Poster session 6: New drugs/targets: other

P6.01 DRAMATIC RESPONSE TO ASP-3026 IN PATIENT WITH HIGHLY AGGRESSIVE PULMONARY INFLAMMATORY MYOFIBROBLASTIC TUMOR HARBORING ALK REARRANGEMENT

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ALK rearrangement (ALKr) is known to occur in various carcinomas such as anaplastic large cell lymphoma, NSCLC, inflammatory myofibroblastic tumors (IMT), and renal medullary carcinoma. It reportedly has been proposed that tumors carrying abnormal ALK as an essential growth driver be collectively termed “ALKoma”. ALKr has been documented in approximately 50% of IMTs. IMTs can occur in the retroperitoneum, mediastinum, spleen, brain, pancreas, liver, or GI tract. Surgical resection is the only effective treatment for IMTs. However, there is no standard treatment for advanced IMT. ASP-3026 is a potent and selective multi-kinase inhibitor of ALK, ROS, and ACK. Here we present, a case report of a dramatic response to ASP-3026 in a patient with highly aggressive pulmonary IMT harboring ALKr. A 57-year-old male current smoker had presented with massive right pleural effusion, and a huge mass arising in the right pleural cavity with dyspnea and chest pain. He underwent a thoracoscopic tumor biopsy. On the basis of histology and IHC findings, the pathological diagnosis was IMT. The histological and molecular profiles of the biopsy samples were reviewed and FISH analysis showed a RANBP2-ALKr which is a known aggressive variant. Curative resection was not indicated due to an insufficient pulmonary reserve. He was enrolled in a phase I study of ASP-3026 in patients with advanced solid tumors. ASP-3026 treatment (125mg q.d.) was initiated on Feb 14, 2012 as first-line treatment. After administration of ASP-3026, dramatic tumor shrinkage was revealed by computed tomography, and symptoms decreased rapidly. Furthermore, it is noteworthy that this case represents the first report of use of serum hyaluronan levels to assist in monitoring of treatment and disease progression in an IMT.

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