WEBVTT

00:00:00.000 --> 00:00:01.965 Funding for Yale Cancer Answers

NOTE Confidence: 0.95525706

00:00:01.965 --> 00:00:03.930 is provided by Smilow Cancer

NOTE Confidence: 0.95525706

 $00{:}00{:}03.997 \dashrightarrow 00{:}00{:}05.697$ Hospital and AstraZeneca.

NOTE Confidence: 0.9654582

00:00:07.820 --> 00:00:09.240 Welcome to Yale Cancer Answers

00:00:10.660 --> 00:00:12.730 with your host Dr. Anees Chagpar.

NOTE Confidence: 0.9654582

 $00:00:12.730 \longrightarrow 00:00:14.110$ Yale Cancer Answers features the latest

NOTE Confidence: 0.9654582

 $00:00:14.171 \longrightarrow 00:00:16.246$ information on cancer care by

NOTE Confidence: 0.9654582

 $00:00:16.246 \longrightarrow 00:00:17.906$ welcoming oncologists and specialists

NOTE Confidence: 0.9654582

 $00:00:17.906 \longrightarrow 00:00:20.136$ who are on the forefront of the

NOTE Confidence: 0.9654582

 $00:00:20.136 \longrightarrow 00:00:22.006$ battle to fight cancer. This week,

NOTE Confidence: 0.9654582

 $00{:}00{:}22.006 \dashrightarrow 00{:}00{:}23.746$ it's a conversation about Melanoma

NOTE Confidence: 0.9654582

 $00:00:23.746 \longrightarrow 00:00:25.220$ with Doctor Harriet Kluger.

NOTE Confidence: 0.9654582

 $00:00:25.220 \longrightarrow 00:00:27.428$ Doctor Kluger is a professor of

NOTE Confidence: 0.9654582

 $00:00:27.428 \longrightarrow 00:00:28.900$ medicine and medical oncology

NOTE Confidence: 0.9654582

00:00:28.960 --> 00:00:30.910 at the Yale School of Medicine

NOTE Confidence: 0.9654582

 $00{:}00{:}30.910 \dashrightarrow 00{:}00{:}33.002$ where Doctor Chagpar is a

 $00:00:33.002 \longrightarrow 00:00:34.450$ professor of surgical oncology.

 $00:00:37.238 \longrightarrow 00:00:40.320$ I thought that we would dive

NOTE Confidence: 0.9624361

 $00:00:40.320 \longrightarrow 00:00:42.960$ right into the treatment of Melanoma.

NOTE Confidence: 0.9624361

 $00:00:42.960 \longrightarrow 00:00:46.040$ We've talked a lot on this show

NOTE Confidence: 0.9624361

00:00:46.040 --> 00:00:48.755 about Melanoma being one of the

NOTE Confidence: 0.9624361

 $00:00:48.755 \longrightarrow 00:00:50.495$ most deadly skin cancers.

NOTE Confidence: 0.9624361

 $00{:}00{:}50.500 \dashrightarrow 00{:}00{:}53.118$ Can you talk a

NOTE Confidence: 0.9624361

 $00:00:53.118 \longrightarrow 00:00:55.988$ little bit about how we have

NOTE Confidence: 0.9624361

 $00{:}00{:}55.988 \dashrightarrow 00{:}00{:}57.647$ traditionally treated Melanoma

NOTE Confidence: 0.9624361

 $00:00:57.647 \longrightarrow 00:01:00.710$ and where things might be going?

NOTE Confidence: 0.9624361

 $00:01:00.710 \longrightarrow 00:01:03.030$ Sure, when we

NOTE Confidence: 0.9802106

 $00:01:03.030 \longrightarrow 00:01:05.306$ think about oncologic treatments,

NOTE Confidence: 0.9802106

 $00:01:05.306 \longrightarrow 00:01:08.151$ there are three major categories.

NOTE Confidence: 0.9802106

 $00{:}01{:}08.151 \dashrightarrow 00{:}01{:}11.260$ You can take a cancer out with surgery,

NOTE Confidence: 0.9802106

00:01:11.260 --> 00:01:14.211 you can do radiation, or you can

NOTE Confidence: 0.9802106

 $00:01:14.211 \longrightarrow 00:01:16.941$ give what we call systemic therapy,

 $00:01:16.950 \longrightarrow 00:01:20.394$ which is therapy that's given by mouth.

NOTE Confidence: 0.9802106

 $00:01:20.400 \longrightarrow 00:01:23.168$ But I feel the vast majority of melanomas

NOTE Confidence: 0.9802106

 $00:01:23.168 \longrightarrow 00:01:25.660$ are actually discovered really early on

NOTE Confidence: 0.9802106

 $00:01:25.660 \longrightarrow 00:01:28.072$ when people see a changing mole

NOTE Confidence: 0.9802106

00:01:28.072 --> 00:01:30.087 or a dermatologist might find

NOTE Confidence: 0.9802106

 $00:01:30.087 \longrightarrow 00:01:32.055$ one on a routine skin exam.

NOTE Confidence: 0.9802106

00:01:32.060 --> 00:01:34.685 Most of the melanomas are then excised,

NOTE Confidence: 0.9802106

 $00:01:34.690 \longrightarrow 00:01:37.006$ in other words, taken out and

NOTE Confidence: 0.9802106

 $00:01:37.006 \longrightarrow 00:01:39.199$ nothing further needs to be done,

NOTE Confidence: 0.9802106

 $00{:}01{:}39.200 \dashrightarrow 00{:}01{:}41.660$ and patients are simply observed.

NOTE Confidence: 0.9802106

 $00{:}01{:}41.660 \dashrightarrow 00{:}01{:}43.676$ Every so often patients come in

NOTE Confidence: 0.9802106

00:01:43.676 --> 00:01:45.358 without ever knowing that they

NOTE Confidence: 0.9802106

00:01:45.358 --> 00:01:46.978 had a Melanoma in the skin.

NOTE Confidence: 0.9802106

 $00:01:46.980 \longrightarrow 00:01:49.170$ So it's a Melanoma that has

NOTE Confidence: 0.9802106

 $00:01:49.170 \longrightarrow 00:01:51.050$ spread beyond the primary site.

00:01:51.050 --> 00:01:53.241 Or they might have had a primary

NOTE Confidence: 0.9802106

 $00:01:53.241 \longrightarrow 00:01:55.368$ Melanoma that was removed years ago,

NOTE Confidence: 0.9802106

 $00{:}01{:}55.370 \dashrightarrow 00{:}01{:}57.603$ but a few cells escaped and are

NOTE Confidence: 0.9802106

00:01:57.603 --> 00:01:59.309 now developing into tumors in

NOTE Confidence: 0.9802106

 $00:01:59.309 \longrightarrow 00:02:01.009$ other locations in the body.

NOTE Confidence: 0.9802106

 $00:02:01.010 \longrightarrow 00:02:03.692$ What I do in my clinic is treat with

NOTE Confidence: 0.9802106

 $00:02:03.692 \longrightarrow 00:02:05.854$ systemic therapy so things that are

NOTE Confidence: 0.9802106

 $00:02:05.854 \longrightarrow 00:02:07.980$ administered by mouth or by IV

NOTE Confidence: 0.9802106

 $00:02:07.980 \longrightarrow 00:02:10.484$ so they go all over the body and

NOTE Confidence: 0.9802106

 $00:02:10.484 \longrightarrow 00:02:12.956$ that's what we're going to talk about

NOTE Confidence: 0.9708482

00:02:12.960 --> 00:02:14.172 primarily today.

NOTE Confidence: 0.9708482

 $00:02:14.172 \longrightarrow 00:02:16.659$ One of the questions that a lot of

NOTE Confidence: 0.9708482

00:02:16.659 --> 00:02:18.477 patients have is when they have

NOTE Confidence: 0.9708482

 $00:02:18.477 \longrightarrow 00:02:20.269$ that phenomenon of metastatic Melanoma,

NOTE Confidence: 0.9708482

 $00:02:20.270 \longrightarrow 00:02:22.020$ so the Melanoma has escaped.

NOTE Confidence: 0.9708482

 $00:02:22.020 \longrightarrow 00:02:24.548$ It's gone to other parts of the body

 $00:02:24.548 \longrightarrow 00:02:26.687$ where surgery really can't remove the

NOTE Confidence: 0.9708482

00:02:26.687 --> 00:02:28.847 Melanoma itself and where

NOTE Confidence: 0.9708482

00:02:28.916 --> 00:02:31.316 you're treating with systemic therapy

NOTE Confidence: 0.9708482

 $00{:}02{:}31.320 \dashrightarrow 00{:}02{:}33.235$ people wonder about the prognosis

NOTE Confidence: 0.9708482

 $00:02:33.235 \longrightarrow 00:02:35.562$ and whether in fact they can

NOTE Confidence: 0.9708482

 $00:02:35.562 \longrightarrow 00:02:37.267$ never be quote cancer free.

NOTE Confidence: 0.9708482

 $00:02:37.270 \longrightarrow 00:02:39.496$ Can you talk a little bit

NOTE Confidence: 0.98686314

 $00:02:39.500 \longrightarrow 00:02:40.541$ about that?

NOTE Confidence: 0.98686314

00:02:40.541 --> 00:02:42.623 When I started treating patients

NOTE Confidence: 0.98686314

 $00{:}02{:}42.623 \dashrightarrow 00{:}02{:}44.709$ with metastatic Melanoma in 2001,

NOTE Confidence: 0.98686314

 $00:02:44.710 \longrightarrow 00:02:46.525$ if somebody had cancer

NOTE Confidence: 0.98686314

 $00{:}02{:}46.525 \dashrightarrow 00{:}02{:}48.786$ that had spread beyond the skin

NOTE Confidence: 0.98686314

 $00{:}02{:}48.786 \dashrightarrow 00{:}02{:}50.656$ and into the internal organs,

NOTE Confidence: 0.98686314

 $00:02:50.660 \longrightarrow 00:02:53.018$ we would have a frank conversation

NOTE Confidence: 0.98686314

00:02:53.020 --> 00:02:55.620 with the patient and say we're really sorry,

 $00:02:56.595 \longrightarrow 00:02:58.220$ this is an incurable disease,

 $00:02:58.220 \longrightarrow 00:02:59.845$ and on average people live

NOTE Confidence: 0.98686314

 $00:02:59.845 \longrightarrow 00:03:01.470$ between 6 and 12 months.

NOTE Confidence: 0.98686314

 $00:03:01.470 \longrightarrow 00:03:03.678$ You should start getting your

NOTE Confidence: 0.98686314

 $00:03:03.678 \longrightarrow 00:03:06.024$ affairs in order and we will do

NOTE Confidence: 0.98686314

 $00{:}03{:}06.024 \longrightarrow 00{:}03{:}08.300$ what we can and hope for the best.

NOTE Confidence: 0.98686314

 $00:03:08.300 \longrightarrow 00:03:10.436$ At the time we had a chemotherapy called

NOTE Confidence: 0.98686314

00:03:10.436 --> 00:03:12.441 Dacarbazine and an immunotherapy

NOTE Confidence: 0.98686314

 $00:03:12.441 \longrightarrow 00:03:14.565$ called high dose interleukin two which

NOTE Confidence: 0.98686314

 $00:03:14.622 \longrightarrow 00:03:16.417$ was very difficult to administer.

NOTE Confidence: 0.98686314

 $00:03:16.420 \longrightarrow 00:03:18.406$ The Dacarbazine might have shrunk the

NOTE Confidence: 0.98686314

 $00{:}03{:}18.406 \dashrightarrow 00{:}03{:}20.320$ tumors temporarily for a few weeks,

NOTE Confidence: 0.98686314

 $00:03:20.320 \longrightarrow 00:03:22.025$ and the high dose interleukin

NOTE Confidence: 0.98686314

00:03:22.025 --> 00:03:23.048 two would result

NOTE Confidence: 0.98686314

 $00:03:23.050 \longrightarrow 00:03:24.061$ in actual cure,

NOTE Confidence: 0.98686314

00:03:24.061 --> 00:03:27.110 but in a very small percentage of patients,

 $00:03:27.110 \longrightarrow 00:03:28.578$ perhaps 4 or 5%.

NOTE Confidence: 0.98686314

00:03:28.578 --> 00:03:30.046 Newer therapies were then

NOTE Confidence: 0.98686314

 $00:03:30.046 \longrightarrow 00:03:31.170$ developed after that,

NOTE Confidence: 0.98686314

 $00:03:31.170 \longrightarrow 00:03:33.722$ and by 2005 or 2006 we were seeing

NOTE Confidence: 0.98686314

 $00:03:33.722 \longrightarrow 00:03:35.672$ that the median survival was

NOTE Confidence: 0.98686314

 $00{:}03{:}35.672 \longrightarrow 00{:}03{:}38.542$ actually in the order of one year.

NOTE Confidence: 0.98686314

 $00{:}03{:}38.550 \dashrightarrow 00{:}03{:}40.692$ At present we don't actually even

NOTE Confidence: 0.98686314

 $00:03:40.692 \longrightarrow 00:03:42.979$ know what the median survival is,

NOTE Confidence: 0.98686314

 $00{:}03{:}42.980 \dashrightarrow 00{:}03{:}45.032$ and when a patient comes in

NOTE Confidence: 0.98686314

 $00:03:45.032 \longrightarrow 00:03:47.400$ and asks what the prognosis is,

NOTE Confidence: 0.98686314

 $00:03:47.400 \longrightarrow 00:03:49.950$ I say at least 50% chance that

NOTE Confidence: 0.98686314

 $00:03:49.950 \longrightarrow 00:03:51.700$ we're going to have prolonged

NOTE Confidence: 0.98686314

 $00:03:51.700 \longrightarrow 00:03:53.430$ survival and if prolonged,

NOTE Confidence: 0.98686314

 $00:03:53.430 \longrightarrow 00:03:54.388$ disease free.

 $00{:}03{:}54.867 \dashrightarrow 00{:}03{:}58.220$ But I can't actually tell people if

NOTE Confidence: 0.98686314

 $00:03:58.306 \longrightarrow 00:04:01.498$ the cancer is ever going to come back.

 $00:04:01.500 \longrightarrow 00:04:03.460$ We do believe that we are actually

NOTE Confidence: 0.98686314

 $00{:}04{:}03.460 \dashrightarrow 00{:}04{:}05.126$ curing a subset of patients

NOTE Confidence: 0.98686314

00:04:05.126 --> 00:04:06.658 who have metastatic Melanoma,

NOTE Confidence: 0.98686314

 $00:04:06.660 \longrightarrow 00:04:08.774$ including people who've had a lot

NOTE Confidence: 0.98686314

 $00:04:08.774 \longrightarrow 00:04:11.187$ of disease and disease

NOTE Confidence: 0.98686314

00:04:11.190 --> 00:04:14.088 that's gone to vital organs such as the liver,

NOTE Confidence: 0.98686314

 $00:04:14.090 \longrightarrow 00:04:14.740$ the lungs,

NOTE Confidence: 0.9739811

 $00:04:14.740 \longrightarrow 00:04:17.140$ and the brain.

NOTE Confidence: 0.9739811

00:04:17.140 --> 00:04:18.609 When you say prolonged disease free survival,

NOTE Confidence: 0.9739811

 $00:04:18.610 \longrightarrow 00:04:20.913$ I'm assuming that you mean

NOTE Confidence: 0.9739811

 $00:04:20.913 \longrightarrow 00:04:23.520$ more than days or weeks and maybe even

NOTE Confidence: 0.9739811

 $00:04:23.520 \longrightarrow 00:04:26.039$ more than a few years. Is that right?

NOTE Confidence: 0.94539994

00:04:26.710 --> 00:04:28.420 Absolutely. So when we started using

NOTE Confidence: 0.94539994

 $00:04:28.420 \longrightarrow 00:04:30.859$ the first of the newer immune therapies,

NOTE Confidence: 0.94539994

 $00:04:30.860 \longrightarrow 00:04:33.065$ a drug called ipilimumab

00:04:37.240 --> 00:04:38.956 we still have patients who were

 $00:04:38.956 \longrightarrow 00:04:41.197$ treated in those years who have never

NOTE Confidence: 0.94539994

 $00{:}04{:}41.197 \dashrightarrow 00{:}04{:}42.922$ required additional treatment and are

NOTE Confidence: 0.94539994

 $00{:}04{:}42.922 \dashrightarrow 00{:}04{:}44.888$ disease free and living their lives.

NOTE Confidence: 0.94539994

 $00:04:44.890 \longrightarrow 00:04:47.186$ Now I can't say for sure that

NOTE Confidence: 0.94539994

 $00:04:47.186 \longrightarrow 00:04:49.359$ it's never going to be a problem,

NOTE Confidence: 0.94539994

 $00:04:49.360 \longrightarrow 00:04:51.776$ but the chances are that it's not going

NOTE Confidence: 0.94539994

 $00{:}04{:}51.776 \dashrightarrow 00{:}04{:}54.457$ to be a problem over a decade later.

NOTE Confidence: 0.94539994

 $00:04:54.460 \longrightarrow 00:04:56.380$ So yes, we're talking about years.

NOTE Confidence: 0.98663855

 $00:04:56.820 \longrightarrow 00:04:58.746$ We've talked a little

NOTE Confidence: 0.98663855

 $00:04:58.746 \longrightarrow 00:05:00.876$ bit on this show about immune

NOTE Confidence: 0.98663855

 $00{:}05{:}00.876 \dashrightarrow 00{:}05{:}03.186$ the rapy for a variety of cancers,

NOTE Confidence: 0.98663855

 $00:05:03.190 \longrightarrow 00:05:05.170$ but it seems that in metastatic

NOTE Confidence: 0.98663855

00:05:05.170 --> 00:05:06.954 Melanoma it really seems to

NOTE Confidence: 0.98663855

 $00:05:06.954 \longrightarrow 00:05:08.148$ be incredibly effective,

NOTE Confidence: 0.98663855

 $00:05:08.150 \longrightarrow 00:05:09.562$ especially when you look

NOTE Confidence: 0.98663855

00:05:09.562 --> 00:05:11.327 at how far we've come

 $00:05:13.598 \longrightarrow 00:05:15.490$ in 2001 telling people that

NOTE Confidence: 0.98663855

 $00:05:15.490 \longrightarrow 00:05:17.350$ they had less than a year,

NOTE Confidence: 0.98663855

 $00:05:17.350 \longrightarrow 00:05:19.828$ and to get their affairs in order,

NOTE Confidence: 0.98663855

 $00:05:19.830 \longrightarrow 00:05:21.948$ why is it that immunotherapy seems

NOTE Confidence: 0.98663855

00:05:21.948 --> 00:05:24.711 to work so well in Melanoma but may

NOTE Confidence: 0.98663855

 $00:05:24.711 \longrightarrow 00:05:27.260$ not work as well in other cancers?

NOTE Confidence: 0.95165044

 $00{:}05{:}27.790 \dashrightarrow 00{:}05{:}29.790$ That's an excellent question.

NOTE Confidence: 0.95165044

 $00:05:29.790 \longrightarrow 00:05:32.492$ Melanoma by nature tends to have

NOTE Confidence: 0.95165044

 $00{:}05{:}32.492 \dashrightarrow 00{:}05{:}34.988$ more mutations than many other tumors.

NOTE Confidence: 0.95165044

 $00:05:34.990 \longrightarrow 00:05:37.390$ It's for the most part a

NOTE Confidence: 0.95165044

 $00{:}05{:}37.390 \dashrightarrow 00{:}05{:}38.978$ sun exposed malignancy.

NOTE Confidence: 0.95165044

00:05:38.978 --> 00:05:42.589 So the sun will cause damage in many,

NOTE Confidence: 0.95165044

 $00:05:42.590 \longrightarrow 00:05:45.579$ many genes and because of the multiple

NOTE Confidence: 0.95165044

 $00:05:45.579 \longrightarrow 00:05:48.550$ mutations there are a lot of immune

NOTE Confidence: 0.95165044

 $00:05:48.550 \longrightarrow 00:05:50.570$ cells that recognize these

NOTE Confidence: 0.95165044

 $00{:}05{:}50.570 \dashrightarrow 00{:}05{:}53.174$ cancer cells as for eign or bad and

00:05:53.174 --> 00:05:55.970 with time they get exhausted and

NOTE Confidence: 0.95165044

 $00:05:55.970 \longrightarrow 00:05:58.730$ these newer drugs will stimulate them.

NOTE Confidence: 0.95165044

 $00:05:58.730 \longrightarrow 00:06:00.944$ But we probably have a larger

NOTE Confidence: 0.95165044

 $00:06:00.944 \longrightarrow 00:06:02.882$ repertoire of immune cells in

NOTE Confidence: 0.95165044

 $00{:}06{:}02.882 \dashrightarrow 00{:}06{:}04.857$ Melanoma than most other cancers,

NOTE Confidence: 0.95165044

 $00:06:04.860 \longrightarrow 00:06:07.158$ and that's why they respond better.

NOTE Confidence: 0.95165044

00:06:07.160 --> 00:06:09.542 And I think another interesting point

NOTE Confidence: 0.95165044

 $00:06:09.542 \longrightarrow 00:06:12.651$ to make is that there are

NOTE Confidence: 0.95165044

 $00{:}06{:}12.651 \dashrightarrow 00{:}06{:}14.817$ two other types of skin cancers.

NOTE Confidence: 0.95165044

 $00{:}06{:}14.820 \dashrightarrow 00{:}06{:}17.118$ There's a fairly rare skin cancer

NOTE Confidence: 0.95165044

00:06:17.118 --> 00:06:18.650 called Merkel cell carcinoma,

NOTE Confidence: 0.95165044

 $00{:}06{:}18.650 \dashrightarrow 00{:}06{:}20.841$ which also has a fair number of

NOTE Confidence: 0.95165044

 $00{:}06{:}20.841 \dashrightarrow 00{:}06{:}23.264$ mutations and also some related and

NOTE Confidence: 0.95165044

 $00{:}06{:}23.264 \dashrightarrow 00{:}06{:}25.160$ metastatic squamous cell carcinomas and

NOTE Confidence: 0.95165044

00:06:25.160 --> 00:06:27.834 also will respond very well to immunotherapy,

 $00:06:27.840 \longrightarrow 00:06:30.420$ better than many other tumor types

NOTE Confidence: 0.95165044

 $00:06:30.420 \longrightarrow 00:06:34.119$ where we might see response but not for many,

NOTE Confidence: 0.95165044

 $00:06:34.120 \longrightarrow 00:06:36.997$ many years as we see in Melanoma.

NOTE Confidence: 0.95165044

 $00:06:37.000 \longrightarrow 00:06:39.919$ But we do think it's related to

NOTE Confidence: 0.95165044

 $00:06:39.919 \longrightarrow 00:06:42.338$ the tumor mutation burden or the

NOTE Confidence: 0.9840308

 $00:06:42.340 \longrightarrow 00:06:45.217$ number of mutations that these cells have.

NOTE Confidence: 0.9840308

 $00:06:45.220 \longrightarrow 00:06:48.090$ And so as you think about immunotherapy,

NOTE Confidence: 0.9840308

 $00:06:48.090 \longrightarrow 00:06:50.806$ you mentioned that the first

NOTE Confidence: 0.9840308

 $00{:}06{:}50.806 \dashrightarrow 00{:}06{:}52.910$ generation of these was actually

NOTE Confidence: 0.9840308

00:06:52.910 --> 00:06:55.491 brought into practice in 2005, 2006.

NOTE Confidence: 0.9840308

 $00:06:55.491 \longrightarrow 00:06:57.546$ Have we developed newer forms

NOTE Confidence: 0.9840308

 $00:06:57.546 \longrightarrow 00:06:59.190$ of immunotherapy since then?

NOTE Confidence: 0.9840308

 $00:06:59.190 \longrightarrow 00:07:01.340$ And what's the prognosis?

NOTE Confidence: 0.9840308

 $00:07:01.340 \longrightarrow 00:07:03.764$ What are some of

NOTE Confidence: 0.9840308

00:07:03.764 --> 00:07:05.380 the exciting developments that

NOTE Confidence: 0.9840308

 $00{:}07{:}05.456 \dashrightarrow 00{:}07{:}07.340$ have happened over the more

 $00:07:07.340 \longrightarrow 00:07:08.540$ recent time?

NOTE Confidence: 0.9641474

 $00:07:08.540 \longrightarrow 00:07:10.940$ So there are many exciting developments,

NOTE Confidence: 0.9641474

00:07:10.940 --> 00:07:13.286 the first drug Ipilimumab

NOTE Confidence: 0.9641474

00:07:13.286 --> 00:07:15.733 was brought into

NOTE Confidence: 0.9641474

 $00{:}07{:}15.733 \dashrightarrow 00{:}07{:}18.139$ clinical trials in those years.

NOTE Confidence: 0.9641474

00:07:18.140 --> 00:07:20.140 But it actually took many

NOTE Confidence: 0.9641474

 $00:07:20.140 \longrightarrow 00:07:22.140$ years to achieve FDA approval.

NOTE Confidence: 0.9641474

00:07:22.140 --> 00:07:24.540 It was only FDA approved for

NOTE Confidence: 0.9641474

00:07:24.540 --> 00:07:26.140 metastatic Melanoma in 2011,

NOTE Confidence: 0.9641474

 $00:07:26.140 \longrightarrow 00:07:28.140$ so the first Ipilimumab,

NOTE Confidence: 0.9641474

 $00:07:28.140 \longrightarrow 00:07:30.140$ results in nice tumor regression,

NOTE Confidence: 0.9641474

 $00:07:30.140 \longrightarrow 00:07:32.516$ in maybe 10% of

NOTE Confidence: 0.9641474

 $00{:}07{:}32.516 \dashrightarrow 00{:}07{:}34.880$ patient's, but the second generation drug is

NOTE Confidence: 0.9641474

 $00:07:34.953 \longrightarrow 00:07:37.833$ a drug that targets a molecule called PD1,

NOTE Confidence: 0.9641474

 $00:07:37.840 \longrightarrow 00:07:40.430$ which stands for programmed death one.

 $00:07:40.430 \longrightarrow 00:07:42.482$ There were two that were first

NOTE Confidence: 0.9641474

 $00{:}07{:}42.482 \dashrightarrow 00{:}07{:}44.500$ given to patients with Melanoma.

NOTE Confidence: 0.9641474

00:07:44.500 --> 00:07:45.610 Nivolumab and pembrolizumab,

NOTE Confidence: 0.9641474

 $00{:}07{:}45.610 \dashrightarrow 00{:}07{:}48.200$ also known as Opdivo and Keytruda.

NOTE Confidence: 0.9641474

00:07:48.200 --> 00:07:48.625 Subsequently,

NOTE Confidence: 0.9641474

 $00:07:48.625 \longrightarrow 00:07:50.750$ many other companies have developed

NOTE Confidence: 0.9641474

 $00:07:50.750 \longrightarrow 00:07:53.077$ drugs that inhibit PD one and

NOTE Confidence: 0.9641474

 $00:07:53.077 \longrightarrow 00:07:55.044$ this one seemed to be the better

NOTE Confidence: 0.9641474

 $00{:}07{:}55.044 \dashrightarrow 00{:}07{:}56.709$ target for the immunotherapy.

NOTE Confidence: 0.9641474

 $00:07:56.710 \longrightarrow 00:07:59.670$ So when we give this to Melanoma patients,

NOTE Confidence: 0.9641474

 $00:07:59.670 \longrightarrow 00:08:02.726$ instead of seeing nice responses in maybe 10

NOTE Confidence: 0.9641474

 $00:08:02.730 \longrightarrow 00:08:05.214$ percent of patients we will see good

NOTE Confidence: 0.9641474

 $00:08:05.214 \longrightarrow 00:08:08.000$ responses in 30 to 40% of patients,

NOTE Confidence: 0.9641474

 $00:08:08.000 \longrightarrow 00:08:08.810$ and interestingly,

NOTE Confidence: 0.9641474

 $00:08:08.810 \longrightarrow 00:08:10.430$ this is less toxic,

NOTE Confidence: 0.9641474

 $00{:}08{:}10.430 \dashrightarrow 00{:}08{:}12.734$ so the second generation was both

00:08:12.734 --> 00:08:14.773 more effective and less toxic

NOTE Confidence: 0.9641474

 $00:08:14.773 \longrightarrow 00:08:16.497$ than the first generation.

NOTE Confidence: 0.9641474

 $00:08:16.500 \longrightarrow 00:08:19.335$ Then the question asked in around 2009,

NOTE Confidence: 0.9641474

 $00:08:19.340 \longrightarrow 00:08:21.776$ when we already had a little

NOTE Confidence: 0.9641474

 $00{:}08{:}21.776 \dashrightarrow 00{:}08{:}24.199$ bit of experience with these PD one

NOTE Confidence: 0.9641474

 $00:08:24.200 \longrightarrow 00:08:26.462$ inhibitors was what would happen

NOTE Confidence: 0.9641474

 $00:08:26.462 \longrightarrow 00:08:29.459$ if we give the two drugs together.

NOTE Confidence: 0.9641474

 $00:08:29.460 \longrightarrow 00:08:31.956$ So these two classes of drugs

NOTE Confidence: 0.9641474

 $00{:}08{:}31.956 \dashrightarrow 00{:}08{:}32.788$ target non redundant pathways

NOTE Confidence: 0.9641474

 $00:08:32.790 \longrightarrow 00:08:34.848$ in the immune cell and

NOTE Confidence: 0.9641474

 $00:08:34.848 \longrightarrow 00:08:36.630$ its interaction with cancer cells.

NOTE Confidence: 0.9641474

 $00:08:36.630 \longrightarrow 00:08:39.062$ So if we inhibited two different

NOTE Confidence: 0.9641474

 $00{:}08{:}39.062 \dashrightarrow 00{:}08{:}41.287$ places in theory we will get enhanced

NOTE Confidence: 0.9641474

00:08:41.287 --> 00:08:43.609 activation of our chief immune cell,

NOTE Confidence: 0.9641474

 $00:08:43.610 \longrightarrow 00:08:45.350$ which is called a T cell.

 $00:08:45.350 \longrightarrow 00:08:47.822$ And indeed this was the case, when we

NOTE Confidence: 0.9641474

 $00{:}08{:}47.822 \to 00{:}08{:}50.238$ give the two together in Melanoma,

NOTE Confidence: 0.9641474

00:08:50.240 --> 00:08:52.334 we now see very nice responses

NOTE Confidence: 0.9641474

 $00:08:52.334 \longrightarrow 00:08:54.540$ in excess of 55% of patients.

NOTE Confidence: 0.9641474

 $00:08:54.540 \longrightarrow 00:08:56.970$ So the two together is better

NOTE Confidence: 0.9641474

 $00:08:56.970 \longrightarrow 00:08:57.780$ than either one alone.

NOTE Confidence: 0.9221058

00:08:57.780 --> 00:08:59.796 Just to clarify,

NOTE Confidence: 0.9221058

 $00:08:59.800 \longrightarrow 00:09:01.876$ when you say the two together

NOTE Confidence: 0.9221058

00:09:01.876 --> 00:09:03.839 you mean Ipilimumab and

NOTE Confidence: 0.9221058

 $00:09:03.840 \longrightarrow 00:09:05.530$ pembrolizumab.

NOTE Confidence: 0.9221058

 $00{:}09{:}05.530 \dashrightarrow 00{:}09{:}07.582$ The studies have used Ipilimumab

NOTE Confidence: 0.9221058

00:09:07.582 --> 00:09:09.668 and nivolumab simply because both of

NOTE Confidence: 0.9221058

 $00:09:09.668 \longrightarrow 00:09:11.618$ these drugs were developed by the

NOTE Confidence: 0.9221058

00:09:11.618 --> 00:09:13.618 same company. But yes, it's been

NOTE Confidence: 0.9221058

00:09:13.620 --> 00:09:15.300 given with pembrolizumab as well,

NOTE Confidence: 0.9221058

 $00:09:15.300 \longrightarrow 00:09:16.652$ but not Ipilimumab and

 $00:09:16.652 \longrightarrow 00:09:17.998$ pembrolizumab, which both target

NOTE Confidence: 0.9221058

 $00{:}09{:}18.000 \dashrightarrow 00{:}09{:}19.734$ PD 1 correct. There's no point

NOTE Confidence: 0.9221058

 $00:09:19.734 \longrightarrow 00:09:21.766$ in giving two drugs that inhibit

NOTE Confidence: 0.9221058

 $00:09:21.766 \longrightarrow 00:09:23.386$ the same target concurrently,

NOTE Confidence: 0.9221058

 $00:09:23.390 \longrightarrow 00:09:25.790$ so by that point, did we switch all

NOTE Confidence: 0.9221058

 $00:09:25.790 \longrightarrow 00:09:28.247$ of our patients to dual therapy?

NOTE Confidence: 0.9221058

00:09:28.250 --> 00:09:29.330 Actually no, because

NOTE Confidence: 0.9675461

 $00:09:29.330 \longrightarrow 00:09:31.130$ remember, some of the patients

NOTE Confidence: 0.9675461

 $00:09:31.130 \longrightarrow 00:09:32.930$ do very well with monotherapy.

NOTE Confidence: 0.9675461

 $00:09:32.930 \longrightarrow 00:09:36.170 \ 30-40\%$ will do well with the one drug,

NOTE Confidence: 0.9675461

 $00:09:36.170 \longrightarrow 00:09:37.562$ the PD one inhibitor.

NOTE Confidence: 0.9675461

 $00:09:37.562 \longrightarrow 00:09:40.107$ So we're trying very hard to select

NOTE Confidence: 0.9675461

 $00{:}09{:}40.107 \dashrightarrow 00{:}09{:}42.405$ those patients who are more likely

NOTE Confidence: 0.9675461

00:09:42.405 --> 00:09:44.961 to respond to one drug and also

NOTE Confidence: 0.9675461

 $00:09:44.961 \longrightarrow 00:09:46.965$ patients who might not be able

 $00:09:46.970 \longrightarrow 00:09:48.562$ to tolerate extensive toxicity.

NOTE Confidence: 0.9675461

 $00{:}09{:}48.562 \dashrightarrow 00{:}09{:}50.950$ The toxicities are the main problem, it

NOTE Confidence: 0.9675461

00:09:51.017 --> 00:09:52.947 depends where the patient lives,

NOTE Confidence: 0.9675461

 $00:09:52.950 \longrightarrow 00:09:54.366$ how socially and economically

NOTE Confidence: 0.9675461

 $00:09:54.366 \longrightarrow 00:09:55.428$ robust they are,

NOTE Confidence: 0.9675461

 $00:09:55.430 \longrightarrow 00:09:56.674$ whether they're associated with

NOTE Confidence: 0.9675461

 $00{:}09{:}56.674 \dashrightarrow 00{:}09{:}58.540$ a health care system that can

NOTE Confidence: 0.9675461

00:09:58.596 --> 00:10:00.030 support extensive toxicities,

NOTE Confidence: 0.9675461

 $00{:}10{:}00.030 \dashrightarrow 00{:}10{:}02.242$ but when we have patients who've got

NOTE Confidence: 0.9675461

00:10:02.242 --> 00:10:04.037 aggressive disease and particularly young

NOTE Confidence: 0.9675461

 $00{:}10{:}04.037 \dashrightarrow 00{:}10{:}06.407$ patients with no other medical problems,

NOTE Confidence: 0.9675461

 $00:10:06.410 \longrightarrow 00:10:09.950$ we do start off with the two drugs up front.

NOTE Confidence: 0.9675461

 $00:10:09.950 \longrightarrow 00:10:12.398$ There are other people in the

NOTE Confidence: 0.9675461

 $00{:}10{:}12.398 \dashrightarrow 00{:}10{:}14.786$ Melanoma field who might start with

NOTE Confidence: 0.9675461

 $00:10:14.786 \longrightarrow 00:10:17.506$ one and then add the second one if

NOTE Confidence: 0.9675461

 $00:10:17.581 \longrightarrow 00:10:20.150$ the first one alone does not work.

 $00:10:20.150 \longrightarrow 00:10:22.488$ So a lot of refinement of these

NOTE Confidence: 0.9675461

00:10:22.488 --> 00:10:24.249 regimens still needs to be done,

NOTE Confidence: 0.9675461

 $00:10:24.250 \longrightarrow 00:10:26.658$ and there are many studies looking at how

NOTE Confidence: 0.9675461

 $00:10:26.658 \longrightarrow 00:10:29.285$ much to give, when to give, what sequence, etc.

 $00:10:29.769 \longrightarrow 00:10:34.080$ It takes years to sort all of this out.

NOTE Confidence: 0.9675461

00:10:34.080 --> 00:10:37.762 I also want to add that we now have a third

NOTE Confidence: 0.9675461

 $00:10:37.762 \longrightarrow 00:10:40.894$ target that is looking very promising

NOTE Confidence: 0.9675461

 $00:10:40.900 \longrightarrow 00:10:41.700$ in Melanoma,

NOTE Confidence: 0.9675461

 $00:10:41.700 \longrightarrow 00:10:44.100$ there's a target called LAG-3.

NOTE Confidence: 0.9675461

00:10:44.100 --> 00:10:46.963 It's an antigen that's expressed

NOTE Confidence: 0.9675461

00:10:46.963 --> 00:10:50.118 on these same immune cells or T cells,

NOTE Confidence: 0.9675461

 $00:10:50.120 \longrightarrow 00:10:53.144$ and when you give inhibitors of LAG-3

NOTE Confidence: 0.9675461

00:10:53.144 --> 00:10:55.940 together with PD one inhibitors,

NOTE Confidence: 0.9675461

 $00{:}10{:}55.940 \dashrightarrow 00{:}10{:}58.332$ it does appear that it's going to be

NOTE Confidence: 0.9675461

 $00:10:58.332 \dashrightarrow 00:11:00.497$ better than PD one inhibitors alone.

NOTE Confidence: 0.9675461

 $00{:}11{:}00.500 \dashrightarrow 00{:}11{:}03.092$ The data are still very new and more

 $00{:}11{:}03.092 \dashrightarrow 00{:}11{:}06.049$ maturity of the data is going to be required.

NOTE Confidence: 0.9675461

 $00:11:06.050 \longrightarrow 00:11:07.028$ In other words,

NOTE Confidence: 0.9675461

00:11:07.028 --> 00:11:09.310 we need to follow patients for much

NOTE Confidence: 0.9611162

00:11:09.310 --> 00:11:11.266 longer to make sure that it

NOTE Confidence: 0.9611162

 $00:11:11.266 \longrightarrow 00:11:13.220$ actually holds up.

NOTE Confidence: 0.9611162

 $00:11:13.220 \longrightarrow 00:11:15.170$ Clinical trials for that drug are

NOTE Confidence: 0.9611162

00:11:15.170 --> 00:11:15.822 currently ongoing.

 $00:11:17.117 \longrightarrow 00:11:19.019$ It's already in a phase three

NOTE Confidence: 0.9611162

 $00:11:19.019 \longrightarrow 00:11:20.703$ study which is completed accrual

NOTE Confidence: 0.9611162

 $00:11:20.703 \longrightarrow 00:11:22.713$ and the first data do suggest

NOTE Confidence: 0.9611162

 $00{:}11{:}22.713 --> 00{:}11{:}24.694$ that the two drugs are better

NOTE Confidence: 0.9611162

 $00:11:24.694 \longrightarrow 00:11:26.254$ than the nivolumab alone.

NOTE Confidence: 0.9677876

00:11:26.610 --> 00:11:28.242 And has anybody thought

NOTE Confidence: 0.9677876

00:11:28.242 --> 00:11:29.880 about adding Ipilimumab?

NOTE Confidence: 0.9677876

 $00:11:29.880 \longrightarrow 00:11:32.718$ Yes, there we again will run into

NOTE Confidence: 0.9677876

 $00:11:32.718 \longrightarrow 00:11:35.426$ problems with side effects and we

 $00:11:35.426 \longrightarrow 00:11:37.953$ have to be very careful when we

NOTE Confidence: 0.9677876

00:11:37.953 --> 00:11:40.930 mix 3 drugs and this takes a

NOTE Confidence: 0.9677876

00:11:40.930 --> 00:11:42.262 long time to work all of this out. 00:11:45.461 --> 00:11:48.072 It sounds like with now the three

NOTE Confidence: 0.9677876

 $00:11:48.160 \longrightarrow 00:11:50.730$ kind of tiers of immunotherapy

NOTE Confidence: 0.9677876

 $00:11:50.730 \longrightarrow 00:11:52.786$ that you're talking about,

NOTE Confidence: 0.9677876

 $00:11:52.790 \longrightarrow 00:11:54.830$ upwards of 55, maybe even

NOTE Confidence: 0.9677876

 $00:11:54.830 \longrightarrow 00:11:57.096$ close to 65-75% of patients

NOTE Confidence: 0.9677876

00:11:57.096 --> 00:11:58.650 might have prolonged

NOTE Confidence: 0.9677876

00:11:58.650 --> 00:12:00.510 disease free survival.

NOTE Confidence: 0.98488665

00:12:00.510 --> 00:12:02.624 We don't know yet about the 65-75%.

NOTE Confidence: 0.98488665

00:12:03.533 --> 00:12:05.038 That's what we're shooting for,

NOTE Confidence: 0.98488665

 $00:12:05.040 \longrightarrow 00:12:05.896$ and ultimately,

NOTE Confidence: 0.98488665

 $00:12:05.896 \longrightarrow 00:12:08.464$ we're going to shoot for 100%.

NOTE Confidence: 0.98488665

 $00:12:08.470 \longrightarrow 00:12:11.302$ I also want to add that this is

NOTE Confidence: 0.98488665

 $00:12:11.302 \longrightarrow 00:12:14.138$ just one type of immune therapy.

00:12:14.140 --> 00:12:16.570 We call it immune checkpoint inhibitors,

NOTE Confidence: 0.98488665

 $00:12:16.570 \longrightarrow 00:12:19.279$ so the checkpoint refers to a negative

NOTE Confidence: 0.98488665

00:12:19.279 --> 00:12:21.430 regulator of the immune cells,

NOTE Confidence: 0.98488665

 $00:12:21.430 \longrightarrow 00:12:23.924$ and that's what these drugs target.

NOTE Confidence: 0.98488665

 $00:12:23.924 \longrightarrow 00:12:26.546$ The various other types of cellular

NOTE Confidence: 0.98488665

 $00{:}12{:}26.546 \rightarrow 00{:}12{:}28.950$ manipulations that we can give to

NOTE Confidence: 0.98488665

00:12:28.950 --> 00:12:31.146 activate the immune system against cancer,

NOTE Confidence: 0.98488665

 $00:12:31.150 \longrightarrow 00:12:32.874$ but the immune checkpoint

NOTE Confidence: 0.98488665

00:12:32.874 --> 00:12:34.167 inhibitors specifically refers

NOTE Confidence: 0.98488665

 $00{:}12{:}34.167 \dashrightarrow 00{:}12{:}36.646$ to molecules on immune cells and

NOTE Confidence: 0.98488665

 $00{:}12{:}36.646 \dashrightarrow 00{:}12{:}38.516$ cancer cells that have crosstalk.

NOTE Confidence: 0.98488665

 $00:12:38.520 \longrightarrow 00:12:41.088$ They talk to each other and the cancer

NOTE Confidence: 0.98488665

 $00{:}12{:}41.088 \dashrightarrow 00{:}12{:}43.311$ cell will suppress an immune cell so

NOTE Confidence: 0.98488665

 $00:12:43.311 \longrightarrow 00:12:45.829$ that it remains alive.

NOTE Confidence: 0.98488665

 $00:12:45.830 \longrightarrow 00:12:48.609$ And so this is just one approach

 $00:12:48.609 \longrightarrow 00:12:50.400$ to immunotherapy for cancer.

NOTE Confidence: 0.9878226

 $00:12:51.060 \longrightarrow 00:12:52.620$ Well, we certainly want to

NOTE Confidence: 0.9878226

 $00:12:52.620 \longrightarrow 00:12:54.682$ find out more about the other

NOTE Confidence: 0.9878226

00:12:54.682 --> 00:12:56.430 approaches to immune therapy.

NOTE Confidence: 0.9878226

 $00:12:56.430 \longrightarrow 00:12:58.966$ We talk a lot on this show about

NOTE Confidence: 0.9878226

00:12:58.966 --> 00:13:00.370 immune checkpoint inhibitors,

NOTE Confidence: 0.9878226

 $00:13:00.370 \longrightarrow 00:13:02.350$ but certainly thinking about other ways

NOTE Confidence: 0.9878226

 $00:13:02.350 \longrightarrow 00:13:05.318$ that we can use and manipulate the immune

NOTE Confidence: 0.9878226

 $00{:}13{:}05.318 \dashrightarrow 00{:}13{:}07.298$ system to fight metastatic Melanoma

NOTE Confidence: 0.9878226

00:13:07.298 --> 00:13:09.678 will be very exciting to learn about,

NOTE Confidence: 0.9878226

 $00{:}13{:}09.680 \mathrel{--}{>} 00{:}13{:}12.032$ but first we're going to take a

NOTE Confidence: 0.9878226

 $00:13:12.032 \longrightarrow 00:13:14.329$ short break for a medical minute,

NOTE Confidence: 0.9878226

 $00:13:14.330 \longrightarrow 00:13:16.352$ so please stay tuned to learn

NOTE Confidence: 0.9878226

 $00:13:16.352 \longrightarrow 00:13:18.151$ more about Melanoma with my

NOTE Confidence: 0.9878226

00:13:18.151 --> 00:13:19.699 guest Doctor Harriet Kluger.

NOTE Confidence: 0.9530473

 $00{:}13{:}20.480 \dashrightarrow 00{:}13{:}22.580$ Funding for Yale Cancer Answers

 $00:13:22.580 \longrightarrow 00:13:24.680$ comes from Smilow Cancer Hospital.

NOTE Confidence: 0.9530473

 $00:13:24.680 \longrightarrow 00:13:26.996$ 15 care centers offer access to

NOTE Confidence: 0.9530473

00:13:26.996 --> 00:13:28.540 oncologists committed to providing

NOTE Confidence: 0.9530473

 $00:13:28.601 \longrightarrow 00:13:31.355$ patients with cancer and blood diseases

NOTE Confidence: 0.9530473

 $00:13:31.355 \longrightarrow 00:13:32.660$ individualized, innovative care.

NOTE Confidence: 0.9530473

00:13:32.660 --> 00:13:35.600 Find a Smilow Care Center near

NOTE Confidence: 0.9530473

00:13:35.600 --> 00:13:38.118 you at YaleCancerCenter.org.

NOTE Confidence: 0.986256300000001

00:13:40.410 --> 00:13:42.250 The American Cancer Society

NOTE Confidence: 0.986256300000001

 $00:13:42.250 \longrightarrow 00:13:44.550$ estimates that more than 65,000

NOTE Confidence: 0.986256300000001

 $00{:}13{:}44.550 \dashrightarrow 00{:}13{:}46.524$ Americans will be diagnosed with

NOTE Confidence: 0.986256300000001

 $00:13:46.524 \longrightarrow 00:13:48.684$ head and neck cancer this year,

NOTE Confidence: 0.986256300000001

00:13:48.690 --> 00:13:51.525 making up about 4% of all cancers.

NOTE Confidence: 0.986256300000001

00:13:51.525 --> 00:13:53.240 When detected early,

NOTE Confidence: 0.986256300000001

 $00:13:53.240 \longrightarrow 00:13:55.616$ however, head and neck cancers are

NOTE Confidence: 0.986256300000001

 $00:13:55.616 \longrightarrow 00:13:57.800$ easily treated and highly curable.

 $00:13:57.800 \longrightarrow 00:13:59.860$ Clinical trials are currently

NOTE Confidence: 0.986256300000001

 $00{:}13{:}59.860 {\:{\circ}{\circ}{\circ}}>00{:}14{:}01.920$ underway at federally designated

NOTE Confidence: 0.986256300000001

 $00:14:01.920 \longrightarrow 00:14:03.698$ Comprehensive cancer centers such

NOTE Confidence: 0.986256300000001

00:14:03.698 --> 00:14:06.085 as Yale Cancer Center and at Smilow

NOTE Confidence: 0.986256300000001

 $00:14:06.085 \longrightarrow 00:14:08.354$ Cancer Hospital to test innovative new

NOTE Confidence: 0.986256300000001

 $00:14:08.354 \longrightarrow 00:14:10.681$ treatments for head and neck cancers.

NOTE Confidence: 0.986256300000001

 $00:14:10.681 \longrightarrow 00:14:13.447$ Yale Cancer Center was recently awarded

NOTE Confidence: 0.986256300000001

 $00:14:13.447 \longrightarrow 00:14:15.701$ grants from the National Institutes

NOTE Confidence: 0.986256300000001

00:14:15.701 --> 00:14:18.473 of Health to fund the Yale Head

NOTE Confidence: 0.986256300000001

00:14:18.473 --> 00:14:20.853 and Neck Cancer Specialized Program

NOTE Confidence: 0.986256300000001

 $00{:}14{:}20.853 \dashrightarrow 00{:}14{:}23.709$ of Research Excellence or SPORE to

NOTE Confidence: 0.986256300000001

 $00:14:23.710 \longrightarrow 00:14:25.845$ address critical barriers to treatment

NOTE Confidence: 0.986256300000001

00:14:25.845 --> 00:14:28.442 of head and neck squamous cell

NOTE Confidence: 0.986256300000001

 $00:14:28.442 \longrightarrow 00:14:30.800$ carcinoma due to resistance to immune

NOTE Confidence: 0.986256300000001

00:14:30.800 --> 00:14:33.189 DNA damage and targeted therapy.

NOTE Confidence: 0.986256300000001

 $00{:}14{:}33.190 \dashrightarrow 00{:}14{:}35.405$ More information is available at

 $00:14:35.405 \longrightarrow 00:14:36.734$ yalecancercenter.org. You're listening

NOTE Confidence: 0.986256300000001

 $00{:}14{:}36.734 \dashrightarrow 00{:}14{:}38.359$ to Connecticut Public Radio.

NOTE Confidence: 0.97392863

 $00:14:39.390 \longrightarrow 00:14:41.766$ Welcome back to Yale Cancer Answers.

NOTE Confidence: 0.97392863

00:14:41.770 --> 00:14:43.326 This is doctor Anees Chappar

NOTE Confidence: 0.97392863

00:14:43.326 --> 00:14:45.660 and I'm joined tonight

NOTE Confidence: 0.97392863

00:14:45.735 --> 00:14:48.099 by my guest Doctor Harriet Kluger.

NOTE Confidence: 0.97392863

 $00:14:48.100 \longrightarrow 00:14:50.648$ We're talking about Melanoma and T cells

NOTE Confidence: 0.97392863

00:14:50.648 --> 00:14:53.408 and Harriet right before the break we

NOTE Confidence: 0.97392863

 $00{:}14{:}53.408 \dashrightarrow 00{:}14{:}55.413$ were talking about these tremendous

NOTE Confidence: 0.97392863

00:14:55.413 --> 00:14:57.941 advances that have happened in the

NOTE Confidence: 0.97392863

 $00:14:57.941 \longrightarrow 00:14:59.585$ treatment of metastatic Melanoma.

NOTE Confidence: 0.97392863

 $00:14:59.590 \longrightarrow 00:15:01.960$ For anyone who just joined us,

NOTE Confidence: 0.97392863

 $00{:}15{:}01.960 \dashrightarrow 00{:}15{:}04.438$ Harriet was mentioning that when

NOTE Confidence: 0.97392863

 $00{:}15{:}04.438 \dashrightarrow 00{:}15{:}06.090$ she started treating metastatic

NOTE Confidence: 0.97392863

 $00:15:06.153 \longrightarrow 00:15:07.509$ Melanoma back in 2001,

 $00:15:07.510 \longrightarrow 00:15:09.550$ prognosis wasn't great. Six months.

NOTE Confidence: 0.97392863

 $00:15:09.550 \longrightarrow 00:15:11.884$ 12 months, but we've now had

NOTE Confidence: 0.97392863

 $00:15:11.884 \longrightarrow 00:15:14.350$ a series of immune therapies,

NOTE Confidence: 0.97392863

 $00:15:14.350 \longrightarrow 00:15:16.094$ particularly with checkpoint inhibitors

NOTE Confidence: 0.97392863

 $00:15:16.094 \longrightarrow 00:15:18.710$ that have really improved the disease

NOTE Confidence: 0.97392863

00:15:18.710 --> 00:15:20.885 free survival now getting prolonged

NOTE Confidence: 0.97392863

00:15:20.885 --> 00:15:23.550 survival in over 50% of patients.

NOTE Confidence: 0.97392863

00:15:23.550 --> 00:15:26.310 But Harriet right before the break

NOTE Confidence: 0.97392863

 $00:15:26.310 \longrightarrow 00:15:28.736$ you left us with this little

NOTE Confidence: 0.97392863

 $00:15:28.736 \longrightarrow 00:15:31.650$ teaser that there may be other ways

NOTE Confidence: 0.97392863

 $00{:}15{:}31.650 \dashrightarrow 00{:}15{:}33.690$ to manipulate the immune system

NOTE Confidence: 0.97392863

 $00:15:33.772 \longrightarrow 00:15:36.147$ that are now being investigated.

NOTE Confidence: 0.97392863

 $00:15:36.150 \longrightarrow 00:15:39.066$ That might hold promise in metastatic melanoma.

NOTE Confidence: 0.97392863

 $00:15:39.066 \longrightarrow 00:15:41.129$ Tell us more.

NOTE Confidence: 0.9863214

 $00:15:41.130 \longrightarrow 00:15:42.582$ Thank you and

NOTE Confidence: 0.9863214

 $00:15:42.582 \longrightarrow 00:15:43.663$ yes, absolutely.

 $00:15:43.663 \longrightarrow 00:15:46.134$ We have a few teasers and that's

NOTE Confidence: 0.9863214

 $00:15:46.134 \longrightarrow 00:15:48.387$ what makes this field so exciting.

NOTE Confidence: 0.9863214

 $00:15:48.390 \longrightarrow 00:15:50.714$ So one of the additional classes of

NOTE Confidence: 0.9863214

 $00:15:50.714 \longrightarrow 00:15:53.469$ therapies that we give is cellular therapies.

NOTE Confidence: 0.9863214

00:15:53.470 --> 00:15:55.808 So for Melanoma or solid tumors we

NOTE Confidence: 0.9863214

 $00:15:55.808 \longrightarrow 00:15:58.420$ know that we have these immune cells

NOTE Confidence: 0.9863214

 $00:15:58.420 \longrightarrow 00:16:01.150$ that live within the tumor but

NOTE Confidence: 0.9863214

 $00{:}16{:}01.150 \dashrightarrow 00{:}16{:}03.635$ they keep trying to fight the tumor.

NOTE Confidence: 0.9863214

 $00:16:03.640 \longrightarrow 00:16:06.160$ But at some point they get exhausted

NOTE Confidence: 0.9863214

 $00:16:06.160 \longrightarrow 00:16:08.112$ and they're no longer capable

NOTE Confidence: 0.9863214

 $00:16:08.112 \longrightarrow 00:16:10.494$ of getting rid of tumor cells.

NOTE Confidence: 0.9863214

 $00:16:10.500 \longrightarrow 00:16:12.775$ So many years ago at the National

NOTE Confidence: 0.9863214

 $00:16:12.775 \longrightarrow 00:16:14.380$ Cancer Institute doctor Rosenberg,

NOTE Confidence: 0.9863214

 $00:16:14.380 \longrightarrow 00:16:16.260$ Steve Rosenberg pioneered a treatment

NOTE Confidence: 0.9863214

 $00:16:16.260 \longrightarrow 00:16:18.140$ modality whereby he would resect

00:16:18.198 --> 00:16:20.466 tumor and then break up all the

NOTE Confidence: 0.9863214

00:16:20.466 --> 00:16:21.438 different cellular components,

 $00:16:22.086 \longrightarrow 00:16:24.670$ and take the T cells that

NOTE Confidence: 0.9863214

00:16:24.741 --> 00:16:26.456 originated from within the tumor

NOTE Confidence: 0.9863214

 $00:16:26.456 \longrightarrow 00:16:29.387$ and grow them in a Petri dish and

NOTE Confidence: 0.9863214

 $00:16:29.387 \longrightarrow 00:16:31.673$ make billions and billions of cells.

NOTE Confidence: 0.9863214

 $00:16:31.680 \longrightarrow 00:16:33.032$ Then, in the meanwhile,

NOTE Confidence: 0.9863214

00:16:33.032 --> 00:16:35.855 he'd bring a patient back and give them

NOTE Confidence: 0.9863214

 $00:16:35.855 \longrightarrow 00:16:38.389$ high doses of chemotherapy to make space,

NOTE Confidence: 0.9863214

 $00:16:38.390 \longrightarrow 00:16:40.350$ if you will, for these

NOTE Confidence: 0.9863214

 $00:16:40.350 \longrightarrow 00:16:42.054$ newest cells that were growing in

NOTE Confidence: 0.9863214

 $00{:}16{:}42.054 \dashrightarrow 00{:}16{:}43.958$ the Petri dish and actually are

NOTE Confidence: 0.9863214

 $00{:}16{:}43.958 \dashrightarrow 00{:}16{:}45.718$ educated to recognize the tumor.

NOTE Confidence: 0.9863214

 $00:16:45.720 \longrightarrow 00:16:47.750$ Then he would infuse those into the

NOTE Confidence: 0.9863214

 $00:16:47.750 \longrightarrow 00:16:49.281$ patient after the chemotherapy and

NOTE Confidence: 0.9863214

 $00:16:49.281 \longrightarrow 00:16:51.689$ after the space was made and then give

 $00{:}16{:}51.748 \dashrightarrow 00{:}16{:}53.473$ some growth factor called Interleukin

NOTE Confidence: 0.9863214

00:16:53.473 --> 00:16:55.485 two and then cells within patients

NOTE Confidence: 0.9863214

 $00:16:55.485 \longrightarrow 00:16:57.480$ would recover and go home and there

NOTE Confidence: 0.9863214

00:16:57.480 --> 00:16:59.797 is a subset of patients who were actually

NOTE Confidence: 0.9863214

 $00:16:59.797 \longrightarrow 00:17:01.840$ cured from this therapy as well.

NOTE Confidence: 0.9863214

00:17:01.840 --> 00:17:04.090 It's similar to having a bone

NOTE Confidence: 0.9863214

 $00{:}17{:}04.090 \dashrightarrow 00{:}17{:}06.185$ marrow transplant you go in for

NOTE Confidence: 0.9863214

00:17:06.185 --> 00:17:08.289 a one time shot for a few weeks

NOTE Confidence: 0.9863214

00:17:08.367 --> 00:17:10.446 and then you go home and live your life.

 $00:17:11.222 \longrightarrow 00:17:13.538$ The initial response rates at the

NOTE Confidence: 0.9863214

 $00{:}17{:}13.538 \dashrightarrow 00{:}17{:}15.316$ National Cancer Institute were in

NOTE Confidence: 0.9863214

 $00:17:15.316 \longrightarrow 00:17:18.082$ the order of 50%, now with the immune

NOTE Confidence: 0.9863214

 $00:17:18.082 \longrightarrow 00:17:19.594$ checkpoint inhibitors we're seeing

NOTE Confidence: 0.9863214

 $00{:}17{:}19.594 \dashrightarrow 00{:}17{:}21.410$ lower response rates simply because

NOTE Confidence: 0.9863214

00:17:21.410 --> 00:17:23.414 many of the patients whose tumors

NOTE Confidence: 0.9863214

 $00:17:23.414 \longrightarrow 00:17:25.231$ immune sensitive are actually cured

 $00:17:25.231 \longrightarrow 00:17:27.367$ by the checkpoints that we discussed

NOTE Confidence: 0.9863214

 $00{:}17{:}27.370 \dashrightarrow 00{:}17{:}29.530$ in the previous session over here,

NOTE Confidence: 0.9863214

 $00:17:29.530 \longrightarrow 00:17:31.749$ but still they work and we have

NOTE Confidence: 0.9863214

 $00:17:31.749 \longrightarrow 00:17:34.031$ patients who are cured now from

NOTE Confidence: 0.9863214

 $00:17:34.031 \longrightarrow 00:17:35.288$ the cellular therapies.

 $00{:}17{:}35.958 \dashrightarrow 00{:}17{:}37.628$ After they haven't responded to

NOTE Confidence: 0.9863214

 $00:17:37.628 \longrightarrow 00:17:39.250$ the immune checkpoint inhibitors,

NOTE Confidence: 0.9863214

 $00:17:39.250 \longrightarrow 00:17:40.770$ that gives patients

NOTE Confidence: 0.9863214

 $00:17:40.770 \longrightarrow 00:17:42.535$ another option.

NOTE Confidence: 0.9863214

 $00:17:42.535 \longrightarrow 00:17:44.210$ This treatment is now being

NOTE Confidence: 0.9863214

 $00{:}17{:}44.210 \dashrightarrow 00{:}17{:}46.429$ studied in other cancers as well.

NOTE Confidence: 0.9863214

 $00:17:46.430 \longrightarrow 00:17:48.180$ Lung cancer, head neck cancer,

NOTE Confidence: 0.9863214

 $00:17:48.180 \longrightarrow 00:17:49.930$ cervical cancer, and so on,

NOTE Confidence: 0.9863214

 $00{:}17{:}49.930 \dashrightarrow 00{:}17{:}52.380$ and responses are being seen there too.

NOTE Confidence: 0.9863214

 $00:17:52.380 \longrightarrow 00:17:54.318$ In the meanwhile the field

NOTE Confidence: 0.9863214

 $00:17:54.318 \longrightarrow 00:17:56.295$ has moved forward and the cellular

00:17:56.295 --> 00:17:58.161 therapy is no longer only given

NOTE Confidence: 0.9863214

 $00{:}17{:}58.161 \dashrightarrow 00{:}18{:}00.428$ at the National Cancer Institute.

NOTE Confidence: 0.9863214

00:18:00.430 --> 00:18:00.984 In fact,

NOTE Confidence: 0.9863214

 $00:18:00.984 \longrightarrow 00:18:02.923$ at Yale we have a lab that

NOTE Confidence: 0.9863214

 $00:18:02.923 \longrightarrow 00:18:04.978$ can manufacture these cells.

NOTE Confidence: 0.9863214

 $00:18:04.980 \longrightarrow 00:18:07.032$ There are also companies that are

NOTE Confidence: 0.9863214

 $00:18:07.032 \longrightarrow 00:18:08.817$ trying to commercialize this

NOTE Confidence: 0.9863214

 $00:18:08.817 \longrightarrow 00:18:11.040$ modality. So you send the tumor

NOTE Confidence: 0.9863214

 $00:18:11.040 \longrightarrow 00:18:14.343$ to the company, they grow the cells for you.

NOTE Confidence: 0.9863214

 $00:18:14.350 \longrightarrow 00:18:16.744$ They send them back and we give

NOTE Confidence: 0.9863214

 $00:18:16.744 \longrightarrow 00:18:18.769$ the treatment in the hospital.

NOTE Confidence: 0.9863214

 $00:18:18.770 \longrightarrow 00:18:21.032$ So that is something that likely

NOTE Confidence: 0.9863214

 $00:18:21.032 \longrightarrow 00:18:23.665$ will also be on the menu of

NOTE Confidence: 0.9863214

 $00{:}18{:}23.665 \dashrightarrow 00{:}18{:}25.759$ options within a year or so

NOTE Confidence: 0.9863214

 $00:18:25.760 \longrightarrow 00:18:27.968$ for metastatic Melanoma and in the

NOTE Confidence: 0.98175156

 $00:18:27.970 \longrightarrow 00:18:29.810$ future, for other tumor types.

00:18:29.810 --> 00:18:31.958 So Harriet just picking up on

NOTE Confidence: 0.98175156

 $00:18:31.958 \longrightarrow 00:18:34.219$ that when we think about

NOTE Confidence: 0.98175156

 $00:18:34.220 \longrightarrow 00:18:36.060$ things like bone marrow

NOTE Confidence: 0.98175156

 $00:18:36.060 \longrightarrow 00:18:37.532$ transplant or other transplants,

NOTE Confidence: 0.98175156

 $00:18:37.540 \longrightarrow 00:18:39.375$ anytime we're thinking about putting

NOTE Confidence: 0.98175156

 $00:18:39.375 \longrightarrow 00:18:41.292$ cells into somebody, we always

NOTE Confidence: 0.98175156

 $00:18:41.292 \longrightarrow 00:18:42.510$ worry about rejection.

NOTE Confidence: 0.98175156

 $00{:}18{:}42.510 \dashrightarrow 00{:}18{:}45.446$ So do I have it correct that, what

NOTE Confidence: 0.98175156

 $00{:}18{:}45.446 \dashrightarrow 00{:}18{:}47.946$ we're actually doing in this cellular

NOTE Confidence: 0.98175156

 $00:18:47.946 \longrightarrow 00:18:51.010$ therapy is taking a patients own tumor?

NOTE Confidence: 0.98175156

 $00{:}18{:}51.010 \dashrightarrow 00{:}18{:}53.452$ Taking finding their own T cells

NOTE Confidence: 0.98175156

 $00:18:53.452 \dashrightarrow 00:18:56.458$ and getting those T cells to grow

NOTE Confidence: 0.98175156

 $00{:}18{:}56.458 \dashrightarrow 00{:}18{:}59.044$ and replicate and giving the patient

NOTE Confidence: 0.98175156

 $00:18:59.044 \longrightarrow 00:19:01.714$ back their own T cells so that

NOTE Confidence: 0.98175156

 $00:19:01.714 \longrightarrow 00:19:03.565$ there's less risk of rejection?

00:19:03.565 --> 00:19:04.780 Is that right?

NOTE Confidence: 0.98175156

 $00:19:04.780 \longrightarrow 00:19:06.000$ That's right, there's

NOTE Confidence: 0.98592633

 $00:19:06.000 \longrightarrow 00:19:08.020$ actually no risk of rejection.

NOTE Confidence: 0.98592633

 $00:19:08.020 \longrightarrow 00:19:10.090$ The rejection only happens when

NOTE Confidence: 0.98592633

 $00:19:10.090 \longrightarrow 00:19:12.160$ you give somebody another person's

NOTE Confidence: 0.98592633

 $00:19:12.160 \longrightarrow 00:19:14.476$ immune cells, but in this case

NOTE Confidence: 0.98592633

00:19:14.476 --> 00:19:16.440 we're talking about giving a

NOTE Confidence: 0.98592633

00:19:16.440 --> 00:19:18.190 patient back their own cells,

NOTE Confidence: 0.98592633

 $00{:}19{:}18.190 \dashrightarrow 00{:}19{:}20.612$ just amplified to the tune

NOTE Confidence: 0.98592633

 $00:19:20.612 \longrightarrow 00:19:23.344$ of billions of cells so that these

NOTE Confidence: 0.98592633

 $00:19:23.344 \longrightarrow 00:19:25.768$ are the special cells that recognize

NOTE Confidence: 0.98592633

00:19:25.843 --> 00:19:28.370 the tumor and can then work against

NOTE Confidence: 0.95115936

 $00:19:28.370 \longrightarrow 00:19:31.350$ the tumor.

NOTE Confidence: 0.95115936

 $00:19:31.350 \longrightarrow 00:19:34.707$ And one would think that if some

NOTE Confidence: 0.95115936

 $00:19:34.707 \longrightarrow 00:19:37.470$ people think that your immune system

NOTE Confidence: 0.95115936

 $00:19:37.470 \longrightarrow 00:19:40.569$ is fighting off cancer all the time,

 $00:19:40.570 \longrightarrow 00:19:43.078$ and that people have

NOTE Confidence: 0.95115936

 $00{:}19{:}43.080 \to 00{:}19{:}46.020$ quote cancer floating around in them,

NOTE Confidence: 0.95115936

 $00:19:46.020 \longrightarrow 00:19:48.264$ and that your immune system kind

NOTE Confidence: 0.95115936

00:19:48.264 --> 00:19:50.727 of fights all of these little

NOTE Confidence: 0.95115936

00:19:50.727 --> 00:19:53.385 deformed cells off so that you

NOTE Confidence: 0.95115936

00:19:53.385 --> 00:19:55.650 don't actually develop a cancer,

NOTE Confidence: 0.95115936

 $00:19:55.650 \longrightarrow 00:19:57.354$ if that was true,

NOTE Confidence: 0.95115936

00:19:57.354 --> 00:19:59.484 then why wouldn't this therapy

NOTE Confidence: 0.95115936

00:19:59.484 --> 00:20:01.850 work for everybody? Why

NOTE Confidence: 0.95115936

 $00:20:01.850 \longrightarrow 00:20:03.830$ do we need the checkpoint inhibitors?

 $00:20:06.200 \longrightarrow 00:20:08.965$ I think the problem is that when

NOTE Confidence: 0.98770815

00:20:08.965 --> 00:20:10.940 we give the cellular therapy,

NOTE Confidence: 0.98770815

 $00:20:10.940 \longrightarrow 00:20:13.000$ sometimes patients have many different

NOTE Confidence: 0.98770815

 $00:20:13.000 \longrightarrow 00:20:15.856$ tumors in different locations and we already

NOTE Confidence: 0.98770815

 $00:20:15.856 \longrightarrow 00:20:18.046$ know now that melanomas can metastasize.

NOTE Confidence: 0.98770815

 $00{:}20{:}18.050 \dashrightarrow 00{:}20{:}21.362$ So it is correct that they all start from

00:20:21.362 --> 00:20:24.754 the same clone of cells within the skin,

NOTE Confidence: 0.98770815

 $00{:}20{:}24.760 \dashrightarrow 00{:}20{:}26.805$ then they metastasize internally and

NOTE Confidence: 0.98770815

 $00:20:26.805 \longrightarrow 00:20:29.280$ you get subclones and daughter clones

NOTE Confidence: 0.98770815

 $00:20:29.280 \longrightarrow 00:20:31.476$ and granddaughter clones and so on.

NOTE Confidence: 0.98770815

 $00:20:31.480 \longrightarrow 00:20:33.068$ And those next generation

NOTE Confidence: 0.98770815

 $00:20:33.068 \longrightarrow 00:20:35.053$ clones might have different mutations.

NOTE Confidence: 0.98770815

00:20:35.060 --> 00:20:38.219 Now if we remove a tumor to generate the

NOTE Confidence: 0.98770815

00:20:38.219 --> 00:20:41.168 immune cells from one location,

NOTE Confidence: 0.98770815

 $00{:}20{:}41.168 \dashrightarrow 00{:}20{:}43.681$ these cells might not be active against

NOTE Confidence: 0.98770815

00:20:43.681 --> 00:20:46.216 the tumors in a different location,

NOTE Confidence: 0.98770815

 $00:20:46.220 \longrightarrow 00:20:49.685$ so that's one reason that it might not work.

NOTE Confidence: 0.98770815

 $00:20:49.690 \longrightarrow 00:20:51.710$ Other reasons for failure are

NOTE Confidence: 0.98770815

 $00{:}20{:}51.710 \dashrightarrow 00{:}20{:}54.507$ inability to grow the cells in the

NOTE Confidence: 0.98770815

00:20:54.507 --> 00:20:56.613 lab so not every cell grows.

NOTE Confidence: 0.98770815

 $00:20:56.620 \longrightarrow 00:20:58.160$ The vast majority do,

 $00:20:58.160 \longrightarrow 00:21:01.284$ but there's about 10-15% that do not grow,

NOTE Confidence: 0.98770815

 $00{:}21{:}01.284 \dashrightarrow 00{:}21{:}03.264$ and sometimes they just don't

NOTE Confidence: 0.98770815

 $00:21:03.270 \longrightarrow 00:21:05.200$ grow enough to substantial quantities

NOTE Confidence: 0.98770815

 $00:21:05.200 \longrightarrow 00:21:07.546$ and it's just insufficient to overcome

NOTE Confidence: 0.98770815

 $00:21:07.546 \longrightarrow 00:21:10.017$ the tumor cells that are actually there.

NOTE Confidence: 0.8992716

00:21:11.140 --> 00:21:14.059 And this whole concept of

NOTE Confidence: 0.8992716

00:21:14.060 --> 00:21:16.979 taking cells, sorting them out,

NOTE Confidence: 0.8992716

 $00:21:16.980 \longrightarrow 00:21:18.608$ finding the T cells,

NOTE Confidence: 0.8992716

 $00{:}21{:}18.608 \dashrightarrow 00{:}21{:}21.570$ growing them up in a Petri dish,

NOTE Confidence: 0.8992716

00:21:21.570 --> 00:21:24.066 giving them back to the patient,

NOTE Confidence: 0.8992716

00:21:24.070 --> 00:21:26.989 it sounds really like a major production,

NOTE Confidence: 0.8992716

 $00:21:26.990 \longrightarrow 00:21:29.492$ and so whenever we think about

NOTE Confidence: 0.8992716

00:21:29.492 --> 00:21:31.160 major productions in medicine,

NOTE Confidence: 0.8992716

00:21:31.160 --> 00:21:34.224 I always think about how much does that

NOTE Confidence: 0.8992716

 $00:21:34.224 \longrightarrow 00:21:37.410$ cost and does insurance cover it?

NOTE Confidence: 0.8992716

 $00:21:37.410 \longrightarrow 00:21:39.114$ That's an excellent question.

 $00:21:39.114 \longrightarrow 00:21:41.670$ So at present it's still experimental.

NOTE Confidence: 0.8992716

 $00{:}21{:}41.670 \dashrightarrow 00{:}21{:}43.488$ So the company that's making the

NOTE Confidence: 0.8992716

 $00:21:43.488 \longrightarrow 00:21:45.794$ cells for us in our current clinical

NOTE Confidence: 0.8992716

 $00:21:45.794 \longrightarrow 00:21:47.852$ trial covers the cost of it.

NOTE Confidence: 0.8992716

00:21:47.860 --> 00:21:49.340 The National Cancer Institute,

NOTE Confidence: 0.8992716

 $00:21:49.340 \longrightarrow 00:21:51.116$ when they used to do it,

NOTE Confidence: 0.8992716

 $00:21:51.120 \longrightarrow 00:21:52.940$ it was free, but with some it

NOTE Confidence: 0.8992716

 $00:21:52.940 \longrightarrow 00:21:54.669$ was covered by the government,

NOTE Confidence: 0.8992716

00:21:54.670 --> 00:21:55.555 essentially the tax payer.

NOTE Confidence: 0.8992716

 $00:21:55.555 \longrightarrow 00:21:57.796$ But you are right, it is very expensive.

NOTE Confidence: 0.8992716

 $00{:}21{:}57.796 \dashrightarrow 00{:}22{:}00.189$ I think we also need to keep in

NOTE Confidence: 0.8992716

 $00{:}22{:}00.189 \dashrightarrow 00{:}22{:}02.064$ mind that the immune checkpoint

NOTE Confidence: 0.8992716

 $00:22:02.064 \longrightarrow 00:22:03.840$ inhibitors are similarly expensive.

NOTE Confidence: 0.8992716

 $00:22:03.840 \longrightarrow 00:22:05.961$ And those can also cost hundreds of

NOTE Confidence: 0.8992716

 $00:22:05.961 \longrightarrow 00:22:07.580$ thousands of dollars per patient.

 $00:22:07.580 \longrightarrow 00:22:09.806$ So if you start adding up the

NOTE Confidence: 0.8992716

 $00:22:09.806 \longrightarrow 00:22:11.422$ hundreds of thousands of dollars

NOTE Confidence: 0.8992716

00:22:11.422 --> 00:22:13.508 and you compare it to maybe 200,

NOTE Confidence: 0.8992716

 $00:22:13.510 \longrightarrow 00:22:15.274$ \$300,000 for a one time

NOTE Confidence: 0.8992716

 $00:22:15.274 \longrightarrow 00:22:16.940$ therapy such as cellular therapy,

NOTE Confidence: 0.8992716

 $00:22:16.940 \longrightarrow 00:22:18.879$ it's not all that different in terms

NOTE Confidence: 0.8992716

 $00:22:18.879 \longrightarrow 00:22:20.791$ of order of magnitude is actually

NOTE Confidence: 0.8992716

00:22:20.791 --> 00:22:23.171 might be a little bit less expensive,

NOTE Confidence: 0.8992716

 $00:22:23.180 \longrightarrow 00:22:23.810$ if anything.

NOTE Confidence: 0.96757966

00:22:25.080 --> 00:22:27.824 And so getting back to the checkpoint

NOTE Confidence: 0.96757966

 $00{:}22{:}27.824 \dashrightarrow 00{:}22{:}29.399$ inhibitors, those are generally

NOTE Confidence: 0.96757966

00:22:29.399 --> 00:22:31.364 covered by insurance now aren't they?

NOTE Confidence: 0.96757966

 $00:22:31.370 \longrightarrow 00:22:33.330$ They are yes, correct.

NOTE Confidence: 0.96757966

 $00:22:33.330 \longrightarrow 00:22:34.906$ Other than the experimental

NOTE Confidence: 0.96757966

 $00:22:34.906 \longrightarrow 00:22:36.868$ ones, the ones that are

NOTE Confidence: 0.96757966

 $00:22:36.870 \longrightarrow 00:22:39.228$ approved are covered.

 $00:22:39.230 \longrightarrow 00:22:42.366$ So it sounds to me like

NOTE Confidence: 0.96757966

 $00:22:42.370 \longrightarrow 00:22:44.335$ when you have a patient

NOTE Confidence: 0.96757966

 $00:22:44.335 \longrightarrow 00:22:45.514$ with metastatic Melanoma,

NOTE Confidence: 0.96757966

 $00:22:45.520 \longrightarrow 00:22:48.271$ your first line of therapy is the

NOTE Confidence: 0.96757966

00:22:48.271 --> 00:22:49.450 immune checkpoint inhibitors.

NOTE Confidence: 0.96757966

 $00:22:49.450 \longrightarrow 00:22:51.410$ If they fail, that cellular

NOTE Confidence: 0.96757966

 $00:22:51.410 \longrightarrow 00:22:52.978$ therapy is another option.

NOTE Confidence: 0.96757966

 $00:22:52.980 \longrightarrow 00:22:54.950$ What if they fail that?

NOTE Confidence: 0.9806514

00:22:55.600 --> 00:22:58.948 So if they fail that or sometimes by choice,

NOTE Confidence: 0.9806514

 $00:22:58.950 \longrightarrow 00:23:00.434$ we actually have additional

NOTE Confidence: 0.9806514

 $00{:}23{:}00.434 \dashrightarrow 00{:}23{:}01.918$ experimental options for patients.

NOTE Confidence: 0.9806514

00:23:01.920 --> 00:23:04.888 So I had talked about the T

NOTE Confidence: 0.9806514

 $00{:}23{:}04.888 \dashrightarrow 00{:}23{:}07.139$ cells that recognize the tumor.

NOTE Confidence: 0.9806514

 $00{:}23{:}07.140 \dashrightarrow 00{:}23{:}09.480$ Those are called adaptive immune cells.

NOTE Confidence: 0.9806514

 $00:23:09.480 \longrightarrow 00:23:10.650$ In other words,

 $00:23:10.650 \longrightarrow 00:23:12.600$ they've adapted to the cancer.

NOTE Confidence: 0.9806514

 $00{:}23{:}12.600 \dashrightarrow 00{:}23{:}14.152$ They have special specific

NOTE Confidence: 0.9806514

 $00{:}23{:}14.152 \dashrightarrow 00{:}23{:}16.092$ qualities that recognize that we

NOTE Confidence: 0.9806514

 $00:23:16.092 \longrightarrow 00:23:18.059$ also have innate immune cells.

NOTE Confidence: 0.9806514

 $00:23:18.060 \longrightarrow 00:23:20.106$ Those are generalized cells that are

NOTE Confidence: 0.9806514

 $00{:}23{:}20.106 \dashrightarrow 00{:}23{:}22.885$ floating around in our bodies that have

NOTE Confidence: 0.9806514

 $00:23:22.885 \longrightarrow 00:23:25.140$ not developed receptors that recognize

NOTE Confidence: 0.9806514

 $00:23:25.140 \longrightarrow 00:23:27.028$ specific abnormalities in cancer cells.

NOTE Confidence: 0.9806514

 $00:23:27.030 \longrightarrow 00:23:29.418$ Now those innate immune cells are

NOTE Confidence: 0.9806514

00:23:29.418 --> 00:23:32.509 another whole army of cells that we can

NOTE Confidence: 0.9806514

 $00{:}23{:}32.509 \dashrightarrow 00{:}23{:}35.220$ activate in order to target the cancer,

NOTE Confidence: 0.9806514

 $00:23:35.220 \longrightarrow 00:23:37.566$ and sometimes we can co-activate

NOTE Confidence: 0.9806514

00:23:37.566 --> 00:23:39.150 the innate immune cells

NOTE Confidence: 0.9806514

 $00:23:39.150 \longrightarrow 00:23:40.734$ and the adaptive cells,

NOTE Confidence: 0.9806514

00:23:40.740 --> 00:23:43.218 so we can combine additional drugs to

NOTE Confidence: 0.9806514

 $00:23:43.218 \longrightarrow 00:23:44.980$ these immune checkpoint inhibitors.

 $00:23:44.980 \longrightarrow 00:23:47.170$ There are many approaches that are

NOTE Confidence: 0.9806514

 $00{:}23{:}47.170 \longrightarrow 00{:}23{:}49.210$ being taken across the country.

NOTE Confidence: 0.9806514

 $00:23:49.210 \longrightarrow 00:23:51.364$ One of the approaches that we're

NOTE Confidence: 0.9806514

 $00:23:51.364 \longrightarrow 00:23:54.088$ doing over here is to activate a

NOTE Confidence: 0.9806514

00:23:54.088 --> 00:23:56.524 group of cells called dendritic cells,

NOTE Confidence: 0.9806514

 $00:23:56.530 \longrightarrow 00:23:58.840$ that actually present the

NOTE Confidence: 0.9806514

 $00:23:58.840 \longrightarrow 00:24:01.682$ tumor antigen to the T cells

NOTE Confidence: 0.9806514

 $00:24:01.682 \longrightarrow 00:24:04.552$ as foreign and then make them

NOTE Confidence: 0.9806514

00:24:04.552 --> 00:24:06.628 become educated or adapted.

NOTE Confidence: 0.9806514

 $00:24:06.630 \longrightarrow 00:24:09.178$ So if we give those two together,

NOTE Confidence: 0.9806514

 $00{:}24{:}09.180 \dashrightarrow 00{:}24{:}11.352$ we might have better responses than

NOTE Confidence: 0.9806514

 $00:24:11.352 \longrightarrow 00:24:13.180$ using the checkpoint inhibitors alone,

NOTE Confidence: 0.9806514

 $00{:}24{:}13.180 \dashrightarrow 00{:}24{:}15.728$ so that's one example of an approach.

NOTE Confidence: 0.9806514

 $00:24:15.730 \longrightarrow 00:24:17.949$ There are groups that are targeting a

NOTE Confidence: 0.9806514

00:24:17.949 --> 00:24:20.099 subset of cells called macrophages,

 $00:24:20.100 \longrightarrow 00:24:23.088$ which are also innate immune cells.

NOTE Confidence: 0.9806514

 $00:24:23.090 \longrightarrow 00:24:25.982$ Then we need to think about

NOTE Confidence: 0.9806514

 $00:24:25.982 \longrightarrow 00:24:27.910$ what these cells do,

NOTE Confidence: 0.9806514

 $00{:}24{:}27.910 \dashrightarrow 00{:}24{:}31.738$ so they secrete substances called cytokines.

NOTE Confidence: 0.9806514

 $00:24:31.740 \longrightarrow 00:24:34.666$ Interleukin two, that early drug that I

NOTE Confidence: 0.9806514

00:24:34.666 --> 00:24:37.006 had mentioned that was approved already

NOTE Confidence: 0.9806514

 $00:24:37.006 \longrightarrow 00:24:40.249$ in the 1990s is a type of a cytokine.

NOTE Confidence: 0.9806514

 $00:24:40.250 \longrightarrow 00:24:42.185$ Many companies are now developing

NOTE Confidence: 0.9806514

00:24:42.185 --> 00:24:42.959 novel cytokines,

NOTE Confidence: 0.9806514

 $00:24:42.960 \longrightarrow 00:24:45.084$ so either better versions of interleukin

NOTE Confidence: 0.9806514

 $00{:}24{:}45.084 \dashrightarrow 00{:}24{:}47.829$ two that bind to the interleuk in two

NOTE Confidence: 0.9806514

 $00:24:47.829 \longrightarrow 00:24:49.929$ receptors that are more important,

NOTE Confidence: 0.9806514

 $00:24:49.930 \longrightarrow 00:24:52.422$ or that bind with a

NOTE Confidence: 0.9806514

 $00:24:52.422 \longrightarrow 00:24:54.569$ stronger affinity to the receptors.

NOTE Confidence: 0.9806514

 $00:24:54.570 \longrightarrow 00:24:56.898$ And then there are other interleukins,

NOTE Confidence: 0.9806514

 $00:24:56.900 \longrightarrow 00:24:59.216$ interleukins that are made by

 $00:24:59.216 \longrightarrow 00:25:01.940$ our cells. So you could have

NOTE Confidence: 0.9806514

00:25:01.940 --> 00:25:03.504 Interleukin 12, interleukin 18,

NOTE Confidence: 0.9806514

00:25:03.504 --> 00:25:04.288 interleukin 15,

NOTE Confidence: 0.9806514

 $00:25:04.288 \longrightarrow 00:25:06.640$ all of these are being looked

NOTE Confidence: 0.9806514

 $00:25:06.708 \longrightarrow 00:25:07.928$ at as drug targets,

NOTE Confidence: 0.9806514

 $00:25:07.930 \longrightarrow 00:25:10.611$ and in fact there's a researcher at

NOTE Confidence: 0.9806514

 $00:25:10.611 \longrightarrow 00:25:12.926$ Yale who has developed a

NOTE Confidence: 0.9806514

 $00{:}25{:}12.926 \to 00{:}25{:}15.460$ drug that is a mimic of interleukin

NOTE Confidence: 0.9806514

 $00:25:15.536 \longrightarrow 00:25:17.666$ 18 that doesn't get sucked up

NOTE Confidence: 0.9806514

 $00:25:17.666 \longrightarrow 00:25:19.802$ by decoy proteins in the body,

NOTE Confidence: 0.9806514

 $00{:}25{:}19.802 \dashrightarrow 00{:}25{:}22.294$ so should be more potent and we

NOTE Confidence: 0.9806514

 $00:25:22.294 \longrightarrow 00:25:24.821$ will be excited to study that in

NOTE Confidence: 0.9806514

 $00:25:24.821 \longrightarrow 00:25:27.878$ the next month or two in the clinic.

NOTE Confidence: 0.9806514

00:25:27.878 --> 00:25:29.853 There's a trial that's opening

NOTE Confidence: 0.9806514

 $00:25:29.853 \longrightarrow 00:25:32.240$ up and we will be administering

 $00:25:32.240 \longrightarrow 00:25:34.298$ that drug to patients who have not

NOTE Confidence: 0.9806514

 $00{:}25{:}34.298 \dashrightarrow 00{:}25{:}36.096$ responded to the immune checkpoint

NOTE Confidence: 0.9806514

 $00:25:36.096 \longrightarrow 00:25:37.812$ inhibitors both with Melanoma

NOTE Confidence: 0.9806514

 $00:25:37.812 \longrightarrow 00:25:39.099$ and other diseases.

NOTE Confidence: 0.9238917

00:25:39.770 --> 00:25:42.322 So Harriet just to unpack a couple

NOTE Confidence: 0.9238917

 $00{:}25{:}42.322 \dashrightarrow 00{:}25{:}45.119$ of the concepts that you mentioned.

NOTE Confidence: 0.9238917

 $00:25:45.120 \longrightarrow 00:25:47.373$ It sounds to me like

NOTE Confidence: 0.9238917

 $00:25:47.373 \longrightarrow 00:25:49.431$ the activation of both the innate

NOTE Confidence: 0.9238917

 $00{:}25{:}49.431 \dashrightarrow 00{:}25{:}51.399$ and the adaptive immune system

NOTE Confidence: 0.9238917

00:25:51.399 --> 00:25:53.135 just makes intuitive sense.

NOTE Confidence: 0.9238917

00:25:53.140 --> 00:25:55.050 If you have more

NOTE Confidence: 0.9238917

 $00:25:55.050 \longrightarrow 00:25:56.940$ adaptive immune cells and

NOTE Confidence: 0.9238917

 $00:25:56.940 \longrightarrow 00:25:59.309$ you pair that with more cells

NOTE Confidence: 0.9238917

 $00:25:59.309 \longrightarrow 00:26:01.709$ that are presenting to them the

NOTE Confidence: 0.9238917

00:26:01.709 --> 00:26:03.840 antigens they need to go after,

NOTE Confidence: 0.9238917

 $00:26:03.840 \longrightarrow 00:26:05.745$ it seems like that would

 $00{:}26{:}05.745 \dashrightarrow 00{:}26{:}07.269$ be a better approach.

NOTE Confidence: 0.9238917

 $00:26:07.270 \longrightarrow 00:26:10.049$ So is that something that is routinely

NOTE Confidence: 0.9238917

 $00:26:10.050 \longrightarrow 00:26:11.946$ being done or is the cellular

NOTE Confidence: 0.9238917

00:26:11.946 --> 00:26:13.656 therapies that we were talking

NOTE Confidence: 0.9238917

 $00:26:13.656 \longrightarrow 00:26:15.571$ about earlier really going after

NOTE Confidence: 0.9238917

 $00:26:15.571 \longrightarrow 00:26:17.530$ more of those adaptive cells?

NOTE Confidence: 0.9238917

00:26:17.530 --> 00:26:20.176 And wouldn't it be better if they

NOTE Confidence: 0.9238917

 $00{:}26{:}20.176 \dashrightarrow 00{:}26{:}22.968$ could also grow up in a Petri dish

NOTE Confidence: 0.9238917

 $00:26:22.968 \longrightarrow 00:26:25.710$ of patients innate T cells as well?

NOTE Confidence: 0.98698205

 $00:26:27.220 \longrightarrow 00:26:29.484$ Well, we can grow it up in a

NOTE Confidence: 0.98698205

 $00{:}26{:}29.484 \dashrightarrow 00{:}26{:}31.217$ Petri dish or in the body,

NOTE Confidence: 0.98698205

 $00:26:31.220 \longrightarrow 00:26:32.640$ so the whole concept behind

NOTE Confidence: 0.98698205

 $00{:}26{:}32.640 \dashrightarrow 00{:}26{:}34.370$ giving cytokines is to grow them

NOTE Confidence: 0.98698205

00:26:34.370 --> 00:26:35.390 actually in the human.

NOTE Confidence: 0.98698205

 $00:26:35.390 \longrightarrow 00:26:37.278$ So we give more of the cytokines

 $00:26:37.278 \longrightarrow 00:26:39.078$ and we grow up both innate

NOTE Confidence: 0.98698205

 $00{:}26{:}39.078 \dashrightarrow 00{:}26{:}40.380$ and the adaptive cells.

NOTE Confidence: 0.98698205

 $00:26:40.380 \longrightarrow 00:26:41.805$ So these are like growth

NOTE Confidence: 0.98698205

 $00:26:41.805 \longrightarrow 00:26:42.945$ factors for these cells.

NOTE Confidence: 0.98698205

 $00:26:42.950 \longrightarrow 00:26:43.808$ They should make

NOTE Confidence: 0.98698205

 $00:26:43.810 \longrightarrow 00:26:44.602$ them propagate.

NOTE Confidence: 0.98698205

 $00:26:44.602 \longrightarrow 00:26:46.450$ So that was going to be my

NOTE Confidence: 0.98698205

00:26:46.505 --> 00:26:48.015 next question is you talk

NOTE Confidence: 0.98698205

 $00{:}26{:}48.015 \dashrightarrow 00{:}26{:}49.525$ about all of these cytokines?

NOTE Confidence: 0.98698205

 $00:26:49.530 \longrightarrow 00:26:51.570$ These interleukins with various numbers?

NOTE Confidence: 0.98698205

 $00:26:51.570 \longrightarrow 00:26:54.685$ How exactly do they work?

NOTE Confidence: 0.98698205

00:26:54.690 --> 00:26:57.906 It's sounds now like they just

NOTE Confidence: 0.98698205

 $00:26:57.906 \longrightarrow 00:27:00.490$ stimulate the innate immune system.

NOTE Confidence: 0.98698205

 $00:27:00.490 \longrightarrow 00:27:01.828$ Is that right?

NOTE Confidence: 0.97825295

00:27:01.830 --> 00:27:04.060 Both innate and adaptive actually?

NOTE Confidence: 0.97825295

 $00:27:04.060 \longrightarrow 00:27:05.504$ So they stimulate both.

 $00:27:05.504 \longrightarrow 00:27:07.670$ So all of those different

NOTE Confidence: 0.97825295

 $00:27:07.748 \longrightarrow 00:27:09.972$ numbers reflect molecules that

NOTE Confidence: 0.97825295

 $00:27:09.972 \longrightarrow 00:27:11.640$ have different activities.

NOTE Confidence: 0.97825295

 $00:27:11.640 \longrightarrow 00:27:15.208$ So some of them will stimulate innate cells

NOTE Confidence: 0.97825295

 $00:27:15.210 \longrightarrow 00:27:17.440$ and some stimulate the adaptive cells,

NOTE Confidence: 0.97825295

 $00:27:17.440 \longrightarrow 00:27:19.332$ some stimulates suppressor cells.

NOTE Confidence: 0.97825295

 $00:27:19.332 \longrightarrow 00:27:21.224$ The biology is getting

NOTE Confidence: 0.97825295

 $00:27:21.224 \longrightarrow 00:27:23.489$ more and more complicated.

NOTE Confidence: 0.97825295

 $00:27:23.490 \longrightarrow 00:27:24.850$ Well, it's always been complicated.

NOTE Confidence: 0.97825295

 $00:27:24.850 \longrightarrow 00:27:25.934$ We're just learning now

NOTE Confidence: 0.97825295

00:27:25.934 --> 00:27:27.024 how complicated it is,

NOTE Confidence: 0.97825295

 $00:27:27.024 \longrightarrow 00:27:28.386$ and every time we look,

NOTE Confidence: 0.97825295

 $00:27:28.386 \longrightarrow 00:27:30.018$ we discover that we knew nothing.

NOTE Confidence: 0.96022385

 $00:27:31.520 \longrightarrow 00:27:33.963$ And so it sounds like we're

NOTE Confidence: 0.96022385

 $00:27:33.963 \longrightarrow 00:27:35.590$ almost coming full circle,

 $00:27:35.590 \longrightarrow 00:27:37.174$ though, because interleukin two

NOTE Confidence: 0.96022385

 $00{:}27{:}37.174 \dashrightarrow 00{:}27{:}39.550$ was something that you had talked

NOTE Confidence: 0.96022385

 $00:27:39.615 \longrightarrow 00:27:41.664$ about at the very outset, which

NOTE Confidence: 0.96022385

 $00:27:41.664 \longrightarrow 00:27:44.808$ really wasn't terribly effective back then.

NOTE Confidence: 0.96022385

 $00:27:44.810 \longrightarrow 00:27:47.468$ Why would we think that now

NOTE Confidence: 0.96022385

 $00:27:47.470 \longrightarrow 00:27:49.238$ these other interleukins will

NOTE Confidence: 0.96022385

 $00:27:49.238 \longrightarrow 00:27:51.899$ be more effective?

NOTE Confidence: 0.9906297

 $00:27:51.900 \longrightarrow 00:27:55.062$ Now we have

NOTE Confidence: 0.9906297

 $00:27:55.062 \longrightarrow 00:27:57.979$ other bullets to administer with it.

NOTE Confidence: 0.9906297

00:27:57.980 --> 00:28:00.700 And we understand better how to engineer

NOTE Confidence: 0.9906297

 $00{:}28{:}00.700 \longrightarrow 00{:}28{:}03.949$ them so that they can be more effective.

NOTE Confidence: 0.9767311

 $00:28:05.120 \longrightarrow 00:28:07.256$ So the idea is that you would use

NOTE Confidence: 0.9767311

 $00:28:07.256 \longrightarrow 00:28:08.940$ these interleukins along with cellular

NOTE Confidence: 0.9767311

 $00:28:08.940 \longrightarrow 00:28:10.770$ therapy and or checkpoint inhibitors.

NOTE Confidence: 0.9767311

 $00:28:10.770 \longrightarrow 00:28:13.274$ Yes, or if they're so good we might

NOTE Confidence: 0.9767311

 $00:28:13.280 \longrightarrow 00:28:15.170$ be able to use them alone.

00:28:15.170 --> 00:28:17.418 Time will tell when you have a new

NOTE Confidence: 0.9767311

 $00{:}28{:}17.418 \dashrightarrow 00{:}28{:}19.878$ drug you start studying it by itself,

NOTE Confidence: 0.9767311

 $00:28:19.880 \longrightarrow 00:28:21.450$ mainly because you want to

NOTE Confidence: 0.9767311

 $00:28:21.450 \longrightarrow 00:28:23.020$ look at whether it's toxic,

NOTE Confidence: 0.9767311

 $00{:}28{:}23.020 \dashrightarrow 00{:}28{:}25.508$ but you also look a little bit at

NOTE Confidence: 0.9767311

00:28:25.508 --> 00:28:27.694 the activity so some of them might

NOTE Confidence: 0.9767311

 $00:28:27.694 \longrightarrow 00:28:29.929$ end up being active on their own.

NOTE Confidence: 0.9767311

 $00:28:29.930 \longrightarrow 00:28:30.869$ We will see.

NOTE Confidence: 0.9274463

00:28:31.710 --> 00:28:33.816 Doctor Harriet Kluger is a professor

NOTE Confidence: 0.9274463

 $00:28:33.816 \longrightarrow 00:28:35.620$ of medicine and medical oncology

NOTE Confidence: 0.9274463

 $00:28:35.620 \longrightarrow 00:28:37.630$ at the Yale School of Medicine.

NOTE Confidence: 0.9274463

 $00:28:37.630 \longrightarrow 00:28:39.862$ If you have questions the addresses

NOTE Confidence: 0.9274463

 $00:28:39.862 \longrightarrow 00:28:41.748$ cancer answers at yale.edu and

NOTE Confidence: 0.9274463

00:28:41.748 --> 00:28:43.728 past editions of the program are

NOTE Confidence: 0.9274463

 $00:28:43.728 \longrightarrow 00:28:45.431$ available in audio and written

 $00:28:45.431 \longrightarrow 00:28:47.369$ form at yale cancercenter.org.

NOTE Confidence: 0.9274463

 $00:28:47.370 \longrightarrow 00:28:49.610$ We hope you'll join us next week to

NOTE Confidence: 0.9274463

 $00{:}28{:}49.610 \dashrightarrow 00{:}28{:}51.775$ learn more about the fight against

NOTE Confidence: 0.9274463

 $00{:}28{:}51.775 \dashrightarrow 00{:}28{:}53.695$ cancer here on Connecticut Public

NOTE Confidence: 0.9274463

 $00{:}28{:}53.695 \dashrightarrow 00{:}28{:}55.611$ radio funding for Yale Cancer

NOTE Confidence: 0.9274463

00:28:55.611 --> 00:28:57.441 Answers is provided by Smilow

NOTE Confidence: 0.9274463

 $00{:}28{:}57.441 \dashrightarrow 00{:}29{:}00.070$ Cancer Hospital and Astra Zeneca.