

T-6

Randomized Embolization Trial for NeuroEndocrine Tumor Metastases To The Liver (RETNET)

*Michael Soulen*¹

¹*University of Pennsylvania*

BACKGROUND: Neuroendocrine tumors are the second most common GI malignancy after colon cancer. 40–90% of these patients present with or develop liver metastases. This is a major determinant of symptoms and survival. Clinical and imaging response rates to embolotherapy are in the 50%-70%% range. Current NCCN, NANETS, and ENETS guidelines support embolotherapy for symptomatic or progressive hepatic metastases with level 2B-3 evidence, with no recommendation among the available techniques of embolization (TAE, TACE, TARE. A practice survey in the United States found that all methods of embolization are used equally (Gaba, AJR 2012).

METHODS: RETNET is an international, open-label, multicenter, randomized comparison of three standard techniques of embolotherapy for neuroendocrine liver metastases (TAE, cTACE, DEB-TACE). 180 subjects will be randomized to 3 arms(1:1:1). Eligible participants will have liver-dominant neuroendocrine tumor(s) that are symptomatic or progressive, or a liver tumor burden of >25% of the liver volume without the need for documented progression. No concomitant anti-cancer therapy (other than octreotide analogs) is allowed. The primary endpoint is hepatic progression-free survival (HPFS) by central review. The primary hypothesis is that chemoembolization will be nearly twice as durable as bland embolization. That is, the hazard ratio for HPFS will be 1.78 or better. Key secondary endpoints include toxicities and patient-reported QoL.

RESULTS: RETNET is accruing at the primary sponsor site and collaborating centers in the U.S., France, Argentina, Canada, and Australia.

CONCLUSION: This is the first investigator-initiated prospective controlled comparison of standard embolotherapy techniques for liver metastases. Results may help to refine treatment guidelines by identifying superior or inferior techniques. The sponsor is funded by a generous grant from Guerbet LLC.