2020 Strategic Priorities

Gastrointestinal Steering Committee (GISC)

Overall goal: To leverage the resources of the NCTN to improve the outcomes of patients with gastrointestinal cancers. This will be accomplished by studies of new agents and modalities, with emphasis on biomarker-driven research that impacts treatment selection and supports scientific discovery and is developed through an interdisciplinary approach.

Colon Cancer

- Biomarker-selected and novel, rational combination therapy approaches for patients with treatment-refractory metastatic colorectal cancer.
- Adjuvant trials with incorporation of circulating tumor DNA (ctDNA) and novel therapies for minimal residual disease
- Trials evaluating efficacy, patient selection, and novel therapies for patients with oligometastatic disease

Esophagogastric Cancer

- Biomarker-driven treatment in the perioperative, neoadjuvant and advanced/refractory disease settings
- Novel approaches/therapeutics for locally-advanced disease, including neoadjuvant, perioperative and high-risk adjuvant settings
- Novel, multidisciplinary approaches to therapy in localized and advanced disease
- Use of novel imaging, ctDNA, and other evaluative technologies in both the operative and nonoperative settings to provide a basis for adaptive therapies for improved disease control and quality of life

Hepatobiliary Cancer

- Combinations of liver-directed therapies with immunotherapeutic strategies, including the investigation of predictive biomarkers for checkpoint inhibition in hepatocellular cancer
- Second-line therapy clinical trials for hepatocellular cancer after first-line checkpoint inhibitor therapy
- Neoadjuvant and periadjuvant targeted therapy and systemic chemotherapy trials for resectable biliary tract cancers
- Second-line systemic therapy trials for biliary tract cancers, including treatments for molecular subsets

Neuroendocrine Tumors

- Trials assessing the optimal role of peptide receptor radionuclide therapy (PRRT) either alone or in combination for the spectrum of neuroendocrine neoplasms (NENs)
- Randomized phase 2 and phase 3 trials of immunotherapy and molecularly-targeted therapy in in NENs
- Treatment strategies to delay, prevent or reverse resistance and individualize therapy in NENs
- Patient-centered strategies and approaches to sequencing of standard and novel therapies in NENs

Pancreas Cancer

- Trials for stage 1 and 2 (resectable disease) that utilize a neoadjuvant platform to explore new agents, including biomarker-driven drug development
- Trials for stage 3 (locally-advanced disease) as a platform for novel approaches

- Trials for stage 4 (metastatic disease) that study new therapeutic approaches including immunotherapies and targeting tumor metabolism, study the efficacy of targeted/personalized therapies in patient subsets, or evaluate the role of local therapies for exceptional responders
- Trials for all stages that explore integration of targeted treatment approaches capitalizing on DNA damage repair deficiency or explore the impact of maintenance therapies

Rectal-Anal Cancer

- Evaluation of unique biomarkers (e.g., ctDNA and use of risk stratification tools) to guide pre- and post-operative therapy in patients with anorectal cancers
- Total neoadjuvant therapy (TNT), and integration of novel agents and unique approaches in locallyadvanced rectal cancer.
- Novel approaches such as immune modulation for locally-advanced and metastatic anal cancer
- Organ preservation approaches in rectal cancer designed to improve or preserve therapeutic outcomes while preserving quality of life