 00:39:23.356$ and we need to evaluate indications

NOTE Confidence: 0.814651204

 $00:39:23.356 \longrightarrow 00:39:25.930$ for re treatment of patients.

NOTE Confidence: 0.814651204

 $00:39:25.930 \longrightarrow 00:39:28.000$ So after they completed the four

NOTE Confidence: 0.814651204

 $00:39:28.000 \longrightarrow 00:39:29.035$ cycles of therapy,

NOTE Confidence: 0.814651204

 $00:39:29.040 \longrightarrow 00:39:30.990$ what are the indications for repeat?

NOTE Confidence: 0.814651204

 $00:39:30.990 \longrightarrow 00:39:33.770$ Treatment another cycle of therapy

NOTE Confidence: 0.814651204

 $00:39:33.770 \longrightarrow 00:39:37.466$ and also of the alpha therapeutics.

NOTE Confidence: 0.814651204

 $00:39:37.470 \longrightarrow 00:39:39.588$ And another thing that we're working

NOTE Confidence: 0.814651204

 $00{:}39{:}39.588 \dashrightarrow 00{:}39{:}43.082$ on here at Yale is personalized tumor

NOTE Confidence: 0.814651204

 $00:39:43.082 \longrightarrow 00:39:48.503$ directed analysis with basically doing

NOTE Confidence: 0.814651204

 $00{:}39{:}48.503 \dashrightarrow 00{:}39{:}51.268$ volumetric assessment of the different

NOTE Confidence: 0.814651204

00:39:51.270 --> 00:39:53.798 metastases and generating growth

NOTE Confidence: 0.814651204

 $00:39:53.798 \longrightarrow 00:39:57.590$ curves for each individual lesion in

NOTE Confidence: 0.814651204

 $00:39:57.681 \longrightarrow 00:40:01.065$ the in volumetric form and following.

 $00{:}40{:}01.070 \dashrightarrow 00{:}40{:}03.794$ Physical growth parks and figuring out

NOTE Confidence: 0.814651204

 $00{:}40{:}03.794 \dashrightarrow 00{:}40{:}06.682$ which lesions are growing and needs

NOTE Confidence: 0.814651204

 $00:40:06.682 \longrightarrow 00:40:08.670$ targeted therapy through different

NOTE Confidence: 0.814651204

 $00:40:08.670 \longrightarrow 00:40:14.550$ ways and which ones are not so, so.

NOTE Confidence: 0.814651204

00:40:14.550 --> 00:40:15.390 In conclusion,

NOTE Confidence: 0.814651204

 $00:40:15.390 \longrightarrow 00:40:17.910$ cross sectional imaging with CT and

NOTE Confidence: 0.814651204

00:40:17.910 --> 00:40:20.462 MRI can can diagnose and follow

NOTE Confidence: 0.814651204

 $00{:}40{:}20.462 {\:{\mbox{--}}\!>\:} 00{:}40{:}22.522$ in your Endocrine meal Plaza.

NOTE Confidence: 0.814651204

 $00:40:22.530 \longrightarrow 00:40:26.965$ And it's they're really excellent ways

NOTE Confidence: 0.814651204

 $00:40:26.965 \longrightarrow 00:40:31.342$ to do imaging for these patients, but.

NOTE Confidence: 0.814651204

 $00{:}40{:}31.342 \dashrightarrow 00{:}40{:}34.052$ And molecular imaging of somatostatin

NOTE Confidence: 0.814651204

 $00{:}40{:}34.052 \dashrightarrow 00{:}40{:}37.115$ receptor expression allows for better

NOTE Confidence: 0.814651204

 $00:40:37.115 \longrightarrow 00:40:40.274$ molecular characterization of new rendering.

NOTE Confidence: 0.814651204

 $00:40:40.274 \longrightarrow 00:40:41.290$ Neil plasm's.

NOTE Confidence: 0.814651204

 $00:40:41.290 \longrightarrow 00:40:44.326$ Gallium Dotatate pet is very sensitive

 $00:40:44.326 \longrightarrow 00:40:46.900$ for detection of metastatic lesions

NOTE Confidence: 0.814651204

 $00:40:46.900 \longrightarrow 00:40:49.714$ and allows to evaluate whether patient

NOTE Confidence: 0.814651204

 $00:40:49.714 \longrightarrow 00:40:53.065$ is is eligible for PRT lutetium

NOTE Confidence: 0.814651204

 $00:40:53.065 \longrightarrow 00:40:55.365$ dotatate therapy is established

NOTE Confidence: 0.814651204

 $00:40:55.365 \longrightarrow 00:40:59.030$ and allows to treat some medicine

NOTE Confidence: 0.814651204

 $00:40:59.030 \longrightarrow 00:41:01.426$ and receptor tumors expressing

NOTE Confidence: 0.14260687

 $00:41:01.430 \longrightarrow 00:41:02.070$ some extra.

NOTE Confidence: 0.3341915168

 $00:41:04.170 \longrightarrow 00:41:06.210$ Staten receptor expressing neuron doctrine,

NOTE Confidence: 0.3341915168

 $00{:}41{:}06.210 \dashrightarrow 00{:}41{:}08.838$ neoplasms, and it allows us to

NOTE Confidence: 0.3341915168

00:41:08.838 --> 00:41:11.540 visualize the location of the therapy

NOTE Confidence: 0.3341915168

 $00:41:11.540 \longrightarrow 00:41:13.475$ and many advances for personalized

NOTE Confidence: 0.3341915168

00:41:13.475 --> 00:41:15.700 therapy are being evaluated right now,

NOTE Confidence: 0.3341915168

 $00:41:15.700 \longrightarrow 00:41:18.374$ so stay tuned to this field 'cause

NOTE Confidence: 0.3341915168

00:41:18.374 --> 00:41:20.220 it's really changing how we're

NOTE Confidence: 0.3341915168

 $00:41:20.220 \longrightarrow 00:41:21.944$ managing their endocrine schermers.

NOTE Confidence: 0.3341915168

00:41:21.944 --> 00:41:25.626 I really want to thank you for your time

 $00:41:25.626 \longrightarrow 00:41:28.430$ and pass the Bhutan to doctor Sajid Khan.

NOTE Confidence: 0.810156386

00:41:41.280 --> 00:41:43.010 You're on mute. Doctor Khan.

NOTE Confidence: 0.942148555714286

00:41:57.400 --> 00:42:00.375 OK, OK, I think I'm unmuted now.

NOTE Confidence: 0.942148555714286

 $00:42:00.380 \longrightarrow 00:42:01.660$ I'm is that right?

NOTE Confidence: 0.942148555714286

00:42:01.660 --> 00:42:03.784 OK, yes, OK, alright.

NOTE Confidence: 0.942148555714286

00:42:03.784 --> 00:42:05.794 Thank you Doctor rebellion that

NOTE Confidence: 0.942148555714286

 $00:42:05.794 \longrightarrow 00:42:08.300$ was just an outstanding talk.

NOTE Confidence: 0.942148555714286

 $00:42:08.300 \longrightarrow 00:42:10.360$ I learned a lot from that talk and I'm sure

NOTE Confidence: 0.942148555714286

 $00{:}42{:}10.414 \dashrightarrow 00{:}42{:}12.478$ other people in the audience learned a lot.

NOTE Confidence: 0.942148555714286

 $00:42:12.480 \longrightarrow 00:42:16.224$ And Doctor Kunz talk was also at standing.

NOTE Confidence: 0.942148555714286

00:42:16.230 --> 00:42:18.118 So, uh, you know, so I'm going to

NOTE Confidence: 0.942148555714286

00:42:18.118 --> 00:42:20.192 spend the next 20 minutes talking to

NOTE Confidence: 0.942148555714286

 $00{:}42{:}20.192 \dashrightarrow 00{:}42{:}22.450$ you from a slightly different perspective,

NOTE Confidence: 0.942148555714286

 $00:42:22.450 \longrightarrow 00:42:25.600$ and one that will include the surgical

NOTE Confidence: 0.942148555714286

 $00:42:25.600 \longrightarrow 00:42:27.490$ management of neuroendocrine tumors.

 $00:42:27.490 \longrightarrow 00:42:30.196$ And since just the surgical management

NOTE Confidence: 0.942148555714286

 $00:42:30.196 \longrightarrow 00:42:32.300$ of neuroendocrine tumors is a

NOTE Confidence: 0.942148555714286

 $00:42:32.300 \longrightarrow 00:42:34.550$ large topic in and of itself,

NOTE Confidence: 0.942148555714286

 $00:42:34.550 \longrightarrow 00:42:36.560$ no, over the next 20 minutes,

NOTE Confidence: 0.942148555714286

 $00:42:36.560 \longrightarrow 00:42:37.852$ I'll focus specifically on

NOTE Confidence: 0.942148555714286

00:42:37.852 --> 00:42:39.144 pancreas and small bowel,

NOTE Confidence: 0.942148555714286

 $00:42:39.150 \longrightarrow 00:42:43.195$ new render consumers and and I'd love to

NOTE Confidence: 0.942148555714286

00:42:43.195 --> 00:42:45.680 ask answer any questions towards the end.

NOTE Confidence: 0.942148555714286

 $00:42:45.680 \longrightarrow 00:42:50.488$ First time I have no disclosures.

NOTE Confidence: 0.942148555714286

 $00:42:50.490 \longrightarrow 00:42:53.630$ So this is a a slide from a paper that

NOTE Confidence: 0.942148555714286

 $00{:}42{:}53.721 \dashrightarrow 00{:}42{:}57.274$ Doctor Kuhn said side didn't hurt talk for.

NOTE Confidence: 0.942148555714286

 $00:42:57.274 \longrightarrow 00:42:59.294$ Looking at it from the

NOTE Confidence: 0.942148555714286

 $00:42:59.294 \longrightarrow 00:43:02.268$ end where they looked at.

NOTE Confidence: 0.942148555714286

 $00:43:02.270 \longrightarrow 00:43:05.266$ Sear based study of the incidence of

NOTE Confidence: 0.942148555714286

 $00:43:05.266 \longrightarrow 00:43:07.834$ neuroendocrine tumors over the course of

NOTE Confidence: 0.942148555714286

00:43:07.834 --> 00:43:11.306 time and what's striking about this talk,

 $00:43:11.310 \longrightarrow 00:43:12.630$ and this is kind of the punch line.

NOTE Confidence: 0.942148555714286

00:43:12.630 --> 00:43:14.597 One of the points that Romans made

NOTE Confidence: 0.942148555714286

 $00{:}43{:}14.597 \dashrightarrow 00{:}43{:}16.030$ is neuroendocrine tumors are not

NOTE Confidence: 0.942148555714286

00:43:16.030 --> 00:43:17.567 necessarily a rare anymore because

NOTE Confidence: 0.942148555714286

00:43:17.567 --> 00:43:20.715 the incidence of these is rising and

NOTE Confidence: 0.942148555714286

00:43:20.715 --> 00:43:23.550 this includes the focus of this talk,

NOTE Confidence: 0.942148555714286

 $00:43:23.550 \longrightarrow 00:43:24.846$ which will include pancreas

NOTE Confidence: 0.942148555714286

 $00{:}43{:}24.846 \to 00{:}43{:}27.050$ neuroendocrine tumors and as you can see,

NOTE Confidence: 0.942148555714286

 $00:43:27.050 \longrightarrow 00:43:29.102$ there's been a very steady and

NOTE Confidence: 0.942148555714286

 $00:43:29.102 \longrightarrow 00:43:30.128$ then more recently,

NOTE Confidence: 0.942148555714286

 $00{:}43{:}30.130 \dashrightarrow 00{:}43{:}32.538$ a steeper rise in the incidence of pancreas.

NOTE Confidence: 0.942148555714286

00:43:32.540 --> 00:43:36.439 Under consumers and in green over here,

NOTE Confidence: 0.942148555714286

 $00{:}43{:}36.440 \dashrightarrow 00{:}43{:}38.360$ a small bowel or under consumers.

NOTE Confidence: 0.942148555714286

 $00:43:38.360 \longrightarrow 00:43:40.835$ 2 and that'll be the focus of this talk.

NOTE Confidence: 0.942148555714286

00:43:40.840 --> 00:43:42.480 I'm sure many people in

 $00:43:42.480 \longrightarrow 00:43:43.792$ the audience know that.

NOTE Confidence: 0.942148555714286

 $00:43:43.800 \longrightarrow 00:43:46.474$ Many of our patients are getting scans.

NOTE Confidence: 0.942148555714286

00:43:46.480 --> 00:43:48.452 A cross sectional imaging,

NOTE Confidence: 0.942148555714286

 $00:43:48.452 \longrightarrow 00:43:50.917$ and they're often incidental findings.

NOTE Confidence: 0.942148555714286

 $00:43:50.920 \longrightarrow 00:43:52.830$ And oftentimes these are how

NOTE Confidence: 0.942148555714286

 $00:43:52.830 \longrightarrow 00:43:54.358$ neuroendocrine tumors are discovered

NOTE Confidence: 0.942148555714286

 $00:43:54.358 \longrightarrow 00:43:56.716$ as our other kinds of tumors as well,

NOTE Confidence: 0.942148555714286

 $00:43:56.720 \longrightarrow 00:43:59.779$ and I'm sure that's driving the higher

NOTE Confidence: 0.942148555714286

 $00:43:59.779 \longrightarrow 00:44:02.910$ incidence that that we're seeing over time.

NOTE Confidence: 0.942148555714286

 $00:44:02.910 \longrightarrow 00:44:04.960$ So the interesting thing about

NOTE Confidence: 0.942148555714286

 $00{:}44{:}04.960 \dashrightarrow 00{:}44{:}07.010$ neuroendocrine tumors is that the

NOTE Confidence: 0.942148555714286

 $00:44:07.075 \longrightarrow 00:44:09.510$ survival for neuroendocrine tumors is,

NOTE Confidence: 0.942148555714286

00:44:09.510 --> 00:44:10.158 generally speaking,

NOTE Confidence: 0.942148555714286

 $00:44:10.158 \longrightarrow 00:44:12.102$ favorable when we and the focus

NOTE Confidence: 0.942148555714286

 $00:44:12.102 \longrightarrow 00:44:13.588$ again will be on pancreas.

NOTE Confidence: 0.942148555714286

00:44:13.590 --> 00:44:15.678 Neuroendocrine tumors and small

00:44:15.678 --> 00:44:17.974 bowel neuroendocrine tumors and

NOTE Confidence: 0.942148555714286

 $00:44:17.974 \longrightarrow 00:44:22.318$ the survival is dependent on grade,

NOTE Confidence: 0.942148555714286

 $00:44:22.320 \longrightarrow 00:44:24.322$ and we're not going to talk too

NOTE Confidence: 0.942148555714286

 $00:44:24.322 \longrightarrow 00:44:26.463$ much about grade three grade 4 door

NOTE Confidence: 0.942148555714286

00:44:26.463 --> 00:44:28.287 under consumers and much of what

NOTE Confidence: 0.942148555714286

 $00:44:28.353 \longrightarrow 00:44:30.785$ we see are grade one and grade tuna

NOTE Confidence: 0.942148555714286

 $00:44:30.785 \longrightarrow 00:44:32.996$ under consumers and the survival.

NOTE Confidence: 0.942148555714286

 $00{:}44{:}32.996 \dashrightarrow 00{:}44{:}37.978$ Is is usually favorable and that leads to.

NOTE Confidence: 0.942148555714286

 $00:44:37.980 \longrightarrow 00:44:40.332$ That the perspective of how these new

NOTE Confidence: 0.942148555714286

 $00:44:40.332 \longrightarrow 00:44:42.660$ entrants should be managed and you know,

NOTE Confidence: 0.942148555714286

00:44:42.660 --> 00:44:45.540 and you know I'm going to give you my

NOTE Confidence: 0.942148555714286

 $00:44:45.540 \longrightarrow 00:44:47.559$ perspective as a surgical oncologist.

NOTE Confidence: 0.942148555714286

00:44:47.560 --> 00:44:49.016 And I think we all have our

NOTE Confidence: 0.942148555714286

00:44:49.016 --> 00:44:50.000 own perspectives on things.

NOTE Confidence: 0.942148555714286

 $00:44:50.000 \longrightarrow 00:44:53.360$ And as a surgical oncologist at

 $00:44:53.360 \longrightarrow 00:44:55.165$ longer progression free survivals,

NOTE Confidence: 0.942148555714286

00:44:55.165 --> 00:44:57.240 the longer survivals impact how?

NOTE Confidence: 0.942148555714286

 $00:44:57.240 \longrightarrow 00:44:58.360$ What kind of surgical management

NOTE Confidence: 0.942148555714286

 $00:44:58.360 \longrightarrow 00:44:59.480$ we offer to our patients.

NOTE Confidence: 0.88028361

 $00:45:01.550 \longrightarrow 00:45:03.510$ So for the talk, we'll break it up

NOTE Confidence: 0.88028361

 $00:45:03.510 \longrightarrow 00:45:05.309$ into the remainder of the talk.

NOTE Confidence: 0.88028361

 $00:45:05.310 \longrightarrow 00:45:08.397$ Will break it up into three different.

NOTE Confidence: 0.88028361

 $00:45:08.400 \longrightarrow 00:45:10.248$ Sessions one will be the pink

NOTE Confidence: 0.88028361

00:45:10.248 --> 00:45:11.172 richner endocrine tumors,

NOTE Confidence: 0.88028361

 $00:45:11.180 \longrightarrow 00:45:12.920$ which I'll talk about first.

NOTE Confidence: 0.88028361

 $00:45:12.920 \longrightarrow 00:45:14.564$ I'll follow that with the small

NOTE Confidence: 0.88028361

 $00:45:14.564 \longrightarrow 00:45:16.260$ bowel and are under consumers.

NOTE Confidence: 0.88028361

 $00:45:16.260 \longrightarrow 00:45:19.212$ And lastly, we talk about metastatic

NOTE Confidence: 0.88028361

 $00:45:19.212 \longrightarrow 00:45:21.180$ neuroendocrine tumors as well.

NOTE Confidence: 0.88028361

 $00:45:21.180 \longrightarrow 00:45:23.260$ These are common surgical scenarios

NOTE Confidence: 0.88028361

 $00:45:23.260 \longrightarrow 00:45:26.425$ that maybe some of your patients

00:45:26.425 --> 00:45:29.170 have experienced and and hopefully

NOTE Confidence: 0.88028361

 $00{:}45{:}29.261 \longrightarrow 00{:}45{:}31.826$ this will provide some types.

NOTE Confidence: 0.88028361

 $00:45:31.830 \longrightarrow 00:45:34.596$ So in regards to the pancreas

NOTE Confidence: 0.88028361

 $00:45:34.596 \longrightarrow 00:45:35.518$ narender consumers.

NOTE Confidence: 0.88028361

00:45:35.520 --> 00:45:36.264 So you know,

NOTE Confidence: 0.88028361

 $00:45:36.264 \longrightarrow 00:45:37.752$ I think in order to understand

NOTE Confidence: 0.88028361

 $00:45:37.752 \longrightarrow 00:45:39.517$ if someone needs an operation,

NOTE Confidence: 0.88028361

 $00:45:39.520 \longrightarrow 00:45:41.122$ one needs to just understand the

NOTE Confidence: 0.88028361

 $00:45:41.122 \longrightarrow 00:45:42.540$ basics of the neuroendocrine tumors.

NOTE Confidence: 0.88028361

 $00:45:42.540 \longrightarrow 00:45:44.043$ And you know these are some of the points

NOTE Confidence: 0.88028361

 $00{:}45{:}44.043 \dashrightarrow 00{:}45{:}45.667$ that are important to a surgical oncologist.

NOTE Confidence: 0.88028361

 $00{:}45{:}45.670 \dashrightarrow 00{:}45{:}47.830$ When we see patients who think

NOTE Confidence: 0.88028361

 $00{:}45{:}47.830 \dashrightarrow 00{:}45{:}48.910$ christner under consumers.

NOTE Confidence: 0.88028361

 $00{:}45{:}48.910 \dashrightarrow 00{:}45{:}50.584$ I'm I'm very interested in tumor

NOTE Confidence: 0.88028361

 $00:45:50.584 \longrightarrow 00:45:52.628$ biology and I could tell that to

 $00:45:52.628 \longrightarrow 00:45:54.368$ rebooting is also from her very

NOTE Confidence: 0.88028361

 $00{:}45{:}54.368 \dashrightarrow 00{:}45{:}55.894$ elaborate talk and pink Krishna

NOTE Confidence: 0.88028361

 $00:45:55.894 \longrightarrow 00:45:57.664$ render from rumors arise from the

NOTE Confidence: 0.88028361

00:45:57.670 --> 00:45:59.550 endocrine cells of the pancreas,

NOTE Confidence: 0.88028361

 $00:45:59.550 \longrightarrow 00:46:03.270$ which are important to understand

NOTE Confidence: 0.88028361

 $00{:}46{:}03.270 \dashrightarrow 00{:}46{:}06.312$ and they account for 3% of

NOTE Confidence: 0.88028361

00:46:06.312 --> 00:46:07.938 pancreas tumors altogether.

NOTE Confidence: 0.88028361

00:46:07.938 --> 00:46:10.106 So still pancreatic ductal

NOTE Confidence: 0.88028361

 $00:46:10.106 \longrightarrow 00:46:12.135$ adenocarcinomas and other kinds

NOTE Confidence: 0.88028361

00:46:12.135 --> 00:46:14.679 of tumors comprise majority but 3%

NOTE Confidence: 0.88028361

00:46:14.679 --> 00:46:16.574 of pink christner under consumers

NOTE Confidence: 0.88028361

00:46:16.574 --> 00:46:18.700 are comprised of by peanuts.

NOTE Confidence: 0.88028361

 $00:46:18.700 \longrightarrow 00:46:21.549$ The median age at diagnosis is 60

NOTE Confidence: 0.88028361

 $00{:}46{:}21.549 {\:{\circ}{\circ}{\circ}}>00{:}46{:}24.435$ years and the survival is longer

NOTE Confidence: 0.88028361

 $00:46:24.435 \longrightarrow 00:46:26.415$ than that anchors adenocarcinoma,

NOTE Confidence: 0.88028361

 $00:46:26.420 \longrightarrow 00:46:27.935$ so that's very important point

 $00:46:27.935 \longrightarrow 00:46:30.018$ to understand is as all of us

NOTE Confidence: 0.88028361

 $00:46:30.018 \longrightarrow 00:46:31.030$ in the audience have.

NOTE Confidence: 0.88028361

00:46:31.030 --> 00:46:32.880 I'm sure I can understand,

NOTE Confidence: 0.88028361

 $00:46:32.880 \longrightarrow 00:46:34.724$ and they're obviously people.

NOTE Confidence: 0.88028361

 $00:46:34.724 \longrightarrow 00:46:37.490$ Some celebrities over the years that

NOTE Confidence: 0.88028361

 $00:46:37.561 \longrightarrow 00:46:39.134$ we have observed that have been

NOTE Confidence: 0.88028361

 $00:46:39.134 \longrightarrow 00:46:40.760$ diagnosed with these kinds of tumors.

NOTE Confidence: 0.88028361

00:46:40.760 --> 00:46:41.980 Both adenocarcinoma.

NOTE Confidence: 0.88028361

 $00:46:41.980 \longrightarrow 00:46:45.030$ I think Christina render consumers.

NOTE Confidence: 0.88028361

 $00{:}46{:}45.030 \to 00{:}46{:}47.070$ The note status is very important,

NOTE Confidence: 0.88028361

 $00{:}46{:}47.070 \dashrightarrow 00{:}46{:}49.685$ so patients with node negative

NOTE Confidence: 0.88028361

 $00:46:49.685 \longrightarrow 00:46:50.600$ peanuts tend to

NOTE Confidence: 0.672960371666667

 $00{:}46{:}50.610 {\:\dashrightarrow\:} 00{:}46{:}52.590$ have them. Sorry to interrupt you,

NOTE Confidence: 0.672960371666667

 $00:46:52.590 \longrightarrow 00:46:56.944$ your slide is not projecting it maybe.

NOTE Confidence: 0.672960371666667

 $00:46:56.950 \longrightarrow 00:46:58.680$ Yep, there you go. Perfect, thanks.

 $00:47:00.720 \longrightarrow 00:47:02.796$ Sorry, so the survival is very

NOTE Confidence: 0.918569646666667

 $00{:}47{:}02.796 \dashrightarrow 00{:}47{:}05.100$ important based on the nodal status.

NOTE Confidence: 0.918569646666667

 $00:47:05.100 \longrightarrow 00:47:08.614$ So patients with no negative peanuts have

NOTE Confidence: 0.91856964666667

 $00:47:08.614 \longrightarrow 00:47:12.206$ a very favorable survival at 136 months.

NOTE Confidence: 0.918569646666667

 $00:47:12.206 \longrightarrow 00:47:14.821$ The addition of noteworthy metastasis

NOTE Confidence: 0.91856964666667

00:47:14.821 --> 00:47:17.867 to lymph nodes decreases at survival

NOTE Confidence: 0.918569646666667

 $00:47:17.867 \longrightarrow 00:47:20.646$ to 77 months and one patient

NOTE Confidence: 0.918569646666667

 $00:47:20.646 \longrightarrow 00:47:22.494$ present with distant metastases.

NOTE Confidence: 0.918569646666667

 $00:47:22.500 \longrightarrow 00:47:25.780$ This survival is 24 months and

NOTE Confidence: 0.918569646666667

 $00:47:25.780 \longrightarrow 00:47:28.230$ you know that's important to

NOTE Confidence: 0.918569646666667

 $00{:}47{:}28.230 \dashrightarrow 00{:}47{:}30.356$ understand because 60% of patients

NOTE Confidence: 0.918569646666667

 $00:47:30.356 \longrightarrow 00:47:32.266$ do present with distant metastases.

NOTE Confidence: 0.918569646666667

00:47:32.270 --> 00:47:34.094 And I think that plays into

NOTE Confidence: 0.918569646666667

 $00:47:34.094 \longrightarrow 00:47:35.310$ the decision making process.

NOTE Confidence: 0.918569646666667

 $00:47:35.310 \longrightarrow 00:47:37.718$ So for how to treat the patient

NOTE Confidence: 0.918569646666667

00:47:37.718 --> 00:47:39.642 to optimally and as doctor Kunz

00:47:39.642 --> 00:47:41.182 had mentioned during her talk,

NOTE Confidence: 0.918569646666667

 $00{:}47{:}41.190 \dashrightarrow 00{:}47{:}42.580$ majority of cases are sporadic

NOTE Confidence: 0.918569646666667

 $00:47:42.580 \longrightarrow 00:47:43.692$ and some are familiar.

NOTE Confidence: 0.7983114075

00:47:47.950 --> 00:47:50.265 Pink Reisner under consumers are

NOTE Confidence: 0.7983114075

 $00:47:50.265 \longrightarrow 00:47:52.117$ nonfunctioning tumors and and

NOTE Confidence: 0.7983114075

 $00{:}47{:}52.117 \dashrightarrow 00{:}47{:}54.834$ functioning tumors and and by this what

NOTE Confidence: 0.7983114075

 $00:47:54.834 \longrightarrow 00:47:57.180$ I mean is that nonfunctioning tumors

NOTE Confidence: 0.7983114075

00:47:57.255 --> 00:47:59.690 do not produce clinical symptoms,

NOTE Confidence: 0.7983114075

 $00:47:59.690 \longrightarrow 00:48:01.175$ even though the tumors can't

NOTE Confidence: 0.7983114075

 $00:48:01.175 \longrightarrow 00:48:02.066$ still produce hormones,

NOTE Confidence: 0.7983114075

 $00:48:02.070 \longrightarrow 00:48:03.780$ but they don't produce enough

NOTE Confidence: 0.7983114075

 $00:48:03.780 \longrightarrow 00:48:05.490$ hormones that cause clinical symptoms.

NOTE Confidence: 0.7983114075

 $00{:}48{:}05.490 \dashrightarrow 00{:}48{:}07.548$ The nonfunctioning tumors,

NOTE Confidence: 0.7983114075

 $00:48:07.548 \longrightarrow 00:48:10.978$ now in the updated literature,

NOTE Confidence: 0.7983114075

 $00:48:10.980 \longrightarrow 00:48:12.700$ revealed account for about

 $00:48:12.700 \longrightarrow 00:48:13.652$ 75% of these tumors.

NOTE Confidence: 0.7983114075

 $00{:}48{:}13.652 \dashrightarrow 00{:}48{:}15.394$ I think some of this has to do with

NOTE Confidence: 0.7983114075

 $00:48:15.394 \longrightarrow 00:48:16.604$ these smaller new render consumers,

NOTE Confidence: 0.7983114075

 $00:48:16.610 \longrightarrow 00:48:17.104$ the child.

NOTE Confidence: 0.7983114075

 $00:48:17.104 \longrightarrow 00:48:19.114$ Talk a little bit about that are

NOTE Confidence: 0.7983114075

00:48:19.114 --> 00:48:21.049 diagnosed more and more frequently

NOTE Confidence: 0.7983114075

 $00:48:21.049 \longrightarrow 00:48:23.638$ in that number has increased over

NOTE Confidence: 0.7983114075

 $00:48:23.638 \longrightarrow 00:48:25.574$ overtime and then functioning tumors,

NOTE Confidence: 0.7983114075

 $00{:}48{:}25.574 \dashrightarrow 00{:}48{:}27.446$ so functioning tumors are tumors

NOTE Confidence: 0.7983114075

 $00:48:27.446 \longrightarrow 00:48:29.376$ that have hormone hypersecretion that

NOTE Confidence: 0.7983114075

 $00{:}48{:}29.376 \dashrightarrow 00{:}48{:}31.800$ does lead to clinical manifestation.

NOTE Confidence: 0.7983114075

 $00:48:31.800 \longrightarrow 00:48:33.906$ The six types are listed here,

NOTE Confidence: 0.7983114075

 $00{:}48{:}33.910 \dashrightarrow 00{:}48{:}35.390$ which are insulinom as most

NOTE Confidence: 0.7983114075

 $00:48:35.390 \longrightarrow 00:48:37.240$ commonly that we see Glucagon,

NOTE Confidence: 0.798311407500:48:37.240 --> 00:48:37.708 omas,

NOTE Confidence: 0.7983114075

00:48:37.708 --> 00:48:38.644 gastrinomas VIP,

 $00:48:38.644 \longrightarrow 00:48:40.984$ omas Mathis adenomas and others

NOTE Confidence: 0.7983114075

 $00{:}48{:}40.984 \dashrightarrow 00{:}48{:}43.315$ as well functioning tumors tend

NOTE Confidence: 0.7983114075

 $00:48:43.315 \longrightarrow 00:48:45.640$ to have better survival than

NOTE Confidence: 0.7983114075

 $00:48:45.640 \longrightarrow 00:48:47.754$ nonfunctioning tumors and part of this.

NOTE Confidence: 0.7983114075

 $00:48:47.754 \longrightarrow 00:48:49.234$ Probably is patient present symptom

NOTE Confidence: 0.7983114075

 $00:48:49.234 \longrightarrow 00:48:50.663$ with symptomatology earlier than

NOTE Confidence: 0.7983114075

00:48:50.663 --> 00:48:52.453 non functioning tumors and that

NOTE Confidence: 0.7983114075

 $00{:}48{:}52.453 \dashrightarrow 00{:}48{:}54.425$ might lead to a better survival

NOTE Confidence: 0.7983114075

 $00:48:54.425 \longrightarrow 00:48:55.930$ ultimately because it was diagnosed

NOTE Confidence: 0.7983114075

 $00:48:55.930 \longrightarrow 00:48:57.620$ or earlier on in the process.

NOTE Confidence: 0.75222638

 $00{:}48{:}59.780 \dashrightarrow 00{:}49{:}01.960$ So when a surgical oncologist,

NOTE Confidence: 0.75222638

 $00:49:01.960 \longrightarrow 00:49:03.423$ if you come to Yale Surgical and

NOTE Confidence: 0.75222638

 $00:49:03.423 \longrightarrow 00:49:05.274$ I see one of the Yale surgical

NOTE Confidence: 0.75222638

 $00{:}49{:}05.274 \dashrightarrow 00{:}49{:}06.739$ on cologists you know there are

NOTE Confidence: 0.75222638

 $00:49:06.739 \longrightarrow 00:49:08.335$ certain things that we think are

00:49:08.335 --> 00:49:09.898 important to to guide our principles

NOTE Confidence: 0.75222638

 $00:49:09.898 \longrightarrow 00:49:12.124$ of of sort of surgical management of

NOTE Confidence: 0.75222638

 $00:49:12.124 \longrightarrow 00:49:13.880$ patients for assessing a patient.

NOTE Confidence: 0.75222638

 $00:49:13.880 \longrightarrow 00:49:16.184$ For that and our goals for surgery are

NOTE Confidence: 0.75222638

 $00:49:16.184 \longrightarrow 00:49:18.560$ the first is to maximize local control,

NOTE Confidence: 0.75222638

00:49:18.560 --> 00:49:20.072 so I think that's a very important point

NOTE Confidence: 0.75222638

 $00:49:20.072 \longrightarrow 00:49:21.877$ for not just bankers neuroendocrine tumors,

NOTE Confidence: 0.75222638

 $00:49:21.880 \longrightarrow 00:49:24.736$ but in general for other types

NOTE Confidence: 0.75222638

 $00:49:24.736 \longrightarrow 00:49:27.140$ of neuroendocrine tumors as well.

NOTE Confidence: 0.75222638

 $00:49:27.140 \longrightarrow 00:49:28.670$ Another goal is to increase ones.

NOTE Confidence: 0.75222638

00:49:28.670 --> 00:49:29.826 Quality of Life OK,

NOTE Confidence: 0.75222638

 $00:49:29.826 \longrightarrow 00:49:31.560$ so sometimes that even non functioning

NOTE Confidence: 0.75222638

 $00:49:31.615 \longrightarrow 00:49:33.409$ tumors can have an adverse effect

NOTE Confidence: 0.75222638

 $00:49:33.409 \longrightarrow 00:49:35.059$ on the individuals quality of life.

NOTE Confidence: 0.75222638

00:49:35.060 --> 00:49:38.378 So surgery can improve, increase funds,

NOTE Confidence: 0.75222638

 $00:49:38.380 \longrightarrow 00:49:39.876$ quality of life progression.

00:49:39.876 --> 00:49:42.120 Free survival is an important point

NOTE Confidence: 0.75222638

 $00:49:42.188 \longrightarrow 00:49:44.292$ as well too given the the the

NOTE Confidence: 0.75222638

 $00:49:44.292 \longrightarrow 00:49:46.670$ behavior of these tumors a lot of times

NOTE Confidence: 0.75222638

 $00:49:46.670 \longrightarrow 00:49:48.678$ we focus on progression free survival

NOTE Confidence: 0.75222638

 $00{:}49{:}48.678 \dashrightarrow 00{:}49{:}51.506$ and not as much as overall survival.

NOTE Confidence: 0.75222638

 $00:49:51.510 \longrightarrow 00:49:53.316$ So progression free survival is very

NOTE Confidence: 0.75222638

 $00:49:53.316 \longrightarrow 00:49:55.055$ important for this kind of tumor.

NOTE Confidence: 0.75222638

 $00{:}49{:}55.055 \dashrightarrow 00{:}49{:}56.980$ Generally speaking we aim for

NOTE Confidence: 0.75222638

 $00{:}49{:}56.980 \dashrightarrow 00{:}49{:}58.952$ R0 resection margins and that's

NOTE Confidence: 0.75222638

 $00:49:58.952 \longrightarrow 00:50:01.118$ something we strive for for many.

NOTE Confidence: 0.75222638

 $00{:}50{:}01.120 \dashrightarrow 00{:}50{:}02.512$ Kinds of search conchology

NOTE Confidence: 0.75222638

 $00:50:02.512 \longrightarrow 00:50:04.600$ operations and that just simply means

NOTE Confidence: 0.75222638

 $00{:}50{:}04.663 \dashrightarrow 00{:}50{:}06.679$ microscopically and grossly negative.

NOTE Confidence: 0.75222638

 $00:50:06.680 \longrightarrow 00:50:07.877$ We'll talk a little bit more about.

NOTE Confidence: 0.75222638

 $00:50:07.880 \longrightarrow 00:50:09.000$ There's some different that's

 $00:50:09.000 \longrightarrow 00:50:10.120$ not always the case,

NOTE Confidence: 0.75222638

 $00:50:10.120 \longrightarrow 00:50:12.416$ but that's for some of the metastatic tumors.

NOTE Confidence: 0.75222638

 $00:50:12.420 \longrightarrow 00:50:14.712$ But we are usually striving for

NOTE Confidence: 0.75222638

 $00:50:14.712 \longrightarrow 00:50:16.897$ an artist or section and the other

NOTE Confidence: 0.75222638

00:50:16.897 --> 00:50:18.430 final goal is we try to alleviate

NOTE Confidence: 0.75222638

 $00:50:18.480 \longrightarrow 00:50:19.320$ clinical symptoms,

NOTE Confidence: 0.75222638

 $00:50:19.320 \longrightarrow 00:50:21.385$ and this is very important for those

NOTE Confidence: 0.75222638

 $00:50:21.385 \longrightarrow 00:50:23.419$ with the functioning or underprint tumors.

NOTE Confidence: 0.75222638

 $00:50:23.420 \longrightarrow 00:50:26.100$ And and with the source of the hormone,

NOTE Confidence: 0.75222638

 $00:50:26.100 \longrightarrow 00:50:27.426$ hypersecretion is removed.

NOTE Confidence: 0.75222638

 $00{:}50{:}27.426 \dashrightarrow 00{:}50{:}29.636$ It can substantially alleviate ones

NOTE Confidence: 0.75222638

 $00:50:29.636 \longrightarrow 00:50:31.580$ clinical symptoms in the completely.

NOTE Confidence: 0.75222638

00:50:31.580 --> 00:50:34.319 Address it altogether.

NOTE Confidence: 0.75222638

 $00:50:34.320 \longrightarrow 00:50:35.430$ And we also, you know,

NOTE Confidence: 0.75222638

 $00:50:35.430 \longrightarrow 00:50:37.978$ with our surgeries and a lot of

NOTE Confidence: 0.75222638

 $00:50:37.978 \longrightarrow 00:50:39.922$ these pancreas cases can be major

 $00:50:39.922 \longrightarrow 00:50:40.978$ operations and us.

NOTE Confidence: 0.75222638

00:50:40.978 --> 00:50:44.070 But we do try to limit our short

NOTE Confidence: 0.75222638

 $00:50:44.070 \longrightarrow 00:50:45.982$ term morbidity and the long term

NOTE Confidence: 0.75222638

 $00:50:45.982 \longrightarrow 00:50:47.780$ morbidity as well too in the few.

NOTE Confidence: 0.75222638

 $00:50:47.780 \longrightarrow 00:50:49.780$ See one of the surgical oncologists at Yale.

NOTE Confidence: 0.75222638

 $00:50:49.780 \longrightarrow 00:50:51.736$ We our role is taking this

NOTE Confidence: 0.75222638

 $00:50:51.736 \longrightarrow 00:50:52.388$ into consideration.

NOTE Confidence: 0.905764988235294

00:50:54.800 --> 00:50:57.635 So, so I'm gonna give you some

NOTE Confidence: 0.905764988235294

 $00:50:57.635 \longrightarrow 00:50:59.202$ specific surgical scenarios here

NOTE Confidence: 0.905764988235294

 $00:50:59.202 \longrightarrow 00:51:01.897$ that may be of some use and you know

NOTE Confidence: 0.905764988235294

 $00{:}51{:}01.897 \dashrightarrow 00{:}51{:}03.931$ one scenario includes a patient that

NOTE Confidence: 0.905764988235294

 $00:51:03.931 \longrightarrow 00:51:06.298$ presents the localized non metastatic

NOTE Confidence: 0.905764988235294

 $00{:}51{:}06.298 \dashrightarrow 00{:}51{:}07.774$ pancreas neuroendocrine tumor.

NOTE Confidence: 0.905764988235294

 $00:51:07.780 \longrightarrow 00:51:08.683$ And generally speaking,

NOTE Confidence: 0.905764988235294

 $00:51:08.683 \longrightarrow 00:51:11.438$ we respect the for the resection is feasible.

 $00:51:11.438 \longrightarrow 00:51:14.678$ The meeting survival in the

NOTE Confidence: 0.905764988235294

00:51:14.678 --> 00:51:16.700 literature is 7.1 years,

NOTE Confidence: 0.905764988235294

00:51:16.700 --> 00:51:18.860 but the important thing to understand,

NOTE Confidence: 0.905764988235294

 $00:51:18.860 \longrightarrow 00:51:21.870$ and is that about half the patients

NOTE Confidence: 0.905764988235294

 $00:51:21.870 \longrightarrow 00:51:24.768$ do recur at two almost three years.

NOTE Confidence: 0.905764988235294

 $00:51:24.770 \longrightarrow 00:51:26.620$ So recurrence free survival is

NOTE Confidence: 0.905764988235294

00:51:26.620 --> 00:51:28.850 important to consider here as well,

NOTE Confidence: 0.905764988235294

 $00:51:28.850 \longrightarrow 00:51:33.926$ so so many patients to recur.

NOTE Confidence: 0.905764988235294

 $00{:}51{:}33.930 \dashrightarrow 00{:}51{:}35.772$ Another common scenario are these small

NOTE Confidence: 0.905764988235294

00:51:35.772 --> 00:51:37.838 pink trees that are under 15 years,

NOTE Confidence: 0.905764988235294

 $00:51:37.840 \longrightarrow 00:51:39.472$ so these are pink creature under

NOTE Confidence: 0.905764988235294

 $00:51:39.472 \longrightarrow 00:51:40.848$ consumers that when we when

NOTE Confidence: 0.905764988235294

 $00:51:40.848 \longrightarrow 00:51:42.246$ we say that there are small,

NOTE Confidence: 0.905764988235294

 $00{:}51{:}42.250 {\:{\circ}{\circ}{\circ}}>00{:}51{:}44.562$ we're thinking 1.5 to 2 centimeters in the

NOTE Confidence: 0.905764988235294

 $00:51:44.562 \longrightarrow 00:51:46.946$ depends on which studies you're looking at.

NOTE Confidence: 0.905764988235294

 $00:51:46.950 \longrightarrow 00:51:48.174$ There's a good study out of

 $00:51:48.174 \longrightarrow 00:51:48.990$ the University of Chicago.

NOTE Confidence: 0.905764988235294

 $00:51:48.990 \longrightarrow 00:51:51.426$ There's another good study out of

NOTE Confidence: 0.905764988235294

 $00:51:51.426 \longrightarrow 00:51:53.026$ Massachusetts General and then that's

NOTE Confidence: 0.905764988235294

00:51:53.026 --> 00:51:54.860 where this number of less than two

NOTE Confidence: 0.905764988235294

 $00:51:54.916 \longrightarrow 00:51:57.810$ centimeters or 1.5 to 2 centimeters comes up,

NOTE Confidence: 0.905764988235294

 $00:51:57.810 \longrightarrow 00:51:59.734$ because given the behavior

NOTE Confidence: 0.905764988235294

00:51:59.734 --> 00:52:01.177 of neuroendocrine pancreas,

NOTE Confidence: 0.905764988235294

00:52:01.180 --> 00:52:03.140 neuroendocrine tumors in general.

NOTE Confidence: 0.905764988235294

 $00:52:03.140 \longrightarrow 00:52:05.100$ Sometimes surgery is not

NOTE Confidence: 0.905764988235294

 $00:52:05.100 \longrightarrow 00:52:07.179$ necessary for these patients,

NOTE Confidence: 0.905764988235294

00:52:07.180 --> 00:52:10.555 but I would recommend careful

NOTE Confidence: 0.905764988235294

 $00:52:10.555 \longrightarrow 00:52:13.680$ observation and you know each patient

NOTE Confidence: 0.905764988235294

 $00{:}52{:}13.680 {\:{\circ}{\circ}{\circ}}>00{:}52{:}16.880$ is an individual and we need to every

NOTE Confidence: 0.905764988235294

00:52:16.880 --> 00:52:19.439 patient should be evaluated individually

NOTE Confidence: 0.905764988235294

 $00:52:19.439 \longrightarrow 00:52:22.280$ and and but oftentimes patients with

 $00:52:22.280 \longrightarrow 00:52:24.560$ smaller tumors can be observed,

NOTE Confidence: 0.905764988235294

 $00{:}52{:}24.560 \to 00{:}52{:}25.816$ you know, and I just want to make

NOTE Confidence: 0.905764988235294

 $00:52:25.816 \longrightarrow 00:52:26.900$ a quick comment about that.

NOTE Confidence: 0.905764988235294

00:52:26.900 --> 00:52:27.592 And that being said,

NOTE Confidence: 0.905764988235294

 $00:52:27.592 \longrightarrow 00:52:28.630$ you know if there's a young

NOTE Confidence: 0.905764988235294

00:52:28.674 --> 00:52:29.758 patient that's diagnosed with.

NOTE Confidence: 0.905764988235294

 $00:52:29.760 \longrightarrow 00:52:31.788$ They say, for example,

NOTE Confidence: 0.905764988235294

00:52:31.788 --> 00:52:33.309 1.8 centimeter neuroendocrine

NOTE Confidence: 0.905764988235294

 $00:52:33.309 \longrightarrow 00:52:34.830$ tumor that's in.

NOTE Confidence: 0.905764988235294 00:52:34.830 --> 00:52:35.235 Yeah,

NOTE Confidence: 0.905764988235294

 $00:52:35.235 \longrightarrow 00:52:37.665$ in her late 20s or so,

NOTE Confidence: 0.905764988235294

 $00:52:37.670 \longrightarrow 00:52:39.734$ you know one can make a reasonable argument

NOTE Confidence: 0.905764988235294

 $00:52:39.734 \longrightarrow 00:52:41.766$ that with a longer life term expectancy,

NOTE Confidence: 0.905764988235294

 $00:52:41.770 \dashrightarrow 00:52:43.885$ may be that might not be the person we tried.

NOTE Confidence: 0.905764988235294

 $00:52:43.890 \longrightarrow 00:52:46.284$ Decide to observe with the small neuron

NOTE Confidence: 0.905764988235294

 $00:52:46.284 \dashrightarrow 00:52:48.286$ consumer and we do survey these patients.

 $00:52:48.290 \longrightarrow 00:52:49.682$ And if there are changes to

NOTE Confidence: 0.905764988235294

00:52:49.682 --> 00:52:50.610 their cross sectional imaging,

NOTE Confidence: 0.905764988235294

 $00:52:50.610 \longrightarrow 00:52:52.660$ which is an important point

NOTE Confidence: 0.905764988235294

 $00:52:52.660 \longrightarrow 00:52:53.890$ for neuroendocrine tumors,

NOTE Confidence: 0.905764988235294

 $00:52:53.890 \longrightarrow 00:52:55.618$ we will consider them per section.

NOTE Confidence: 0.83844109

 $00:52:58.130 \longrightarrow 00:52:59.342$ Another scenario that sometimes

NOTE Confidence: 0.83844109

 $00:52:59.342 \longrightarrow 00:53:01.495$ comes up is a locally advanced and

NOTE Confidence: 0.83844109

 $00{:}53{:}01.495 \dashrightarrow 00{:}53{:}04.540$ metastatic on fund, resectable.

NOTE Confidence: 0.83844109

00:53:04.540 --> 00:53:06.836 Patient in that kind of a scenario,

NOTE Confidence: 0.83844109

 $00{:}53{:}06.840 \dashrightarrow 00{:}53{:}08.960$ you know, sometimes we consider

NOTE Confidence: 0.83844109

00:53:08.960 --> 00:53:10.656 palliative surgery with some

NOTE Confidence: 0.83844109

 $00:53:10.656 \longrightarrow 00:53:12.769$ of the options listed here,

NOTE Confidence: 0.83844109

 $00{:}53{:}12.770 \dashrightarrow 00{:}53{:}15.140$ and that's sometimes a scenario

NOTE Confidence: 0.83844109

 $00:53:15.140 \longrightarrow 00:53:17.500$ and then limited liver metastases.

NOTE Confidence: 0.83844109

 $00:53:17.500 \longrightarrow 00:53:19.271$ We're going to talk at the last

00:53:19.271 --> 00:53:21.612 third of this talk a little bit more

NOTE Confidence: 0.83844109

 $00{:}53{:}21.612 {\:{\mbox{--}}\!\!>}\ 00{:}53{:}23.604$ about metastatic disease and in some

NOTE Confidence: 0.83844109

 $00:53:23.604 \longrightarrow 00:53:25.669$ patients with limited liver metastases.

NOTE Confidence: 0.83844109

 $00:53:25.670 \longrightarrow 00:53:28.016$ Will will use a asynchronous approach

NOTE Confidence: 0.83844109

 $00:53:28.016 \longrightarrow 00:53:30.367$ where the primary tumors are addressed

NOTE Confidence: 0.83844109

 $00:53:30.367 \longrightarrow 00:53:32.394$ and the liver tumors is addressed,

NOTE Confidence: 0.83844109

 $00:53:32.394 \longrightarrow 00:53:34.770$ or we considered a surgery in a staged.

NOTE Confidence: 0.83844109

 $00{:}53{:}34.770 --> 00{:}53{:}35.320 \ {\rm Fashion}.$

NOTE Confidence: 0.867011257692308

 $00:53:37.340 \longrightarrow 00:53:39.876$ So for all of these for sections I'm

NOTE Confidence: 0.867011257692308

00:53:39.876 --> 00:53:42.588 I just figured I'd share some patient

NOTE Confidence: 0.867011257692308

 $00{:}53{:}42.588 \to 00{:}53{:}45.804$ examples for you to try to put it

NOTE Confidence: 0.867011257692308

 $00{:}53{:}45.804 \dashrightarrow 00{:}53{:}48.030$ into some perspective and and the

NOTE Confidence: 0.867011257692308

 $00:53:48.030 \longrightarrow 00:53:50.550$ first patient I'd like to present is

NOTE Confidence: 0.867011257692308

 $00{:}53{:}50.627 \dashrightarrow 00{:}53{:}53.777$ an 80 year old male who presented

NOTE Confidence: 0.867011257692308

 $00:53:53.777 \longrightarrow 00:53:56.114$ with hypoglycemic episodes and he had

NOTE Confidence: 0.867011257692308

 $00:53:56.114 \longrightarrow 00:53:57.754$ what's called the Whipple's triad,

 $00:53:57.760 \longrightarrow 00:53:59.824$ which we've heard about,

NOTE Confidence: 0.867011257692308

 $00:53:59.824 \longrightarrow 00:54:02.920$ and for Pinkerton are under consumers,

NOTE Confidence: 0.867011257692308

00:54:02.920 --> 00:54:05.070 what we teach our residents is, you know,

NOTE Confidence: 0.867011257692308

 $00:54:05.070 \longrightarrow 00:54:07.555$ if if you're ones considering a functional.

NOTE Confidence: 0.867011257692308

 $00:54:07.560 \longrightarrow 00:54:09.480$ Increased our hundred tumor work up

NOTE Confidence: 0.867011257692308

 $00:54:09.480 \longrightarrow 00:54:11.380$ starts with the biochemical workup and

NOTE Confidence: 0.867011257692308

00:54:11.380 --> 00:54:13.084 this patient did have a biochemical

NOTE Confidence: 0.867011257692308

 $00:54:13.084 \longrightarrow 00:54:13.860$ work work up,

NOTE Confidence: 0.867011257692308

 $00:54:13.860 \longrightarrow 00:54:16.566$ which indeed was consistent with insulinoma.

NOTE Confidence: 0.867011257692308

00:54:16.570 --> 00:54:18.000 After the biochemical work up,

NOTE Confidence: 0.867011257692308

 $00:54:18.000 \longrightarrow 00:54:20.346$ then we preceded with the localization

NOTE Confidence: 0.867011257692308

 $00:54:20.346 \longrightarrow 00:54:22.618$ studies to identify where this tumor

NOTE Confidence: 0.867011257692308

 $00{:}54{:}22.618 \dashrightarrow 00{:}54{:}24.920$ is located and and in this patient.

NOTE Confidence: 0.867011257692308

 $00:54:24.920 \longrightarrow 00:54:27.770$ Here, this is the the frontal

NOTE Confidence: 0.867011257692308

 $00:54:27.770 \longrightarrow 00:54:29.716$ images and and it shows.

00:54:29.716 --> 00:54:32.440 I don't think my arrow is projecting here,

NOTE Confidence: 0.867011257692308

 $00:54:32.440 \longrightarrow 00:54:35.611$ but there's a hyper enhancing mass in

NOTE Confidence: 0.867011257692308

00:54:35.611 --> 00:54:38.579 the head of the pancreas which is seen.

NOTE Confidence: 0.867011257692308

 $00:54:38.580 \longrightarrow 00:54:40.368$ And that is sometimes the look

NOTE Confidence: 0.867011257692308

 $00:54:40.368 \longrightarrow 00:54:42.405$ of how a neuron tumor shows

NOTE Confidence: 0.867011257692308

 $00:54:42.405 \longrightarrow 00:54:44.350$ up on cross sectional imaging,

NOTE Confidence: 0.867011257692308

 $00:54:44.350 \longrightarrow 00:54:46.785$ and we performed a pancreaticoduodenectomy

NOTE Confidence: 0.867011257692308

 $00:54:46.785 \longrightarrow 00:54:49.639$ with an extended lymphadenectomy on this

NOTE Confidence: 0.867011257692308

00:54:49.639 --> 00:54:51.775 patient specimen seen on the right,

NOTE Confidence: 0.867011257692308

 $00:54:51.780 \longrightarrow 00:54:52.946$ and interestingly,

NOTE Confidence: 0.867011257692308

 $00{:}54{:}52.946 \dashrightarrow 00{:}54{:}55.278$ immediately the patients hypoglycemic

NOTE Confidence: 0.867011257692308

 $00:54:55.278 \longrightarrow 00:54:58.087$ episodes were completely resolved and

NOTE Confidence: 0.867011257692308

 $00:54:58.087 \longrightarrow 00:55:00.137$ provided this gentleman with many,

NOTE Confidence: 0.867011257692308

00:55:00.140 --> 00:55:02.750 many years of custom free life.

NOTE Confidence: 0.836767505

 $00:55:05.880 \longrightarrow 00:55:08.730$ Next, I'd like to transition to

NOTE Confidence: 0.836767505

 $00:55:08.730 \longrightarrow 00:55:10.630$ small bowel neuroendocrine tumors.

 $00:55:10.630 \longrightarrow 00:55:13.528$ And these are tumors that are

NOTE Confidence: 0.836767505

 $00:55:13.528 \longrightarrow 00:55:15.460$ submucosal neoplasms which primarily

NOTE Confidence: 0.836767505

 $00:55:15.539 \longrightarrow 00:55:18.248$ arise from the jejunum and the ileum.

NOTE Confidence: 0.836767505

 $00:55:18.250 \longrightarrow 00:55:20.290$ And there they do have

NOTE Confidence: 0.836767505

00:55:20.290 --> 00:55:21.106 neuroendocrine differentiation,

NOTE Confidence: 0.836767505

00:55:21.110 --> 00:55:23.420 just like some of these other tumors

NOTE Confidence: 0.836767505

 $00:55:23.420 \longrightarrow 00:55:25.200$ that we're talking about today.

NOTE Confidence: 0.836767505

 $00:55:25.200 \longrightarrow 00:55:27.612$ They have an ability to secrete

NOTE Confidence: 0.836767505

 $00:55:27.612 \longrightarrow 00:55:29.919$ functional hormones and a means they

NOTE Confidence: 0.836767505

00:55:29.919 --> 00:55:31.802 are the most common tumor of the

NOTE Confidence: 0.836767505

 $00:55:31.802 \longrightarrow 00:55:33.780$ small bowel with malignant potential.

NOTE Confidence: 0.836767505

 $00:55:33.780 \longrightarrow 00:55:36.372$ Which is interesting because this is

NOTE Confidence: 0.836767505

 $00{:}55{:}36.372 \dashrightarrow 00{:}55{:}39.164$ shifted because when I was in intern

NOTE Confidence: 0.836767505

 $00:55:39.164 \longrightarrow 00:55:42.267$ almost 20 years ago now we used to not

NOTE Confidence: 0.836767505

00:55:42.267 --> 00:55:44.780 look at small bowel neuronal tumors as

 $00:55:44.780 \longrightarrow 00:55:46.600$ the most common small bowel tumors.

NOTE Confidence: 0.836767505

 $00{:}55{:}46.600 \dashrightarrow 00{:}55{:}48.510$ We would think more of a denocarcinoma

NOTE Confidence: 0.836767505

 $00:55:48.510 \longrightarrow 00:55:51.100$ and then more often even benign tumors.

NOTE Confidence: 0.836767505

00.55.51.100 --> 00.55.51.970 But interestingly,

NOTE Confidence: 0.836767505

00:55:51.970 --> 00:55:53.710 now neuroendocrine small bowel

NOTE Confidence: 0.836767505

 $00:55:53.710 \longrightarrow 00:55:55.960$ tumors are the most common.

NOTE Confidence: 0.836767505

 $00:55:55.960 \longrightarrow 00:55:59.890$ Small bowel tumor with Fullington potential.

NOTE Confidence: 0.836767505

 $00:55:59.890 \longrightarrow 00:56:02.445$ Nearly a third of these tumors arise

NOTE Confidence: 0.836767505

 $00{:}56{:}02.450 \dashrightarrow 00{:}56{:}04.646$ relatively close to the ileocecal valve,

NOTE Confidence: 0.836767505

 $00:56:04.650 \longrightarrow 00:56:06.774$ and that the reason that's important

NOTE Confidence: 0.836767505

00:56:06.774 --> 00:56:08.590 is our operative decision making

NOTE Confidence: 0.836767505

 $00:56:08.590 \longrightarrow 00:56:11.490$ takes that into consideration.

NOTE Confidence: 0.836767505

 $00:56:11.490 \longrightarrow 00:56:13.420$ Many patients present with multifocal

NOTE Confidence: 0.836767505

 $00:56:13.420 \longrightarrow 00:56:15.350$ disease that's also very important.

NOTE Confidence: 0.836767505

00:56:15.350 --> 00:56:17.990 When I talk about surgical approaches,

NOTE Confidence: 0.836767505

 $00:56:17.990 \longrightarrow 00:56:20.665$ and about 35% of patients

00:56:20.665 --> 00:56:22.805 present with distant metastases,

NOTE Confidence: 0.836767505

 $00{:}56{:}22.810 \dashrightarrow 00{:}56{:}24.820$ so surgical resection is a preferred

NOTE Confidence: 0.836767505

 $00:56:24.820 \longrightarrow 00:56:26.670$ frontline treatment for these patients.

NOTE Confidence: 0.93575323375

 $00:56:29.060 \longrightarrow 00:56:30.956$ And the reasons for that is number one.

NOTE Confidence: 0.93575323375

 $00:56:30.960 \longrightarrow 00:56:33.408$ It can improve survival.

NOTE Confidence: 0.93575323375

00:56:33.410 --> 00:56:36.134 Number two can reduce the risk

NOTE Confidence: 0.93575323375

 $00:56:36.134 \longrightarrow 00:56:37.950$ for developing metastatic disease.

NOTE Confidence: 0.93575323375

 $00:56:37.950 \longrightarrow 00:56:40.831 \# 3$ can alleviate symptoms and

NOTE Confidence: 0.93575323375

00:56:40.831 --> 00:56:42.658 finally #4 it can prevent or delay

NOTE Confidence: 0.93575323375

00:56:42.658 --> 00:56:44.489 the onset of symptom development,

NOTE Confidence: 0.93575323375

 $00:56:44.490 \longrightarrow 00:56:46.295$ and that's important as we

NOTE Confidence: 0.93575323375

00:56:46.295 --> 00:56:48.550 talk a little bit more here.

NOTE Confidence: 0.93575323375

 $00{:}56{:}48.550 \dashrightarrow 00{:}56{:}49.183$ So you know.

NOTE Confidence: 0.93575323375

00:56:49.183 --> 00:56:50.660 So like I thought it would be

NOTE Confidence: 0.93575323375

00:56:50.712 --> 00:56:52.218 useful to go over some scenarios

00:56:52.218 --> 00:56:53.909 that some of your patients may

NOTE Confidence: 0.93575323375

 $00:56:53.909 \longrightarrow 00:56:55.489$ present with into the hospital.

NOTE Confidence: 0.93575323375

00:56:55.490 --> 00:56:59.026 And 11 scenario is in east symptomatic

NOTE Confidence: 0.93575323375

 $00:56:59.026 \longrightarrow 00:57:01.428$ prime patient that the patient presents

NOTE Confidence: 0.93575323375

 $00:57:01.428 \longrightarrow 00:57:03.708$ with asymptomatic disease with the

NOTE Confidence: 0.93575323375

 $00:57:03.708 \longrightarrow 00:57:06.330$ primary tumor without distant metastases.

NOTE Confidence: 0.93575323375

 $00:57:06.330 \longrightarrow 00:57:08.170$ So even though these patients

NOTE Confidence: 0.93575323375

 $00:57:08.170 \longrightarrow 00:57:09.642$ present with asymptomatic disease,

NOTE Confidence: 0.93575323375

 $00:57:09.650 \longrightarrow 00:57:10.832$ in retrospect,

NOTE Confidence: 0.93575323375

 $00:57:10.832 \longrightarrow 00:57:14.969$ many of them will have some symptomatology.

NOTE Confidence: 0.93575323375

00:57:14.970 --> 00:57:16.986 And they won't know about it until

NOTE Confidence: 0.93575323375

00:57:16.986 --> 00:57:18.689 after they've had their surgery.

NOTE Confidence: 0.93575323375

 $00:57:18.690 \longrightarrow 00:57:20.718$ But that symptomatology may have prompted

NOTE Confidence: 0.93575323375

 $00{:}57{:}20.718 \dashrightarrow 00{:}57{:}23.028$ their imaging in the 1st place and

NOTE Confidence: 0.93575323375

 $00:57:23.028 \longrightarrow 00:57:24.828$ the cross sectional imaging Dr Booing

NOTE Confidence: 0.93575323375

 $00:57:24.828 \longrightarrow 00:57:26.927$ can speak to this better than I can,

00:57:26.930 --> 00:57:29.210 but oftentimes it shows something such

NOTE Confidence: 0.93575323375

 $00{:}57{:}29.210 \dashrightarrow 00{:}57{:}31.928$ as a mesenteric or small bowel mass,

NOTE Confidence: 0.93575323375

 $00:57:31.930 \longrightarrow 00:57:34.430$ which is hyper enhancing.

NOTE Confidence: 0.93575323375

00:57:34.430 --> 00:57:36.305 Speculated or calcified,

NOTE Confidence: 0.93575323375

 $00:57:36.310 \longrightarrow 00:57:38.440$ and interestingly in the operating room,

NOTE Confidence: 0.93575323375

 $00:57:38.440 \longrightarrow 00:57:39.190$ you know,

NOTE Confidence: 0.93575323375

 $00:57:39.190 \longrightarrow 00:57:41.065$ the speculation is something we

NOTE Confidence: 0.93575323375

00:57:41.065 --> 00:57:42.518 really appreciate because these

NOTE Confidence: 0.93575323375

00:57:42.518 --> 00:57:44.394 tumors in the OR or the mesenteric

NOTE Confidence: 0.93575323375

 $00:57:44.394 \longrightarrow 00:57:46.339$ mass in the OR tend to be fixed,

NOTE Confidence: 0.93575323375

 $00.57:46.340 \longrightarrow 00.57:47.434$ fixated posteriorly,

NOTE Confidence: 0.93575323375

 $00:57:47.434 \longrightarrow 00:57:50.169$ as opposed to something that

NOTE Confidence: 0.93575323375

00:57:50.169 --> 00:57:51.810 some freely movable,

NOTE Confidence: 0.93575323375

 $00:57:51.810 \longrightarrow 00:57:53.665$ which is the case with some of

NOTE Confidence: 0.93575323375

 $00:57:53.665 \longrightarrow 00:57:55.258$ the benign small bowel tumors

 $00:57:55.258 \longrightarrow 00:57:56.726$ and even small biologists.

NOTE Confidence: 0.93575323375

 $00:57:56.730 \longrightarrow 00:57:59.300$ Another scenario is an asymptomatic

NOTE Confidence: 0.93575323375

 $00:57:59.300 \longrightarrow 00:58:01.870$ primary tumor with distant metastasis.

NOTE Confidence: 0.93575323375

 $00:58:01.870 \longrightarrow 00:58:03.655$ I'm going to talk a little bit

NOTE Confidence: 0.93575323375

 $00:58:03.655 \longrightarrow 00:58:04.420$ about about that.

NOTE Confidence: 0.93575323375

 $00.58:04.420 \longrightarrow 00.58:05.332$ In the last scenario,

NOTE Confidence: 0.93575323375

00:58:05.332 --> 00:58:06.700 because I think that's going to

NOTE Confidence: 0.93575323375

00.58.06.748 -> 00.58.08.169 be an important thing to go over.

NOTE Confidence: 0.752932856666667

 $00:58:10.200 \longrightarrow 00:58:12.240$ And and symptomatically.

NOTE Confidence: 0.752932856666667

00:58:12.240 --> 00:58:14.439 You know, sometimes these neuroendocrine

NOTE Confidence: 0.752932856666667

 $00:58:14.439 \longrightarrow 00:58:16.797$ tumors present with the bowel obstruction,

NOTE Confidence: 0.752932856666667

00:58:16.800 --> 00:58:18.291 abdominal pain, bleeding,

NOTE Confidence: 0.752932856666667

 $00:58:18.291 \longrightarrow 00:58:20.776$ and the and the so-called

NOTE Confidence: 0.752932856666667

 $00:58:20.776 \longrightarrow 00:58:24.570$ carcinoid syndrome as well so.

NOTE Confidence: 0.752932856666667

 $00:58:24.570 \longrightarrow 00:58:26.928$ An approach that is important is

NOTE Confidence: 0.752932856666667

 $00{:}58{:}26.928 {\: -->\:} 00{:}58{:}29.010$ expectations for our patients suffer.

 $00:58:29.010 \longrightarrow 00:58:31.378$ Patient knows what to expect in a non

NOTE Confidence: 0.752932856666667

 $00{:}58{:}31.378 \dashrightarrow 00{:}58{:}33.195$ emergent setting prior to undergoing

NOTE Confidence: 0.752932856666667

 $00:58:33.195 \longrightarrow 00:58:35.145$ a surgical and conchological section.

NOTE Confidence: 0.752932856666667

 $00:58:35.150 \longrightarrow 00:58:36.854$ It goes along way for their

NOTE Confidence: 0.752932856666667

 $00:58:36.854 \longrightarrow 00:58:37.990$ satisfaction down the road.

NOTE Confidence: 0.752932856666667

 $00:58:37.990 \longrightarrow 00:58:39.918$ That's something that our

NOTE Confidence: 0.752932856666667

 $00:58:39.918 \longrightarrow 00:58:42.293$ our group at Yale uses.

NOTE Confidence: 0.752932856666667

 $00:58:42.293 \longrightarrow 00:58:45.837$ So we talked to our patients ahead of

NOTE Confidence: 0.752932856666667

 $00{:}58{:}45.837 \dashrightarrow 00{:}58{:}47.978$ surgery and one thing that we talked

NOTE Confidence: 0.752932856666667

 $00:58:47.978 \longrightarrow 00:58:50.245$ to our patients about is sometimes that

NOTE Confidence: 0.752932856666667

 $00:58:50.245 \longrightarrow 00:58:52.744$ because of the multifocality of these tumors,

NOTE Confidence: 0.752932856666667

 $00:58:52.750 \longrightarrow 00:58:54.180$ larger areas of small bowel

NOTE Confidence: 0.752932856666667

 $00{:}58{:}54.180 \dashrightarrow 00{:}58{:}55.324$ need to be respected.

NOTE Confidence: 0.752932856666667

 $00:58:55.330 \longrightarrow 00:58:57.685$ Lead to increased frequency of

NOTE Confidence: 0.752932856666667

00:58:57.685 --> 00:59:00.040 their bowels of bowel movements.

 $00:59:00.040 \longrightarrow 00:59:01.200$ We also consider perceptibility.

NOTE Confidence: 0.752932856666667

 $00{:}59{:}01.200 \dashrightarrow 00{:}59{:}04.017$ A lot of it comes down to the mesenteric

NOTE Confidence: 0.752932856666667

 $00:59:04.017 \longrightarrow 00:59:06.057$ artery and the vein superior mesenteric,

NOTE Confidence: 0.752932856666667

 $00:59:06.060 \longrightarrow 00:59:07.374$ artery and vein.

NOTE Confidence: 0.752932856666667

 $00:59:07.374 \longrightarrow 00:59:10.002$ That's something we strongly consider for

NOTE Confidence: 0.752932856666667

 $00:59:10.002 \longrightarrow 00:59:12.120$ respectability for these guys into tumors,

NOTE Confidence: 0.752932856666667

00:59:12.120 --> 00:59:14.706 we and the surgery usually entails,

NOTE Confidence: 0.752932856666667

 $00:59:14.710 \longrightarrow 00:59:16.710$ and indirectly or small bowel

NOTE Confidence: 0.752932856666667

 $00:59:16.710 \longrightarrow 00:59:18.310$ resection with a lymphadenectomy.

NOTE Confidence: 0.752932856666667

 $00:59:18.310 \longrightarrow 00:59:20.070$ Sometimes it involves resection

NOTE Confidence: 0.752932856666667

 $00:59:20.070 \longrightarrow 00:59:21.830$ of a mesenteric mass,

NOTE Confidence: 0.752932856666667

00:59:21.830 --> 00:59:24.329 which is how a patient may present,

NOTE Confidence: 0.752932856666667

 $00:59:24.330 \longrightarrow 00:59:26.300$ and in the operating room.

NOTE Confidence: 0.752932856666667

00:59:26.300 --> 00:59:28.540 It's very important to palpate

NOTE Confidence: 0.752932856666667

 $00:59:28.540 \longrightarrow 00:59:29.884$ for synchronous tumors,

NOTE Confidence: 0.752932856666667

 $00:59:29.890 \longrightarrow 00:59:31.918$ so so open operations are preferred

00:59:31.918 --> 00:59:34.644 and I just want to spend just a

NOTE Confidence: 0.752932856666667

 $00:59:34.644 \longrightarrow 00:59:36.930$ minute talking about that as well too.

NOTE Confidence: 0.752932856666667

 $00{:}59{:}36.930 \dashrightarrow 00{:}59{:}39.610$ So we do a lot of laparoscopic and

NOTE Confidence: 0.752932856666667

 $00:59:39.610 \longrightarrow 00:59:41.548$ minimally invasive surgery at at Yale.

NOTE Confidence: 0.752932856666667

 $00:59:41.550 \longrightarrow 00:59:43.720$ A lot of our operations are done

NOTE Confidence: 0.752932856666667

 $00:59:43.720 \longrightarrow 00:59:44.650$ in that manner,

NOTE Confidence: 0.752932856666667

00:59:44.650 --> 00:59:47.030 and the way I look at laparoscopy

NOTE Confidence: 0.752932856666667

 $00{:}59{:}47.030 \dashrightarrow 00{:}59{:}48.415$ and minimally invasive surgeries

NOTE Confidence: 0.752932856666667

00:59:48.415 --> 00:59:51.122 that it should be a tool to provide

NOTE Confidence: 0.752932856666667

00:59:51.122 --> 00:59:52.986 a good oncologic operation.

NOTE Confidence: 0.752932856666667

00:59:52.990 --> 00:59:54.846 It shouldn't not be the other way around,

NOTE Confidence: 0.752932856666667

 $00:59:54.850 \longrightarrow 00:59:56.460$ meaning someone should not get.

NOTE Confidence: 0.752932856666667

 $00{:}59{:}56.460 {\:\dashrightarrow\:} 00{:}59{:}57.840$ A minimally invasive surgery just

NOTE Confidence: 0.752932856666667

00:59:57.840 --> 00:59:59.707 for the sake of getting minimally

NOTE Confidence: 0.752932856666667

 $00:59:59.707 \longrightarrow 01:00:00.579$ invasive surgery,

 $01:00:00.580 \longrightarrow 01:00:02.820$ but so so for the way we approach

NOTE Confidence: 0.752932856666667

 $01:00:02.820 \dashrightarrow 01:00:05.018$ these are we usually will do them.

NOTE Confidence: 0.752932856666667

01:00:05.020 --> 01:00:06.181 Laparoscopic Lee roulette,

NOTE Confidence: 0.752932856666667

01:00:06.181 --> 01:00:08.116 metastases and sometimes we could

NOTE Confidence: 0.752932856666667

01:00:08.116 --> 01:00:10.345 make a very small incision and

NOTE Confidence: 0.752932856666667

01:00:10.345 --> 01:00:12.080 eviscerate the tumor and palpate

NOTE Confidence: 0.752932856666667

 $01:00:12.080 \longrightarrow 01:00:13.980$ the entire small bowel to make

NOTE Confidence: 0.752932856666667

 $01:00:13.980 \longrightarrow 01:00:14.880$ sure that they're synchronous.

NOTE Confidence: 0.752932856666667

01:00:14.880 --> 01:00:16.190 Tumors are are not missed,

NOTE Confidence: 0.752932856666667

 $01:00:16.190 \longrightarrow 01:00:18.098$ which sometimes is the case with

NOTE Confidence: 0.752932856666667

 $01{:}00{:}18.098 \dashrightarrow 01{:}00{:}19.052$ true la paroscopic operations.

NOTE Confidence: 0.752932856666667

 $01:00:19.060 \longrightarrow 01:00:21.164$ For these small bell,

NOTE Confidence: 0.752932856666667

 $01:00:21.164 \longrightarrow 01:00:23.772$ any tease we value for distant

NOTE Confidence: 0.752932856666667

 $01:00:23.772 \longrightarrow 01:00:25.712$ metastases and sometimes consider a

NOTE Confidence: 0.752932856666667

 $01:00:25.712 \longrightarrow 01:00:27.129$ cholecystectomy and a lot of that.

NOTE Confidence: 0.752932856666667

 $01:00:27.130 \longrightarrow 01:00:29.559$ Ends up being a conversation with the

01:00:29.559 --> 01:00:31.750 surgical oncologist and medical oncologist,

NOTE Confidence: 0.752932856666667

 $01:00:31.750 \longrightarrow 01:00:34.137$ and about this patient may be a

NOTE Confidence: 0.752932856666667

 $01:00:34.137 \longrightarrow 01:00:35.911$ candidate for langeotide in the

NOTE Confidence: 0.752932856666667

 $01:00:35.911 \longrightarrow 01:00:37.957$ future which can predispose to the

NOTE Confidence: 0.752932856666667

01:00:37.957 --> 01:00:41.080 development of gallstones. Uhm?

NOTE Confidence: 0.752932856666667

 $01:00:41.080 \longrightarrow 01:00:43.270$ So so a few scenarios.

NOTE Confidence: 0.752932856666667

 $01:00:43.270 \longrightarrow 01:00:46.276$ So patient presents with an incidental

NOTE Confidence: 0.752932856666667

 $01:00:46.280 \longrightarrow 01:00:48.330$ finding on cross sectional imaging.

NOTE Confidence: 0.752932856666667

 $01:00:48.330 \longrightarrow 01:00:50.244$ You know our suggestions are the

NOTE Confidence: 0.752932856666667

 $01:00:50.244 \longrightarrow 01:00:52.213$ patient should be evaluated by a

NOTE Confidence: 0.752932856666667

 $01{:}00{:}52.213 \dashrightarrow 01{:}00{:}53.489$ surgical oncologist per section

NOTE Confidence: 0.752932856666667

 $01:00:53.490 \longrightarrow 01:00:54.918$ the patient presents,

NOTE Confidence: 0.752932856666667

 $01{:}00{:}54.918 \dashrightarrow 01{:}00{:}56.822$ with an isolated mesenteric

NOTE Confidence: 0.752932856666667

 $01:00:56.822 \longrightarrow 01:00:58.672$ mass or small bowel mass,

NOTE Confidence: 0.752932856666667

 $01:00:58.672 \longrightarrow 01:01:00.730$ and the reasons we consider surgery

 $01:01:00.797 \longrightarrow 01:01:02.722$ are again, it could be diagnostic.

NOTE Confidence: 0.752932856666667

 $01{:}01{:}02.722 \dashrightarrow 01{:}01{:}04.362$ Sometimes these tumors are not

NOTE Confidence: 0.752932856666667

01:01:04.362 --> 01:01:05.880 always new render consumers,

NOTE Confidence: 0.752932856666667

 $01:01:05.880 \longrightarrow 01:01:07.252$ but they usually are when we look

NOTE Confidence: 0.752932856666667

01:01:07.252 --> 01:01:08.650 at it with our radiologists,

NOTE Confidence: 0.752932856666667

 $01:01:08.650 \longrightarrow 01:01:10.078$ but sometimes they're not,

NOTE Confidence: 0.752932856666667

01:01:10.078 --> 01:01:11.863 so it's something to consider.

NOTE Confidence: 0.752932856666667

01:01:11.870 --> 01:01:12.280 In,

NOTE Confidence: 0.752932856666667

 $01:01:12.280 \longrightarrow 01:01:14.330$ the operation is potentially curative

NOTE Confidence: 0.931561368

 $01:01:14.330 \longrightarrow 01:01:15.670$ and this is very important.

NOTE Confidence: 0.931561368

01:01:15.670 --> 01:01:17.520 It can avoid future symptoms

NOTE Confidence: 0.931561368

01:01:17.520 --> 01:01:18.630 of bowel obstruction,

NOTE Confidence: 0.931561368

 $01:01:18.630 \longrightarrow 01:01:19.722$ bleeding or ischaemia,

NOTE Confidence: 0.931561368

 $01:01:19.722 \longrightarrow 01:01:21.542$ which sometimes happens in these

NOTE Confidence: 0.931561368

 $01:01:21.542 \longrightarrow 01:01:23.308$ small bells are under primary.

NOTE Confidence: 0.931561368

 $01:01:23.310 \longrightarrow 01:01:24.594$ Tumors are left alone,

 $01:01:24.594 \longrightarrow 01:01:26.520$ so that's an important point to

NOTE Confidence: 0.931561368

 $01:01:26.585 \longrightarrow 01:01:28.300$ mention and we and we do see

NOTE Confidence: 0.931561368

 $01:01:28.300 \longrightarrow 01:01:30.255$ that sometime and again with the

NOTE Confidence: 0.931561368

01:01:30.255 --> 01:01:31.960 patient that had an arrangement

NOTE Confidence: 0.931561368

01:01:32.025 --> 01:01:33.819 in which was being observed and

NOTE Confidence: 0.931561368

 $01:01:33.820 \longrightarrow 01:01:36.406$ so and the patient can present

NOTE Confidence: 0.931561368

 $01:01:36.406 \longrightarrow 01:01:38.558$ with some symptoms down the road.

NOTE Confidence: 0.931561368

 $01:01:38.558 \longrightarrow 01:01:41.399$ And of course it can avoid reduced risk.

NOTE Confidence: 0.931561368

 $01:01:41.400 \longrightarrow 01:01:43.830$ For tests.

NOTE Confidence: 0.931561368

 $01:01:43.830 \longrightarrow 01:01:45.745$ Another scenario is an asymptomatic

NOTE Confidence: 0.931561368

01:01:45.745 --> 01:01:47.277 primary with distant metastasis,

NOTE Confidence: 0.931561368

 $01:01:47.280 \longrightarrow 01:01:49.810$ and again this can be.

NOTE Confidence: 0.931561368

01:01:49.810 --> 01:01:52.090 This would suggest to be evaluated

NOTE Confidence: 0.931561368

 $01:01:52.090 \longrightarrow 01:01:54.312$ by a surgical oncologist and and

NOTE Confidence: 0.931561368

 $01:01:54.312 \longrightarrow 01:01:56.208$ the reasons for surgery in order

 $01:01:56.208 \longrightarrow 01:01:58.844$ to avoid future complications and

NOTE Confidence: 0.931561368

 $01{:}01{:}58.844 \dashrightarrow 01{:}02{:}01.516$ metastasis and and discomfort.

NOTE Confidence: 0.931561368

 $01:02:01.520 \longrightarrow 01:02:02.984$ This kind of an approach can

NOTE Confidence: 0.931561368

 $01:02:02.984 \longrightarrow 01:02:04.368$ still provide a profession free

NOTE Confidence: 0.931561368

 $01:02:04.368 \longrightarrow 01:02:05.080$ survival advantage.

NOTE Confidence: 0.876315255

01:02:07.990 --> 01:02:10.006 And then and then, if patients.

NOTE Confidence: 0.876315255

01:02:10.010 --> 01:02:11.822 Sometimes patients present symptomatically

NOTE Confidence: 0.876315255

 $01:02:11.822 \longrightarrow 01:02:13.634$ and impatient that's presenting

NOTE Confidence: 0.876315255

01:02:13.634 --> 01:02:15.304 symptomatically should probably just get

NOTE Confidence: 0.876315255

 $01:02:15.304 \longrightarrow 01:02:17.522$ to the operating room and be seen by a

NOTE Confidence: 0.876315255

 $01:02:17.522 \longrightarrow 01:02:19.028$ general surgeon in the local hospital.

NOTE Confidence: 0.876315255

 $01:02:19.030 \longrightarrow 01:02:20.640$ Because sometimes these patients you

NOTE Confidence: 0.876315255

 $01:02:20.640 \longrightarrow 01:02:23.109$ know don't have room to be transferred,

NOTE Confidence: 0.876315255

 $01:02:23.110 \longrightarrow 01:02:25.036$ and they and acute ballot traction

NOTE Confidence: 0.876315255

01:02:25.036 --> 01:02:26.709 should just usually be managed

NOTE Confidence: 0.876315255

 $01:02:26.709 \longrightarrow 01:02:28.689$ locally and the reasons for this.

 $01:02:28.690 \longrightarrow 01:02:30.975$ Of course the obvious it

NOTE Confidence: 0.876315255

 $01:02:30.975 \longrightarrow 01:02:32.346$ alleviates her symptoms.

NOTE Confidence: 0.876315255

 $01:02:32.350 \longrightarrow 01:02:34.285$ That it can be diagnosed

NOTE Confidence: 0.876315255

 $01:02:34.285 \longrightarrow 01:02:35.833$ and be potentially cured.

NOTE Confidence: 0.876315255

 $01:02:35.840 \longrightarrow 01:02:38.885$ And a patient example here is an

NOTE Confidence: 0.876315255

01:02:38.885 --> 01:02:40.697 asymptomatic patient with

NOTE Confidence: 0.876315255

 $01:02:40.697 \longrightarrow 01:02:42.837$ an asymptomatic small bell NET.

NOTE Confidence: 0.876315255

 $01:02:42.840 \longrightarrow 01:02:45.072$ This is a 59 year old male who presented

NOTE Confidence: 0.876315255

 $01:02:45.072 \longrightarrow 01:02:47.424$ with a 4.2 centimeter hyper enhancing

NOTE Confidence: 0.876315255

 $01:02:47.424 \longrightarrow 01:02:50.260$ mesenteric mass on CT for abdominal pain,

NOTE Confidence: 0.876315255

 $01:02:50.260 \longrightarrow 01:02:53.662$ which resolved by the time we evaluated

NOTE Confidence: 0.876315255

 $01{:}02{:}53.662 \dashrightarrow 01{:}02{:}56.910$ him and then this picture shows a CAT scan

NOTE Confidence: 0.876315255

01:02:56.910 --> 01:02:59.655 with a hyper In Sync 4.2 centimeter mass,

NOTE Confidence: 0.876315255

 $01:02:59.655 \longrightarrow 01:03:01.605$ which we ended up taking to

NOTE Confidence: 0.876315255

01:03:01.605 --> 01:03:03.502 the OR and resecting which is

 $01:03:03.502 \longrightarrow 01:03:05.699$ showing all the way in the right.

NOTE Confidence: 0.876315255

 $01:03:05.700 \longrightarrow 01:03:09.060$ And we did an enbloc small bowel

NOTE Confidence: 0.876315255

 $01:03:09.060 \longrightarrow 01:03:11.204$ resection with the mesenteric mass

NOTE Confidence: 0.876315255

 $01:03:11.204 \longrightarrow 01:03:13.700$ and the and the surgical pathology

NOTE Confidence: 0.876315255

 $01:03:13.774 \longrightarrow 01:03:15.679$ revealed multifocal tumors.

NOTE Confidence: 0.876315255

01:03:15.680 --> 01:03:18.910 Node positive disease without metastasis,

NOTE Confidence: 0.876315255

 $01:03:18.910 \longrightarrow 01:03:22.109$ and it was a grade one tear.

NOTE Confidence: 0.876315255

01:03:22.110 --> 01:03:22.956 And finally,

NOTE Confidence: 0.876315255

 $01{:}03{:}22.956 \dashrightarrow 01{:}03{:}25.494$ I'll end this session by submitting

NOTE Confidence: 0.876315255

 $01:03:25.494 \longrightarrow 01:03:27.469$ metastatic here under consumers.

NOTE Confidence: 0.876315255

01:03:27.470 --> 01:03:28.136 So again,

NOTE Confidence: 0.876315255

 $01:03:28.136 \longrightarrow 01:03:29.801$ some perspective on things from

NOTE Confidence: 0.876315255

 $01:03:29.801 \longrightarrow 01:03:31.384$ a surgeon's perspective that so

NOTE Confidence: 0.876315255

 $01:03:31.384 \longrightarrow 01:03:32.980$ the reason we find this important

NOTE Confidence: 0.876315255

 $01:03:32.980 \longrightarrow 01:03:34.489$ is because the third patient,

NOTE Confidence: 0.876315255

 $01:03:34.490 \longrightarrow 01:03:36.010$ present with cysteine metastasis

 $01:03:36.010 \longrightarrow 01:03:37.150$ in the liver,

NOTE Confidence: 0.876315255

 $01{:}03{:}37.150 \dashrightarrow 01{:}03{:}39.334$ happens to be the most common

NOTE Confidence: 0.876315255

 $01:03:39.334 \longrightarrow 01:03:40.426$ site of metastasis.

NOTE Confidence: 0.876315255

01:03:40.430 --> 01:03:42.098 Metastasis is important because

NOTE Confidence: 0.876315255

01:03:42.098 --> 01:03:44.183 it negatively affects revival as,

NOTE Confidence: 0.876315255

 $01:03:44.190 \longrightarrow 01:03:45.156$ as we know,

NOTE Confidence: 0.876315255

01:03:45.156 --> 01:03:47.410 and that's the case with all cancers,

NOTE Confidence: 0.876315255

 $01:03:47.410 \longrightarrow 01:03:49.330$ and there's a increased risk of

NOTE Confidence: 0.876315255

 $01:03:49.330 \longrightarrow 01:03:51.145$ death compared to an individual

NOTE Confidence: 0.876315255

01:03:51.145 --> 01:03:53.017 that has localized disease.

NOTE Confidence: 0.876315255

 $01{:}03{:}53.020 \dashrightarrow 01{:}03{:}54.478$ Clinical presentation can

NOTE Confidence: 0.876315255

01:03:54.478 --> 01:03:55.936 include hormonal symptoms,

NOTE Confidence: 0.876315255

 $01{:}03{:}55.940 \dashrightarrow 01{:}03{:}57.296$ and that's more often the case

NOTE Confidence: 0.876315255

 $01:03:57.296 \longrightarrow 01:03:58.700$ for small bowel and any tease.

NOTE Confidence: 0.876315255

 $01:03:58.700 \longrightarrow 01:04:01.008$ This could be diarrhea,

01:04:01.008 --> 01:04:02.739 wheezing and flushing,

NOTE Confidence: 0.876315255

 $01{:}04{:}02.740 \dashrightarrow 01{:}04{:}04.710$ and sometimes the patients could

NOTE Confidence: 0.876315255

 $01:04:04.710 \longrightarrow 01:04:07.151$ have valves are right sided valvular

NOTE Confidence: 0.876315255

 $01:04:07.151 \longrightarrow 01:04:09.965$ disease which can lead to heart failure.

NOTE Confidence: 0.876315255

 $01:04:09.970 \longrightarrow 01:04:11.113$ Increase your under.

NOTE Confidence: 0.876315255

01:04:11.113 --> 01:04:12.256 Consumers are important.

NOTE Confidence: 0.876315255

 $01:04:12.260 \longrightarrow 01:04:15.690$ They're at their often nonfunctional

NOTE Confidence: 0.876315255

 $01:04:15.690 \longrightarrow 01:04:18.434$ in cases of metastasis.

NOTE Confidence: 0.876315255

 $01:04:18.440 \longrightarrow 01:04:20.828$ The goal for the arguments supporting

NOTE Confidence: 0.876315255

 $01:04:20.828 \longrightarrow 01:04:22.785$ surgery for metastatic any teas

NOTE Confidence: 0.876315255

01:04:22.785 --> 01:04:24.543 are the first in the important

NOTE Confidence: 0.876315255

 $01:04:24.543 \longrightarrow 01:04:26.606$ thing is to control the tumor

NOTE Confidence: 0.876315255

 $01:04:26.606 \longrightarrow 01:04:29.428$ burden and by respecting ones

NOTE Confidence: 0.876315255

 $01:04:29.428 \longrightarrow 01:04:31.198$ metastatic neuroendocrine tumors.

NOTE Confidence: 0.876315255

 $01:04:31.198 \longrightarrow 01:04:34.093$ The progression free survival improves

NOTE Confidence: 0.876315255

 $01:04:34.093 \longrightarrow 01:04:37.574$ the patients as a whole and you know

 $01:04:37.574 \longrightarrow 01:04:39.842$ the literature can show five year

NOTE Confidence: 0.876315255

 $01:04:39.842 \longrightarrow 01:04:42.316$ overall five year survival up to 74%.

NOTE Confidence: 0.876315255

01:04:42.316 --> 01:04:43.324 That's overall survival,

NOTE Confidence: 0.876315255

 $01:04:43.324 \longrightarrow 01:04:45.340$ but the important thing to understand

NOTE Confidence: 0.876315255

 $01:04:45.399 \longrightarrow 01:04:47.254$ is there's a high risk of recurrence.

NOTE Confidence: 0.876315255

01:04:47.260 --> 01:04:49.078 Despite that kind of an approach,

NOTE Confidence: 0.876315255

 $01:04:49.080 \longrightarrow 01:04:50.310$ so even though I'm talking

NOTE Confidence: 0.876315255

 $01{:}04{:}50.310 \dashrightarrow 01{:}04{:}52.060$ about 5 year old roll survival,

NOTE Confidence: 0.876315255

 $01:04:52.060 \longrightarrow 01:04:54.310$ if 74% the recurrence rate

NOTE Confidence: 0.876315255

 $01:04:54.310 \longrightarrow 01:04:56.560$ is nearly is over 80%.

NOTE Confidence: 0.876315255

 $01:04:56.560 \longrightarrow 01:04:57.778$ But there is benefit to doing

NOTE Confidence: 0.876315255

 $01:04:57.778 \longrightarrow 01:04:58.983$ this because it can provide

NOTE Confidence: 0.876315255

 $01{:}04{:}58.983 \dashrightarrow 01{:}05{:}00.039$ effective symptom control,

NOTE Confidence: 0.876315255

 $01:05:00.040 \longrightarrow 01:05:01.468$ particularly for functioning tumors.

NOTE Confidence: 0.876315255

 $01:05:01.468 \longrightarrow 01:05:03.610$ It could prevent or delay the

 $01:05:03.667 \longrightarrow 01:05:05.399$ sequelae of carcinoid syndromes.

NOTE Confidence: 0.876315255

01:05:05.400 --> 01:05:07.435 It can improve one's performance

NOTE Confidence: 0.876315255

01:05:07.435 --> 01:05:08.656 status and pain,

NOTE Confidence: 0.876315255

 $01:05:08.660 \longrightarrow 01:05:11.516$ and this is the case more for

NOTE Confidence: 0.876315255

 $01:05:11.516 \longrightarrow 01:05:12.994$ nonfunctioning tumors and the number

NOTE Confidence: 0.876315255

 $01:05:12.994 \longrightarrow 01:05:14.808$ has shifted us to the number of the

NOTE Confidence: 0.876315255

01:05:14.808 --> 01:05:16.664 percent of tumor that we'd like to site,

NOTE Confidence: 0.86289710555556

 $01:05:16.670 \longrightarrow 01:05:17.465$ or reducing individual.

NOTE Confidence: 0.86289710555556

 $01:05:17.465 \longrightarrow 01:05:19.055$ And there was a time where.

NOTE Confidence: 0.862897105555556

 $01:05:19.060 \longrightarrow 01:05:20.670$ We used to think more along the

NOTE Confidence: 0.862897105555556

 $01{:}05{:}20.670 \dashrightarrow 01{:}05{:}22.665$ lines of 90% but more recent

NOTE Confidence: 0.86289710555556

 $01:05:22.665 \longrightarrow 01:05:24.840$ literature has suggested that that

NOTE Confidence: 0.86289710555556

 $01:05:24.840 \longrightarrow 01:05:26.957$ number might be closer to 70%.

NOTE Confidence: 0.862897105555556

01:05:26.960 --> 01:05:28.800 Reduction of the tumor burden,

NOTE Confidence: 0.862897105555556

 $01:05:28.800 \longrightarrow 01:05:30.228$ and it's important if one can

NOTE Confidence: 0.86289710555556

 $01:05:30.228 \longrightarrow 01:05:31.940$ have this kind of cytoreduction,

 $01:05:31.940 \longrightarrow 01:05:33.935$ and we usually try to remove the

NOTE Confidence: 0.862897105555556

 $01{:}05{:}33.935 \to 01{:}05{:}35.785$ primary tumor in the regional disease

NOTE Confidence: 0.862897105555556

 $01:05:35.785 \longrightarrow 01:05:37.872$ in this 70% number that I mentioned.

NOTE Confidence: 0.862897105555556

 $01:05:37.872 \longrightarrow 01:05:40.503$ But even if one does not have their

NOTE Confidence: 0.86289710555556

 $01:05:40.503 \longrightarrow 01:05:42.187$ primary tumor that's identified.

NOTE Confidence: 0.86289710555556

 $01:05:42.190 \longrightarrow 01:05:44.332$ One can still consider a cytoreductive

NOTE Confidence: 0.862897105555556

 $01:05:44.332 \longrightarrow 01:05:46.856$ surgery if greater than 70% of the

NOTE Confidence: 0.86289710555556

 $01:05:46.856 \longrightarrow 01:05:48.568$ disease burden that's clinically

NOTE Confidence: 0.862897105555556

 $01:05:48.568 \longrightarrow 01:05:50.280$ present can be addressed.

NOTE Confidence: 0.86289710555556

 $01:05:50.280 \dashrightarrow 01:05:52.206$ And extrahepatic disease is not a

NOTE Confidence: 0.862897105555556

 $01:05:52.206 \longrightarrow 01:05:53.490$ contraindication to the surgical

NOTE Confidence: 0.86289710555556

 $01:05:53.543 \longrightarrow 01:05:54.419$ site or reduction.

NOTE Confidence: 0.83799956

 $01{:}05{:}57.110 \dashrightarrow 01{:}05{:}59.672$ The tools that we use in surgical

NOTE Confidence: 0.83799956

01:05:59.672 --> 01:06:00.770 oncology for Cytoreduction,

NOTE Confidence: 0.83799956

 $01:06:00.770 \longrightarrow 01:06:02.135$ and I'm focusing a little bit more

 $01:06:02.135 \longrightarrow 01:06:03.475$ on the liver because I'm very

NOTE Confidence: 0.83799956

01:06:03.475 --> 01:06:04.875 biased towards the liver and, uh,

NOTE Confidence: 0.83799956

01:06:04.875 --> 01:06:06.310 I like operating the liver and then

NOTE Confidence: 0.83799956

 $01:06:06.310 \longrightarrow 01:06:07.735$ this ends up being the most one

NOTE Confidence: 0.83799956

 $01:06:07.735 \longrightarrow 01:06:09.260$ of the most common sites for the

NOTE Confidence: 0.83799956

 $01:06:09.260 \longrightarrow 01:06:10.550$ most common cited medicine disease.

NOTE Confidence: 0.83799956

 $01:06:10.550 \longrightarrow 01:06:12.647$ For any tease, we often will try to do

NOTE Confidence: 0.83799956

01:06:12.647 --> 01:06:14.897 what's called prank while sparing resections,

NOTE Confidence: 0.83799956

 $01{:}06{:}14.900 \dashrightarrow 01{:}06{:}16.870$ because, as I mentioned before,

NOTE Confidence: 0.83799956

01:06:16.870 --> 01:06:19.893 many of these patients were occur and

NOTE Confidence: 0.83799956

 $01{:}06{:}19.893 \dashrightarrow 01{:}06{:}22.644$ and they can have a longer survival,

NOTE Confidence: 0.83799956

 $01:06:22.650 \longrightarrow 01:06:23.987$ and they can recur in the liver,

NOTE Confidence: 0.83799956

 $01:06:23.990 \longrightarrow 01:06:26.174$ so we try to do prank whispering resections.

NOTE Confidence: 0.83799956

01:06:26.180 --> 01:06:27.389 Impossible understanding that.

NOTE Confidence: 0.83799956

 $01:06:27.389 \longrightarrow 01:06:29.404$ Well, if there's another recurrence

NOTE Confidence: 0.83799956

 $01:06:29.404 \longrightarrow 01:06:30.540$ down the road,

 $01:06:30.540 \longrightarrow 01:06:32.871$ it can allow the patient for a

NOTE Confidence: 0.83799956

 $01:06:32.871 \longrightarrow 01:06:34.659$ second liver operation or liver

NOTE Confidence: 0.83799956

 $01:06:34.659 \longrightarrow 01:06:36.454$ directed therapy down the road.

NOTE Confidence: 0.83799956

 $01:06:36.460 \longrightarrow 01:06:38.868$ But sometimes we do need to perform

NOTE Confidence: 0.83799956

 $01:06:38.868 \longrightarrow 01:06:41.245$ major head protect me as given the

NOTE Confidence: 0.83799956

 $01:06:41.245 \longrightarrow 01:06:43.368$ distribution of the testis is sometimes

NOTE Confidence: 0.83799956

 $01:06:43.368 \longrightarrow 01:06:46.228$ we consider a microwave ablation where

NOTE Confidence: 0.83799956

 $01:06:46.228 \longrightarrow 01:06:48.190$ we put a probe into the center of the

NOTE Confidence: 0.83799956

 $01:06:48.248 \longrightarrow 01:06:50.053$ tumor or sometimes our interventional

NOTE Confidence: 0.83799956

 $01:06:50.053 \longrightarrow 01:06:51.858$ radiology colleagues who are very

NOTE Confidence: 0.83799956

 $01{:}06{:}51.911 \dashrightarrow 01{:}06{:}54.141$ adept at doing that can do that as well too.

NOTE Confidence: 0.83799956

 $01:06:54.150 \longrightarrow 01:06:55.606$ And if they can do it in

NOTE Confidence: 0.83799956

 $01:06:55.606 \longrightarrow 01:06:56.680$ the last invasive fashion,

NOTE Confidence: 0.83799956

 $01:06:56.680 \longrightarrow 01:06:57.430$ that's always.

NOTE Confidence: 0.83799956

 $01:06:57.430 \longrightarrow 01:06:59.652$ Investing for the patient and surgical

 $01:06:59.652 \longrightarrow 01:07:01.818$ site or rejection should be attempted

NOTE Confidence: 0.83799956

 $01:07:01.818 \longrightarrow 01:07:03.957$ when it's an atomically feasible and it

NOTE Confidence: 0.83799956

 $01:07:03.957 \longrightarrow 01:07:06.650$ can be performed with a low morbidity.

NOTE Confidence: 0.83799956

01:07:06.650 --> 01:07:09.849 So I'll end with a patient example,

NOTE Confidence: 0.83799956

 $01:07:09.850 \longrightarrow 01:07:12.343$ and this is a 62 year old male who,

NOTE Confidence: 0.83799956

 $01:07:12.343 \longrightarrow 01:07:13.808$ when I had seen him,

NOTE Confidence: 0.83799956

 $01:07:13.810 \longrightarrow 01:07:15.665$ was five years after the status posted,

NOTE Confidence: 0.83799956

 $01:07:15.670 \longrightarrow 01:07:18.005$ dissipate protect me for nonfunctioning

NOTE Confidence: 0.83799956

 $01:07:18.005 \longrightarrow 01:07:21.536$ tankers or under consumer one of his smile.

NOTE Confidence: 0.83799956

01:07:21.536 --> 01:07:23.192 Medical oncologists was surveying

NOTE Confidence: 0.83799956

 $01{:}07{:}23.192 \dashrightarrow 01{:}07{:}25.882$ him and and identified enlarge.

NOTE Confidence: 0.83799956

01:07:25.882 --> 01:07:28.154 Enlarge incompat exclusions on

NOTE Confidence: 0.83799956

 $01:07:28.154 \longrightarrow 01:07:30.620$ surveillance cross sectional images.

NOTE Confidence: 0.83799956

 $01{:}07{:}30.620 \dashrightarrow 01{:}07{:}32.100$ And this doesn't show everything,

NOTE Confidence: 0.83799956

 $01:07:32.100 \longrightarrow 01:07:34.636$ but this is a patient that had three

NOTE Confidence: 0.83799956

 $01:07:34.636 \longrightarrow 01:07:36.726$ tumors when we had seen seen him,

 $01:07:36.730 \longrightarrow 01:07:38.698$ one in the left lateral liver,

NOTE Confidence: 0.83799956

 $01:07:38.700 \longrightarrow 01:07:40.518$ one in the left medial liver,

NOTE Confidence: 0.83799956

 $01:07:40.520 \longrightarrow 01:07:42.235$ and then one in the right liver.

NOTE Confidence: 0.83799956

01:07:42.240 --> 01:07:44.944 And and then we went ahead and we

NOTE Confidence: 0.83799956

 $01:07:44.944 \longrightarrow 01:07:47.134$ actually needed to do a a major

NOTE Confidence: 0.83799956

 $01:07:47.134 \longrightarrow 01:07:49.000$ liver section for the left side,

NOTE Confidence: 0.83799956

 $01:07:49.000 \longrightarrow 01:07:51.076$ and apparently sparing resection on the

NOTE Confidence: 0.83799956

 $01{:}07{:}51.076 \longrightarrow 01{:}07{:}53.640$ right side to clear all of the disease.

NOTE Confidence: 0.83799956

 $01:07:53.640 \longrightarrow 01:07:56.088$ And and we did a cholecystectomy

NOTE Confidence: 0.83799956

 $01:07:56.088 \longrightarrow 01:07:58.579$ in this case as well too,

NOTE Confidence: 0.83799956

 $01:07:58.580 \longrightarrow 01:08:01.052$ and the pathology revealed

NOTE Confidence: 0.83799956

 $01:08:01.052 \longrightarrow 01:08:02.370$ for neuroendocrine tumors,

NOTE Confidence: 0.83799956

 $01{:}08{:}02.370 \dashrightarrow 01{:}08{:}04.470$ which were identified in the liver,

NOTE Confidence: 0.83799956

 $01:08:04.470 \longrightarrow 01:08:06.090$ which were well differentiated.

NOTE Confidence: 0.8057071

 $01:08:08.540 \longrightarrow 01:08:10.752$ So the surgical manager of papers at

01:08:10.752 --> 01:08:12.110 small bowel neuroendocrine tumors,

NOTE Confidence: 0.8057071

 $01:08:12.110 \longrightarrow 01:08:14.770$ the incidence is rising.

NOTE Confidence: 0.8057071

 $01:08:14.770 \longrightarrow 01:08:17.110$ Section of primary neuroendocrine tumors.

NOTE Confidence: 0.8057071

01:08:17.110 --> 01:08:20.057 This clinical benefit and we've shown that,

NOTE Confidence: 0.8057071

 $01:08:20.060 \longrightarrow 01:08:21.719$ and I've shown that the pancreas for

NOTE Confidence: 0.8057071

01:08:21.719 --> 01:08:23.129 under consumers those non functioning,

NOTE Confidence: 0.8057071

01:08:23.130 --> 01:08:25.415 functioning and for small Val

NOTE Confidence: 0.8057071

 $01:08:25.415 \longrightarrow 01:08:27.380$ any teas and finally surgical

NOTE Confidence: 0.8057071

 $01:08:27.380 \longrightarrow 01:08:29.130$ site of reduction for metastatic.

NOTE Confidence: 0.8057071

01:08:29.130 --> 01:08:31.068 Any tease has clinical benefit at

NOTE Confidence: 0.8057071

 $01:08:31.068 \longrightarrow 01:08:33.620$ greater than 70% of the tumor burden.

NOTE Confidence: 0.8057071

 $01:08:33.620 \longrightarrow 01:08:34.410$ Which percentage.

NOTE Confidence: 0.8057071

 $01:08:34.410 \longrightarrow 01:08:35.580$ OK, thank you for your time.

NOTE Confidence: 0.731997347142857

 $01:08:41.520 \longrightarrow 01:08:44.145$ Thank you to doctors appointment and con.

NOTE Confidence: 0.731997347142857

 $01:08:44.150 \longrightarrow 01:08:46.570$ Those were both great presentations,

NOTE Confidence: 0.731997347142857

 $01:08:46.570 \longrightarrow 01:08:48.802$ so I think what we'll try to do is

 $01:08:48.810 \longrightarrow 01:08:50.544$ tackle some of the questions that

NOTE Confidence: 0.731997347142857

 $01{:}08{:}50.544 \dashrightarrow 01{:}08{:}52.748$ have come through the chat and I also

NOTE Confidence: 0.731997347142857

 $01:08:52.748 \longrightarrow 01:08:54.538$ have some questions for the two of

NOTE Confidence: 0.731997347142857

 $01:08:54.538 \longrightarrow 01:08:56.288$ you and we can have a conversation.

NOTE Confidence: 0.731997347142857

 $01:08:56.290 \longrightarrow 01:09:00.586$ So one of the the first questions

NOTE Confidence: 0.731997347142857

 $01:09:00.586 \longrightarrow 01:09:03.061$ that came through is I think this

NOTE Confidence: 0.731997347142857

 $01:09:03.061 \longrightarrow 01:09:04.363$ was in reference and Doctor Boy

NOTE Confidence: 0.731997347142857

 $01:09:04.363 \dashrightarrow 01:09:05.987$ and maybe I'll direct this to you.

NOTE Confidence: 0.731997347142857

01:09:05.990 --> 01:09:11.640 Is can the Ludo dictate treatment?

NOTE Confidence: 0.731997347142857

01:09:11.640 --> 01:09:16.440 PRT if it started early I'm

NOTE Confidence: 0.731997347142857

 $01:09:16.440 \longrightarrow 01:09:19.760$ can we achieve cure from this?

NOTE Confidence: 0.731997347142857

01:09:19.760 --> 01:09:23.288 And particularly if the cancer load is low,

NOTE Confidence: 0.731997347142857

 $01{:}09{:}23.290 \dashrightarrow 01{:}09{:}24.674$ that's I think as pirational,

NOTE Confidence: 0.731997347142857

 $01:09:24.674 \longrightarrow 01:09:27.180$ but I will allow you to maybe

NOTE Confidence: 0.731997347142857

 $01:09:27.180 \longrightarrow 01:09:28.616$ comment some on that.

 $01:09:28.620 \longrightarrow 01:09:30.396$ What are the goals of treatment and in

NOTE Confidence: 0.731997347142857

01:09:30.396 --> 01:09:31.887 what setting do we typically use it?

NOTE Confidence: 0.906368257142857

 $01:09:33.070 \longrightarrow 01:09:38.160$ Yeah, this is a really great question now.

NOTE Confidence: 0.906368257142857

 $01:09:38.160 \longrightarrow 01:09:40.890$ The indications for which PRT is

NOTE Confidence: 0.906368257142857

 $01:09:40.890 \longrightarrow 01:09:43.738$ being used for right now is for.

NOTE Confidence: 0.906368257142857

01:09:43.740 --> 01:09:45.664 For well differentiated tumors,

NOTE Confidence: 0.906368257142857

01:09:45.664 --> 01:09:50.449 and when we do the therapy majority of the

NOTE Confidence: 0.906368257142857

 $01:09:50.449 \longrightarrow 01:09:54.880$ tumors actually do not decrease in size,

NOTE Confidence: 0.906368257142857

01:09:54.880 --> 01:09:56.836 but it does slow their growth,

NOTE Confidence: 0.906368257142857

 $01:09:56.840 \longrightarrow 01:09:58.840$ so there's significant improvement

NOTE Confidence: 0.906368257142857

 $01{:}09{:}58.840 \dashrightarrow 01{:}10{:}00.780$ in progression. Free survival.

NOTE Confidence: 0.906368257142857

01:10:00.780 --> 01:10:04.070 So no, this is not a cure,

NOTE Confidence: 0.906368257142857

 $01:10:04.070 \longrightarrow 01:10:07.436$ but it does improve symptoms and

NOTE Confidence: 0.906368257142857

 $01:10:07.436 \longrightarrow 01:10:11.030$ improve survival. In patients.

NOTE Confidence: 0.906368257142857

 $01:10:11.030 \longrightarrow 01:10:13.630$ So that's for the lutetium.

NOTE Confidence: 0.906368257142857

 $01:10:13.630 \longrightarrow 01:10:17.861$ We still have a lot of other therapies in in

01:10:17.861 --> 01:10:20.447 the pipeline that we're still evaluating,

NOTE Confidence: 0.906368257142857

 $01:10:20.450 \longrightarrow 01:10:22.088$ but the goal is not cure.

NOTE Confidence: 0.906368257142857

 $01:10:22.090 \longrightarrow 01:10:24.160$ The goal is extension of life

NOTE Confidence: 0.906368257142857

 $01:10:24.160 \longrightarrow 01:10:25.540$ and improvement of symptoms.

NOTE Confidence: 0.864932581428571

 $01:10:27.300 \longrightarrow 01:10:29.834$ Thank you, there was another question that

NOTE Confidence: 0.864932581428571

01:10:29.834 --> 01:10:32.427 I think perhaps Doctor Khan can answer.

NOTE Confidence: 0.864932581428571

 $01:10:32.430 \longrightarrow 01:10:34.509$ So and I think you addressed this

NOTE Confidence: 0.864932581428571

 $01{:}10{:}34.509 \dashrightarrow 01{:}10{:}37.300$ a little bit in the course of your

NOTE Confidence: 0.864932581428571

01:10:37.300 --> 01:10:39.300 presentation such so is it possible

NOTE Confidence: 0.864932581428571

 $01:10:39.300 \longrightarrow 01:10:41.840$ that we maybe can't find the primary,

NOTE Confidence: 0.864932581428571

 $01:10:41.840 \longrightarrow 01:10:44.786$ but we do see metastatic disease.

NOTE Confidence: 0.864932581428571

 $01{:}10{:}44.790 \dashrightarrow 01{:}10{:}46.923$ You touched on that a little bit in the

NOTE Confidence: 0.864932581428571

01:10:46.923 --> 01:10:48.720 course of your surgical indications,

NOTE Confidence: 0.864932581428571

01:10:48.720 --> 01:10:51.450 but maybe you can address that some. Yes,

NOTE Confidence: 0.880437341428571

 $01:10:51.460 \longrightarrow 01:10:54.120$ yeah, so that's not an uncommon scenario.

01:10:54.120 --> 01:10:57.438 Back spoons, and that's very good question.

NOTE Confidence: 0.880437341428571

 $01:10:57.440 \longrightarrow 01:11:00.280$ And you know it is all worth it to look

NOTE Confidence: 0.880437341428571

 $01:11:00.362 \longrightarrow 01:11:03.210$ for the primary tumor and do a thorough

NOTE Confidence: 0.880437341428571

 $01:11:03.210 \longrightarrow 01:11:05.478$ exhaustive look for the primary tumor.

NOTE Confidence: 0.880437341428571

 $01:11:05.480 \longrightarrow 01:11:07.538$ However, the primary tumor cannot be found.

NOTE Confidence: 0.880437341428571

 $01:11:07.540 \longrightarrow 01:11:09.960$ There is benefit towards some.

NOTE Confidence: 0.880437341428571

 $01:11:09.960 \longrightarrow 01:11:12.450$ If a patient has a resectable

NOTE Confidence: 0.880437341428571

01:11:12.450 --> 01:11:13.280 metastatic disease,

NOTE Confidence: 0.880437341428571

01:11:13.280 --> 01:11:16.236 which could be said or reduced to over 70%,

NOTE Confidence: 0.880437341428571

 $01:11:16.236 \longrightarrow 01:11:21.300$ and the morbidity is is not very high.

NOTE Confidence: 0.880437341428571

01:11:21.300 --> 01:11:23.238 Uh, I would still recommend

NOTE Confidence: 0.880437341428571

 $01:11:23.238 \longrightarrow 01:11:24.686$ consideration for surgical cytoreduction

NOTE Confidence: 0.880437341428571

 $01:11:24.686 \longrightarrow 01:11:26.498$ because of the improvement in

NOTE Confidence: 0.880437341428571

 $01:11:26.498 \longrightarrow 01:11:27.878$ the professional free survival.

NOTE Confidence: 0.93715871

01:11:29.510 --> 01:11:31.110 And I'll just comment this.

NOTE Confidence: 0.93715871

01:11:31.110 --> 01:11:33.385 You know, entity of unknown primaries is

01:11:33.385 --> 01:11:35.168 certainly something that we come across,

NOTE Confidence: 0.93715871

 $01:11:35.170 \longrightarrow 01:11:37.610$ although I will say I think that's less

NOTE Confidence: 0.93715871

 $01:11:37.610 \longrightarrow 01:11:40.318$ in the era of gallium 68 PET scans.

NOTE Confidence: 0.93715871

01:11:40.318 --> 01:11:42.514 I think we are often identifying

NOTE Confidence: 0.93715871

 $01:11:42.514 \longrightarrow 01:11:45.073$ the primary a little bit more

NOTE Confidence: 0.93715871

 $01:11:45.073 \longrightarrow 01:11:47.092$ easily with better imaging so,

NOTE Confidence: 0.93715871

 $01:11:47.092 \longrightarrow 01:11:49.846$ but we do still see that I have a

NOTE Confidence: 0.93715871

 $01:11:49.846 \longrightarrow 01:11:51.206$ couple of questions actually there.

NOTE Confidence: 0.93715871

01:11:51.210 --> 01:11:52.641 I think there is one more in the Q&A

NOTE Confidence: 0.93715871

 $01:11:52.641 \longrightarrow 01:11:55.692$ from the audience, so this is something.

NOTE Confidence: 0.93715871

01:11:55.692 --> 01:11:56.868 Maybe I'll tackle first,

NOTE Confidence: 0.93715871

 $01:11:56.870 \longrightarrow 01:11:58.402$ but would welcome comments

NOTE Confidence: 0.93715871

01:11:58.402 --> 01:11:59.934 from from my partners.

NOTE Confidence: 0.93715871

 $01:11:59.940 \longrightarrow 01:12:02.188$ Here, so some cancers,

NOTE Confidence: 0.93715871

 $01:12:02.188 \longrightarrow 01:12:03.874$ even lung adenocarcinomas,

 $01:12:03.880 \longrightarrow 01:12:05.191$ had endocrine secretion.

NOTE Confidence: 0.93715871

01:12:05.191 --> 01:12:07.376 How can we treat that?

NOTE Confidence: 0.93715871

 $01:12:07.380 \longrightarrow 01:12:09.444$ I didn't personally spend a lot of time

NOTE Confidence: 0.93715871

01:12:09.444 --> 01:12:11.418 talking about how we treat hormone control,

NOTE Confidence: 0.93715871

 $01:12:11.420 \longrightarrow 01:12:15.216$ but I think for certainly for many

NOTE Confidence: 0.93715871

 $01:12:15.216 \longrightarrow 01:12:17.192$ patients with neuroendocrine related

NOTE Confidence: 0.93715871

 $01:12:17.192 \longrightarrow 01:12:19.919$ hormones secretion we the mainstay is

NOTE Confidence: 0.93715871

 $01:12:19.919 \longrightarrow 01:12:21.595$ really using somatostatin analogs.

NOTE Confidence: 0.93715871

 $01:12:21.600 \longrightarrow 01:12:24.084$ First they were approved on the

NOTE Confidence: 0.93715871

01:12:24.084 --> 01:12:25.740 basis of controlling hormones,

NOTE Confidence: 0.93715871

 $01{:}12{:}25.740 \dashrightarrow 01{:}12{:}27.186$ specifically carcinoid syndrome,

NOTE Confidence: 0.93715871

 $01:12:27.186 \longrightarrow 01:12:29.596$ which is diarrhea and flushing.

NOTE Confidence: 0.93715871

 $01:12:29.600 \longrightarrow 01:12:31.406$ They are also indicated in some.

NOTE Confidence: 0.93715871

01:12:31.410 --> 01:12:33.470 Other forms of hormones secretion,

NOTE Confidence: 0.93715871

 $01:12:33.470 \longrightarrow 01:12:38.178$ including gastrinomas and others.

NOTE Confidence: 0.93715871

 $01:12:38.180 \longrightarrow 01:12:41.069$ But we also try to PSI to reduce or

01:12:41.069 --> 01:12:44.040 kind of reduce the bulk of the tumor,

NOTE Confidence: 0.93715871

 $01{:}12{:}44.040 \to 01{:}12{:}46.932$ either through surgery as Doctor Khan

NOTE Confidence: 0.93715871

 $01:12:46.932 \longrightarrow 01:12:48.816$ indicated or other systemic treatments

NOTE Confidence: 0.93715871

 $01:12:48.816 \longrightarrow 01:12:51.559$ that have the ability to shrink the tumor.

NOTE Confidence: 0.93715871

 $01:12:51.560 \longrightarrow 01:12:54.710$ So cytotoxic chemotherapy can do that.

NOTE Confidence: 0.93715871

01:12:54.710 --> 01:12:56.492 Doctor Khan, I think, spoke about

NOTE Confidence: 0.93715871

01:12:56.492 --> 01:12:58.880 some of the like oblated procedures.

NOTE Confidence: 0.93715871

 $01{:}12{:}58.880 \dashrightarrow 01{:}13{:}00.903$ We often we didn't talk to night a

NOTE Confidence: 0.93715871

01:13:00.903 --> 01:13:03.019 lot about liver directed treatments,

NOTE Confidence: 0.93715871

 $01:13:03.020 \longrightarrow 01:13:05.642$ but I think that when patients

NOTE Confidence: 0.93715871

 $01:13:05.642 \longrightarrow 01:13:07.136$ have secretion of hormones,

NOTE Confidence: 0.93715871

 $01:13:07.136 \longrightarrow 01:13:08.544$ we really it's tricky.

NOTE Confidence: 0.93715871

 $01{:}13{:}08.550 \dashrightarrow 01{:}13{:}10.632$ Because we need to think about

NOTE Confidence: 0.93715871

01:13:10.632 --> 01:13:12.448 both managing the hormones and

NOTE Confidence: 0.93715871

01:13:12.448 --> 01:13:13.908 managing the tumor itself.

01:13:13.910 --> 01:13:14.372 So doctor,

NOTE Confidence: 0.93715871

01:13:14.372 --> 01:13:16.220 can you have any other comments on that?

NOTE Confidence: 0.89133874777778

 $01:13:17.380 \longrightarrow 01:13:20.098$ Yeah, I know, I think those are why you

NOTE Confidence: 0.89133874777778

 $01:13:20.098 \longrightarrow 01:13:23.019$ know if if if an individual has a patient.

NOTE Confidence: 0.89133874777778

01:13:23.020 --> 01:13:25.252 If a if a provider has a patient with,

NOTE Confidence: 0.89133874777778

01:13:25.260 --> 01:13:27.410 you know neuroendocrine tumor general,

NOTE Confidence: 0.89133874777778

 $01:13:27.410 \longrightarrow 01:13:28.815$ but in this specific scenario

NOTE Confidence: 0.89133874777778

01:13:28.815 --> 01:13:30.709 it's good to have them evaluate

NOTE Confidence: 0.89133874777778

 $01:13:30.709 \longrightarrow 01:13:32.437$ in a multidisciplinary fashion.

NOTE Confidence: 0.89133874777778

 $01:13:32.440 \longrightarrow 01:13:33.354$ Because surgery.

NOTE Confidence: 0.89133874777778

01:13:33.354 --> 01:13:36.096 I'm not saying everyone needs surgery

NOTE Confidence: 0.89133874777778

 $01:13:36.100 \longrightarrow 01:13:38.530$ and sometimes systemic options are

NOTE Confidence: 0.89133874777778

 $01:13:38.530 \longrightarrow 01:13:40.960$ much more effective at controlling

NOTE Confidence: 0.89133874777778

 $01{:}13{:}41.033 \dashrightarrow 01{:}13{:}43.638$ these symptoms than surgical options.

NOTE Confidence: 0.89133874777778

01:13:43.640 --> 01:13:45.481 And and I think that's why you

NOTE Confidence: 0.89133874777778

01:13:45.481 --> 01:13:47.674 know an active discussion by a

 $01:13:47.674 \longrightarrow 01:13:49.018$ multidisciplinary tumor board.

NOTE Confidence: 0.89133874777778

01:13:49.020 --> 01:13:51.940 Is it is very beneficial for the patient,

NOTE Confidence: 0.89133874777778

 $01:13:51.940 \longrightarrow 01:13:53.636$ but you know if if one is able

NOTE Confidence: 0.89133874777778

01:13:53.636 --> 01:13:54.320 to control you,

NOTE Confidence: 0.89133874777778

 $01{:}13{:}54{.}320 \dashrightarrow 01{:}13{:}55{.}937$ know a high burden of disease like

NOTE Confidence: 0.89133874777778

 $01:13:55.937 \longrightarrow 01:13:58.034$ I threw the number of 70% out there.

NOTE Confidence: 0.89133874777778

 $01:13:58.034 \longrightarrow 01:13:59.769$ That's that's for surgical literature.

NOTE Confidence: 0.89133874777778

01:13:59.770 --> 01:14:02.080 But I don't know if this is true or not,

NOTE Confidence: 0.89133874777778

01:14:02.080 --> 01:14:04.796 but perhaps that would is true for

NOTE Confidence: 0.89133874777778

 $01:14:04.796 \longrightarrow 01:14:06.599$ non-surgical approaches as well too.

NOTE Confidence: 0.89133874777778

 $01:14:06.600 \longrightarrow 01:14:08.126$ And I think if we're able to

NOTE Confidence: 0.89133874777778

 $01:14:08.126 \longrightarrow 01:14:09.652$ address the source of where the

NOTE Confidence: 0.89133874777778

 $01{:}14{:}09.652 \dashrightarrow 01{:}14{:}11.017$ hormones are being separated from,

NOTE Confidence: 0.89133874777778

 $01:14:11.020 \longrightarrow 01:14:12.352$ we could probably really provide some

NOTE Confidence: 0.89133874777778

 $01:14:12.352 \longrightarrow 01:14:13.730$ good clinical abilities to our patients.

 $01:14:14.650 \longrightarrow 01:14:16.130$ Right, right now I agree.

NOTE Confidence: 0.863501954

01:14:16.130 --> 01:14:17.228 Good doctor Brian.

NOTE Confidence: 0.863501954

 $01:14:17.228 \longrightarrow 01:14:20.268$ I have a question that comes up almost

NOTE Confidence: 0.863501954

01:14:20.268 --> 01:14:22.680 in many of my patient interactions

NOTE Confidence: 0.863501954

 $01:14:22.680 \longrightarrow 01:14:25.408$ and also when I'm teaching trainees

NOTE Confidence: 0.863501954

01:14:25.408 --> 01:14:28.288 this actually just came up yesterday.

NOTE Confidence: 0.863501954

01:14:28.290 --> 01:14:31.908 How do we interpret SUV on Gallium 68 pet?

NOTE Confidence: 0.863501954

 $01:14:31.910 \longrightarrow 01:14:34.166$ Should we pay attention to it?

NOTE Confidence: 0.863501954

 $01:14:34.170 \longrightarrow 01:14:35.305$ Is it different than how

NOTE Confidence: 0.863501954

 $01:14:35.305 \longrightarrow 01:14:36.440$ we think about FDG pet?

NOTE Confidence: 0.81888439

 $01:14:38.570 \longrightarrow 01:14:40.598$ Oh yeah, that's a great question.

NOTE Confidence: 0.81888439

 $01:14:40.600 \longrightarrow 01:14:43.302$ It's a we can give a whole

NOTE Confidence: 0.81888439

 $01:14:43.302 \longrightarrow 01:14:46.330$ lecture tracer uptake,

NOTE Confidence: 0.81888439

 $01:14:46.330 \longrightarrow 01:14:49.753$ so I would I would think too.

NOTE Confidence: 0.81888439

 $01:14:49.753 \longrightarrow 01:14:52.434$ I I do recommend to, so it's a.

NOTE Confidence: 0.81888439

 $01:14:52.434 \longrightarrow 01:14:54.762$ It's a general unit of Tracer

01:14:54.762 --> 01:14:56.387 update that's generalized

NOTE Confidence: 0.81888439

 $01:14:56.387 \longrightarrow 01:14:58.695$ to patient body weight.

NOTE Confidence: 0.81888439

 $01:14:58.700 \longrightarrow 01:15:00.430$ But the big issue?

NOTE Confidence: 0.780661641111111

01:15:04.760 --> 01:15:07.704 Hope we lost Doctor Abovyan there for a

NOTE Confidence: 0.780661641111111

 $01:15:07.704 \longrightarrow 01:15:09.480$ moment. So hopefully she will be back.

NOTE Confidence: 0.780661641111111

 $01:15:09.480 \longrightarrow 01:15:11.650$ I can text her, we technical issues.

NOTE Confidence: 0.57515877125

 $01:15:13.120 \longrightarrow 01:15:14.400$ Related to the tax, there will be a

NOTE Confidence: 0.789410134

01:15:15.140 --> 01:15:16.540 doctor boy and we lost you for

NOTE Confidence: 0.789410134

 $01:15:16.540 \longrightarrow 01:15:18.955$ just a minute. Maybe you can

NOTE Confidence: 0.789410134

 $01{:}15{:}18.955 \dashrightarrow 01{:}15{:}20.730$ repeat the last portion of that.

NOTE Confidence: 0.8138352444444445

01:15:21.500 --> 01:15:24.076 Oh sorry, I was having Internet connectivity

NOTE Confidence: 0.813835244444445

 $01{:}15{:}24.076 \dashrightarrow 01{:}15{:}26.556$ issues so so in terms of that SUV is

NOTE Confidence: 0.813835244444445

 $01{:}15{:}26.556 \dashrightarrow 01{:}15{:}29.230$ it's a
it's a way to measure tracer

NOTE Confidence: 0.813835244444445

 $01:15:29.230 \longrightarrow 01:15:31.620$ uptake normalized to patient body weight.

NOTE Confidence: 0.813835244444445

 $01:15:31.620 \longrightarrow 01:15:35.420$ And it is a semi quantitative that measure.

 $01:15:35.420 \longrightarrow 01:15:37.886$ Now there's a whole field of

NOTE Confidence: 0.813835244444445

01:15:37.886 --> 01:15:40.054 quantitative pet that requires very

NOTE Confidence: 0.813835244444445

 $01:15:40.054 \longrightarrow 01:15:41.398$ complex mathematical modeling.

NOTE Confidence: 0.813835244444445

 $01:15:41.400 \longrightarrow 01:15:43.016$ And here at EO.

NOTE Confidence: 0.813835244444445

01:15:43.016 --> 01:15:46.110 Under the guidance of Doctor Rich Carson,

NOTE Confidence: 0.813835244444445

 $01:15:46.110 \longrightarrow 01:15:47.052$ their leader leaders,

NOTE Confidence: 0.813835244444445

 $01:15:47.052 \longrightarrow 01:15:49.250$ they go pet center in quantitative PET

NOTE Confidence: 0.813835244444445

01:15:49.312 --> 01:15:51.181 imaging and we're still trying to figure

NOTE Confidence: 0.813835244444445

01:15:51.181 --> 01:15:53.297 out how to apply to clinical practice

NOTE Confidence: 0.813835244444445

 $01:15:53.297 \longrightarrow 01:15:55.473$ because it's not used in clinical practice.

NOTE Confidence: 0.813835244444445

 $01{:}15{:}55.473 \dashrightarrow 01{:}15{:}58.020$ But as UV is kind of a poor man's

NOTE Confidence: 0.813835244444445

01:15:58.094 --> 01:16:00.350 approach to try to quantitate so

NOTE Confidence: 0.813835244444445

01:16:00.350 --> 01:16:02.450 it's a semi quantitative measure,

NOTE Confidence: 0.8138352444444445

01:16:02.450 --> 01:16:05.033 but I would really focus on looking

NOTE Confidence: 0.813835244444445

 $01:16:05.033 \longrightarrow 01:16:08.227$ at the CVS within a specific tracer.

NOTE Confidence: 0.813835244444445

 $01{:}16{:}08.230 \dashrightarrow 01{:}16{:}10.582$ So if you're going to compare

01:16:10.582 --> 01:16:11.857 SUV values only,

NOTE Confidence: 0.813835244444445

 $01:16:11.857 \longrightarrow 01:16:14.779$ compare them between gallium dotate scan.

NOTE Confidence: 0.813835244444445

 $01:16:14.780 \longrightarrow 01:16:16.530$ Don't compare them between gallium

NOTE Confidence: 0.813835244444445

01:16:16.530 --> 01:16:19.304 dotate and don't talk or gallium dotate,

NOTE Confidence: 0.813835244444445

01:16:19.304 --> 01:16:21.136 and if you're so,

NOTE Confidence: 0.813835244444445

01:16:21.140 --> 01:16:22.958 if you have a patient that's

NOTE Confidence: 0.813835244444445

01:16:22.958 --> 01:16:24.480 being imaged with MTG pad,

NOTE Confidence: 0.813835244444445

 $01{:}16{:}24.480 \dashrightarrow 01{:}16{:}27.980$ then you can compare the SUV values.

NOTE Confidence: 0.813835244444445

01:16:27.980 --> 01:16:30.330 But if you're patient change

NOTE Confidence: 0.813835244444445

 $01:16:30.330 \longrightarrow 01:16:32.200$ significantly so supposedly lost a

NOTE Confidence: 0.813835244444445

01:16:32.200 --> 01:16:34.800 lot of weight in between the scans,

NOTE Confidence: 0.813835244444445

 $01:16:34.800 \longrightarrow 01:16:37.488$ then you have to be really careful

NOTE Confidence: 0.813835244444445

 $01{:}16{:}37.490 \dashrightarrow 01{:}16{:}39.795$ and usually in nuclear medicine

NOTE Confidence: 0.813835244444445

 $01:16:39.795 \longrightarrow 01:16:42.100$ when we do the reports,

NOTE Confidence: 0.813835244444445

 $01:16:42.100 \longrightarrow 01:16:43.655$ we do mention the numbers

 $01{:}16{:}43.655 \dashrightarrow 01{:}16{:}44.899$ 'cause every body wants some.

NOTE Confidence: 0.813835244444445

01:16:44.900 --> 01:16:45.310 Connotation,

NOTE Confidence: 0.813835244444445

 $01:16:45.310 \longrightarrow 01:16:48.590$ but we do try to use language as

NOTE Confidence: 0.813835244444445

 $01:16:48.590 \longrightarrow 01:16:51.734$ well because it is it's it is

NOTE Confidence: 0.813835244444445

 $01:16:51.734 \longrightarrow 01:16:53.502$ a semi quantitative analysis.

NOTE Confidence: 0.860811624

01:16:54.680 --> 01:16:58.150 Thank you, yeah that's helpful.

NOTE Confidence: 0.860811624

 $01{:}16{:}58.150 \dashrightarrow 01{:}17{:}00.180$ Doctor Khan I have a question that

NOTE Confidence: 0.860811624

 $01:17:00.180 \longrightarrow 01:17:02.350$ comes up a lot in tumor board.

NOTE Confidence: 0.860811624

 $01:17:02.350 \longrightarrow 01:17:04.060$ You know, I think I'd

NOTE Confidence: 0.860811624

 $01:17:04.060 \longrightarrow 01:17:06.090$ love to hear from you of.

NOTE Confidence: 0.860811624

 $01:17:06.090 \longrightarrow 01:17:08.418$ Are there situations or or notable

NOTE Confidence: 0.860811624

01:17:08.418 --> 01:17:09.970 situations where you're like?

NOTE Confidence: 0.860811624

 $01:17:09.970 \longrightarrow 01:17:12.126$ Gosh, I really wish I saw this

NOTE Confidence: 0.860811624

 $01:17:12.126 \longrightarrow 01:17:13.648$ patient earlier, like when?

NOTE Confidence: 0.860811624

 $01:17:13.648 \longrightarrow 01:17:16.342$ When should medical oncologists or surgeons

NOTE Confidence: 0.860811624

01:17:16.342 --> 01:17:19.968 in the community be thinking about surgery?

01:17:19.970 --> 01:17:21.300 When should it be on their radar?

NOTE Confidence: 0.860811624

 $01{:}17{:}21.300 \dashrightarrow 01{:}17{:}23.256$ I'd say specifically for metastatic disease.

NOTE Confidence: 0.860811624

01:17:24.250 --> 01:17:27.260 OK, you know

NOTE Confidence: 0.842575879166667

01:17:27.260 --> 01:17:28.982 the first. Maybe I can also answer

NOTE Confidence: 0.842575879166667

 $01:17:28.982 \longrightarrow 01:17:30.749$ one about non metastatic disease.

NOTE Confidence: 0.842575879166667

01:17:30.750 --> 01:17:33.542 Some you know. I think if one identifies

NOTE Confidence: 0.842575879166667

01:17:33.542 --> 01:17:35.309 a hypervascular mesenteric mass,

NOTE Confidence: 0.842575879166667

 $01:17:35.310 \longrightarrow 01:17:37.145$ I would consider that I

NOTE Confidence: 0.842575879166667

01:17:37.145 --> 01:17:38.549 wouldn't just sit on it.

NOTE Confidence: 0.842575879166667

01:17:38.549 --> 01:17:39.887 I would consider sending it to

NOTE Confidence: 0.842575879166667

 $01:17:39.887 \longrightarrow 01:17:41.397$ one of the surgical oncology,

NOTE Confidence: 0.842575879166667

 $01:17:41.400 \longrightarrow 01:17:42.891$ or at least one of the general

NOTE Confidence: 0.842575879166667

01:17:42.891 --> 01:17:44.048 surgeon to evaluate for for it,

NOTE Confidence: 0.842575879166667

01:17:44.050 --> 01:17:44.962 because you know,

NOTE Confidence: 0.842575879166667

 $01:17:44.962 \longrightarrow 01:17:47.942$ every so often we do see a patient that

 $01:17:47.942 \longrightarrow 01:17:50.557$ has had this followed a cross sectional

NOTE Confidence: 0.842575879166667

01:17:50.557 --> 01:17:52.651 imaging and then presents with you

NOTE Confidence: 0.842575879166667

 $01:17:52.651 \longrightarrow 01:17:55.014$ know some sort of a problem with the.

NOTE Confidence: 0.842575879166667

 $01:17:55.020 \longrightarrow 01:17:56.680$ Primary small bowel related issue.

NOTE Confidence: 0.842575879166667

01:17:56.680 --> 01:17:59.040 Whether it's this kimia infarct

NOTE Confidence: 0.842575879166667

 $01:17:59.040 \longrightarrow 01:18:00.714$ or balance truction and then it

NOTE Confidence: 0.842575879166667

 $01:18:00.714 \longrightarrow 01:18:02.840$ becomes more of an emerging problem.

NOTE Confidence: 0.842575879166667

01:18:02.840 --> 01:18:04.478 And it's something that I probably

NOTE Confidence: 0.842575879166667

 $01:18:04.478 \longrightarrow 01:18:06.644$ could be less of a bigger operation

NOTE Confidence: 0.842575879166667

 $01:18:06.644 \longrightarrow 01:18:08.660$ for metastatic disease as well too.

NOTE Confidence: 0.842575879166667 01:18:08.660 --> 01:18:09.718 So actually,

NOTE Confidence: 0.842575879166667

01:18:09.718 --> 01:18:13.421 the last patient I presented was being

NOTE Confidence: 0.842575879166667

01:18:13.421 --> 01:18:16.536 followed for awhile because the the

NOTE Confidence: 0.842575879166667

01:18:16.536 --> 01:18:19.605 tumors were were visible and I had

NOTE Confidence: 0.842575879166667

 $01:18:19.605 \longrightarrow 01:18:22.090$ given a talk on liver metastasis about.

NOTE Confidence: 0.842575879166667

 $01:18:22.090 \longrightarrow 01:18:24.136$ You know around that time and

 $01:18:24.136 \longrightarrow 01:18:25.830$ then the individual who.

NOTE Confidence: 0.842575879166667

 $01:18:25.830 \longrightarrow 01:18:27.918$ Caring for that patient was didn't

NOTE Confidence: 0.842575879166667

 $01:18:27.918 \longrightarrow 01:18:29.310$ realize that surgical options

NOTE Confidence: 0.842575879166667

 $01:18:29.370 \longrightarrow 01:18:30.950$ and options for that patient,

NOTE Confidence: 0.842575879166667

 $01:18:30.950 \longrightarrow 01:18:33.712$ so I think if a patient is known to

NOTE Confidence: 0.842575879166667

 $01:18:33.712 \longrightarrow 01:18:35.956$ have a neuroendocrine tumor and perhaps

NOTE Confidence: 0.842575879166667

 $01:18:35.956 \longrightarrow 01:18:37.990$ present was the liver metastases,

NOTE Confidence: 0.842575879166667

 $01:18:37.990 \longrightarrow 01:18:39.684$ I think it's worth it for that

NOTE Confidence: 0.842575879166667

 $01{:}18{:}39.684 \dashrightarrow 01{:}18{:}41.921$ patient to be seen by GI medical

NOTE Confidence: 0.842575879166667

 $01{:}18{:}41.921 \dashrightarrow 01{:}18{:}43.377$ on cologist or surgical on cologist.

NOTE Confidence: 0.842575879166667

 $01:18:43.380 \longrightarrow 01:18:46.832$ Because I do think that we can

NOTE Confidence: 0.842575879166667

01:18:46.832 --> 01:18:48.537 provide a good progression free

NOTE Confidence: 0.842575879166667

 $01{:}18{:}48.537 \dashrightarrow 01{:}18{:}50.217$ survival benefit for most patients

NOTE Confidence: 0.842575879166667

 $01:18:50.217 \longrightarrow 01:18:51.993$ in that kind of a scenario.

NOTE Confidence: 0.842575879166667

 $01:18:52.000 \longrightarrow 01:18:55.276$ If with a good multidisciplinary approach.

 $01:18:57.760 \longrightarrow 01:19:00.726$ Great thank you and doctor Brian.

NOTE Confidence: 0.9469452

 $01:19:00.726 \longrightarrow 01:19:03.998$ Maybe I'll ask you one one more and sort of.

NOTE Confidence: 0.9469452

 $01:19:03.998 \longrightarrow 01:19:05.894$ I'd say a really exciting direction

NOTE Confidence: 0.9469452

 $01:19:05.894 \longrightarrow 01:19:07.985$ and something you and I are

NOTE Confidence: 0.9469452

01:19:07.985 --> 01:19:09.690 partnering on is really thinking

NOTE Confidence: 0.9469452

 $01{:}19{:}09.753 \dashrightarrow 01{:}19{:}11.517$ about a theranostics program.

NOTE Confidence: 0.9469452

 $01:19:11.520 \longrightarrow 01:19:14.409$ Can you speak to how you think the field

NOTE Confidence: 0.9469452

 $01:19:14.409 \longrightarrow 01:19:18.454$ is changing and how we are likely to see

NOTE Confidence: 0.9469452

 $01:19:18.454 \longrightarrow 01:19:21.120$ the development of theranostics programs?

NOTE Confidence: 0.9469452

01:19:21.120 --> 01:19:23.180 Sort of in multiple locations,

NOTE Confidence: 0.9469452

 $01:19:23.180 \longrightarrow 01:19:24.680$ but maybe the value of that.

NOTE Confidence: 0.9469452

01:19:24.680 --> 01:19:26.912 What that means and and sort of how

NOTE Confidence: 0.9469452

 $01:19:26.912 \longrightarrow 01:19:28.648$ nuclear medicine docs are going to be.

NOTE Confidence: 0.9469452

01:19:28.650 --> 01:19:30.010 Providing direct patient care.

NOTE Confidence: 0.888517102

01:19:31.560 --> 01:19:32.712 Oh, thank you. Yes,

NOTE Confidence: 0.888517102

 $01:19:32.712 \longrightarrow 01:19:34.818$ this is a very exciting field and

01:19:34.818 --> 01:19:37.002 I just came back from Society of

NOTE Confidence: 0.888517102

 $01{:}19{:}37.002 \dashrightarrow 01{:}19{:}39.278$ Nuclear Medicine and Molecular Imaging

NOTE Confidence: 0.888517102

 $01{:}19{:}39.278 \dashrightarrow 01{:}19{:}41.513$ The rapeutics conference where we met

NOTE Confidence: 0.888517102

 $01:19:41.513 \longrightarrow 01:19:43.859$ for several days and talked about

NOTE Confidence: 0.888517102

 $01{:}19{:}43.859 \dashrightarrow 01{:}19{:}46.994$ how different sites across USA are

NOTE Confidence: 0.888517102

 $01:19:46.994 \longrightarrow 01:19:49.654$ starting the theranostics centers and

NOTE Confidence: 0.888517102

01:19:49.737 --> 01:19:52.090 their layout plans and how they're

NOTE Confidence: 0.888517102

 $01:19:52.090 \longrightarrow 01:19:53.980$ going to be treating the patients.

NOTE Confidence: 0.888517102

 $01:19:53.980 \longrightarrow 01:19:56.380$ And this is really changing

NOTE Confidence: 0.888517102

 $01:19:56.380 \longrightarrow 01:19:58.300$ radiology and nuclear medicine.

NOTE Confidence: 0.888517102

 $01{:}19{:}58.300 \dashrightarrow 01{:}20{:}00.620$ We are now going back to senior patients.

NOTE Confidence: 0.888517102

01:20:00.620 --> 01:20:02.530 We're now we're now becoming.

NOTE Confidence: 0.888517102

 $01{:}20{:}02.530 \dashrightarrow 01{:}20{:}05.242$ Parts of teams with oncologists and

NOTE Confidence: 0.888517102

 $01:20:05.242 \longrightarrow 01:20:07.546$ surgeons and really practicing together

NOTE Confidence: 0.888517102

 $01:20:07.546 \longrightarrow 01:20:10.472$ and with radiation oncology as well and

 $01:20:10.472 \longrightarrow 01:20:12.835$ we're really practicing together as a

NOTE Confidence: 0.888517102

01:20:12.835 --> 01:20:16.536 team in terms of taking care of patients.

NOTE Confidence: 0.888517102

 $01:20:16.536 \longrightarrow 01:20:20.166$ There's sites where patient is being

NOTE Confidence: 0.888517102

01:20:20.166 --> 01:20:23.330 seen by their GI oncologist and followed

NOTE Confidence: 0.888517102

 $01:20:23.410 \longrightarrow 01:20:26.578$ up by a visit with nuclear medicine Doc

NOTE Confidence: 0.888517102

01:20:26.578 --> 01:20:29.764 to discuss PRRT and the specifics of

NOTE Confidence: 0.888517102

 $01:20:29.764 \longrightarrow 01:20:33.545$ radiation based therapy radionuclide.

NOTE Confidence: 0.888517102

 $01:20:33.545 \longrightarrow 01:20:36.510$ Therapy and that really helps patients

NOTE Confidence: 0.888517102

 $01{:}20{:}36.510 \dashrightarrow 01{:}20{:}38.370$ in terms of understanding what

NOTE Confidence: 0.888517102

01:20:38.432 --> 01:20:40.514 they're going to be undergoing and

NOTE Confidence: 0.888517102

 $01{:}20{:}40.514 \dashrightarrow 01{:}20{:}42.580$ their side effects and the risks.

NOTE Confidence: 0.888517102

01:20:42.580 --> 01:20:44.008 The nuclear medicine physicians

NOTE Confidence: 0.888517102

01:20:44.008 --> 01:20:46.150 are following up on the patients

NOTE Confidence: 0.888517102

 $01:20:46.212 \longrightarrow 01:20:47.997$ and are involved in in the care.

NOTE Confidence: 0.888517102

 $01:20:48.000 \longrightarrow 01:20:50.532$ So another thing that's really helpful

NOTE Confidence: 0.888517102

01:20:50.532 --> 01:20:53.277 is that we're starting to combine

01:20:53.277 --> 01:20:55.241 chemotherapy with radionuclide therapy

NOTE Confidence: 0.888517102

 $01{:}20{:}55.241 \dashrightarrow 01{:}20{:}58.909$ and trials and trying to see how we can

NOTE Confidence: 0.888517102

 $01:20:58.909 \longrightarrow 01:21:00.758$ improve the efficacy of these therapies.

NOTE Confidence: 0.888517102

01:21:00.758 --> 01:21:02.284 And the only way to do it

NOTE Confidence: 0.888517102

 $01:21:02.284 \longrightarrow 01:21:03.509$ is to work together.

NOTE Confidence: 0.888517102

 $01:21:03.510 \longrightarrow 01:21:06.156$ So it's a really exciting team

NOTE Confidence: 0.888517102

01:21:06.156 --> 01:21:07.920 based approach that's happening

NOTE Confidence: 0.888517102

 $01:21:07.996 \longrightarrow 01:21:10.642$ across the country and it's it's

NOTE Confidence: 0.888517102

01:21:10.642 --> 01:21:12.406 really gonna change radiology

NOTE Confidence: 0.888517102

 $01:21:12.410 \longrightarrow 01:21:14.958$ and how we care for our patients.

NOTE Confidence: 0.71732502

01:21:17.160 --> 01:21:18.500 Not very exciting, I think.

NOTE Confidence: 0.71732502

 $01:21:18.500 \longrightarrow 01:21:20.840$ Lots of opportunities for asking for

NOTE Confidence: 0.71732502

 $01{:}21{:}20.840 \dashrightarrow 01{:}21{:}22.803$ for both providing really excellent

NOTE Confidence: 0.71732502

 $01:21:22.803 \longrightarrow 01:21:25.134$ patient care and I think you know

NOTE Confidence: 0.71732502

 $01:21:25.134 \longrightarrow 01:21:27.606$ one thing we can speak to is really

01:21:27.606 --> 01:21:28.962 the importance of multidisciplinary

NOTE Confidence: 0.71732502

 $01:21:28.962 \longrightarrow 01:21:31.158$ care for the care of these patients.

NOTE Confidence: 0.71732502

 $01:21:31.160 \longrightarrow 01:21:33.352$ I think the intent was to have three

NOTE Confidence: 0.71732502

 $01:21:33.352 \longrightarrow 01:21:34.430$ different disciplines represented on

NOTE Confidence: 0.71732502

 $01:21:34.430 \longrightarrow 01:21:36.117$ on this panel to night and I think

NOTE Confidence: 0.71732502

 $01:21:36.117 \longrightarrow 01:21:37.820$ we all certainly work together and

NOTE Confidence: 0.71732502

 $01:21:37.820 \longrightarrow 01:21:41.360$ caring for our patients with Nets.

NOTE Confidence: 0.71732502

 $01:21:41.360 \longrightarrow 01:21:43.064$ So I think what we can do is

NOTE Confidence: 0.71732502

 $01:21:43.064 \longrightarrow 01:21:44.150 \text{ I don't see other.}$

NOTE Confidence: 0.71732502

01:21:44.150 --> 01:21:45.613 I don't know if Doctor Boyd or

NOTE Confidence: 0.71732502

01:21:45.613 --> 01:21:47.082 Doctor Khan you had any other

NOTE Confidence: 0.71732502

01:21:47.082 --> 01:21:48.402 burning questions for each other

NOTE Confidence: 0.71732502

 $01:21:48.402 \longrightarrow 01:21:49.748$ or anything that has come up.

NOTE Confidence: 0.917837738181818

01:21:52.530 --> 01:21:55.122 If not, I really want to thank the

NOTE Confidence: 0.917837738181818

 $01:21:55.122 \longrightarrow 01:21:57.970$ two of you. Certainly for your time

NOTE Confidence: 0.917837738181818

01:21:57.970 --> 01:21:59.770 and and excellent presentations,

 $01:21:59.770 \longrightarrow 01:22:02.052$ I want to thank our audience for

NOTE Confidence: 0.917837738181818

 $01:22:02.052 \longrightarrow 01:22:04.498$ their time and and listing tonight.

NOTE Confidence: 0.917837738181818

 $01:22:04.500 \longrightarrow 01:22:06.426$ This will. This has been recorded

NOTE Confidence: 0.917837738181818

 $01:22:06.426 \longrightarrow 01:22:09.005$ so we will make this available to

NOTE Confidence: 0.917837738181818

 $01{:}22{:}09.005 \dashrightarrow 01{:}22{:}12.600$ the Community and stay tuned for our

NOTE Confidence: 0.917837738181818

01:22:12.600 --> 01:22:15.762 future GCM E series in April and May.

NOTE Confidence: 0.917837738181818

 $01:22:15.762 \longrightarrow 01:22:17.160$ We will promote those and hope

NOTE Confidence: 0.917837738181818

 $01:22:17.210 \longrightarrow 01:22:18.904$ that some of you will listen again.

NOTE Confidence: 0.917837738181818

 $01:22:18.910 \longrightarrow 01:22:21.998$ So thank you and have a wonderful evening.