Hope: Potential tools for personalised therapy

UEG Week Barcelona 2026 | Presentation

Digestive Oncology | Surgery | Pancreas | Mechanisms & Personalised Medicine

October 19, 2026

The speaker advocates for patient-derived organoid phenotyping as a complementary approach to genomics in pancreatic cancer, presenting data from a 170-case biobank showing 73% overall accuracy in predicting chemotherapy response.

KEY POINTS

- The speaker reported that only 27% of pancreatic cancer cases have actionable mutations and only 24% of those patients receive matched therapy, limiting the impact of genomics-based approaches.
- In a pilot study of 14 patients, organoids retrospectively predicted patient chemotherapy response, and when oncologists selected regimens matching organoid predictions, patients showed progression-free survival advantage.
- The speaker's organoid core facility has generated almost 100 living organoid lines from over 170 cases with standardized robot-based pharmacotyping protocols.
- Overall predictive accuracy was reported as 73%, with 85% sensitivity for predicting responsiveness but only 64% for predicting unresponsiveness, particularly limited by gemcitabine-paclitaxel combination predictions.
- The speaker stated that organoid phenotyping remains relevant in the RAS inhibitor era because not all tumors respond, resistance mechanisms will emerge, and molecular understanding of RAS inhibitors with the immune microenvironment is incomplete.
- The United Punk trial is now recruiting patients after completing a feasibility phase across six centers, randomizing patients to standard of care or organoid-predicted regimens after primary resection.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/16a881dc-d150-11f1-82e5-daaa6dbee0a2

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.