

## **Transcript of NAPOLI 3 Trial Deep Dive:** **ASCO 2025 Updated OS Analysis Panel Interview;**

**Featuring Paul E Oberstein MD, Priyadarshini Pathak MBBS, and Tara E. Seery MD;**

**Available at [NAPOLI 3 Trial Deep Dive: ASCO 2025 Updated OS Analysis | OncLive](#)**

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| Tara E. Seery, M.D.   | Now can you make and describe to us the big differences between the NAPOLI-3 which led to NALIRIFOX and the PRODIGE-4 which led to FOLFIRINOX kind of the big differences within those trials?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Paul E. Oberstein, MD | Sure. So these two trials you know they were around 15 years apart, so that's one big difference that's around 10 or 15 years. Both both trials looks at metastatic patients. Metastatic pancreatic cancer patients untreated in the metastatic setting. The PRODIGE-4 trial was you know obviously earlier it was limited to a more select group of sites within one country essentially but they were metastatic you know they excluded patients who were 76 I think and up. 75 was the upper limit and so you know there were fewer [intelligible] patients above that number but I'd say a slightly younger skew in the study and of course the key thing is that the comparison in that study was gemcitabine alone right umm and so that study showed as you said before a survival benefit from FOLFIRINOX. So in contrast the NAPOLI trial as I said was a decade later and didn't have a limit on age so there were patients who were included above the age of 75 and I think the oldest was 85 if I'm correct. |
| Tara Seery, M.D.      | And you can see some really fit elderly                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Paul E. Oberstein, MD | Correct. 100%, Umm and the comparison of course in that study was gem nab-pac, not gemcitabine alone but I would say unlike the earlier PRODIGE trial it was a larger more global more general population involved in this study so a much more heterogeneous group of patients both for the treatment and for managing side effects that makes an impact. Umm, but outside of that the regimes are quite similar there was modifications in the dosage of oxaliplatin and 5-FU compared to the original one but you know the schedule otherwise for patients was quite similar.                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Tara Seery, M.D.      | Yeah. And the original FOLFIRINOX I don't think any of us use, it was challenging all of us have now use the modified version with the slightly lower the risk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

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| Pryadarshini Pathak, MBBS | Nobody can tolerate the full dose of FOLFIRINOX.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Tara Seery, M.D.          | I'm impressed with those patients that initially enrolled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Pryadarshini Pathak, MBBS | I agree, I agree.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Tara Seery, M.D.          | And so Dr. Pathak, so at ASCO just yesterday                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Pryadarshini Pathak, MBBS | Um Humm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Tara Seery, M.D.          | There was an update on the NAPOLI-3. What were your takeaways from that and who were these patients that really responded?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Pryadarshini Pathak, MBBS | Yeah so umm this update really looked at who were the long term responders. And it was a small subset, I believe it was like 20 patients and the median overall survival in this population was higher it was like 18 to 19 months compared to the 11.1 month seen in the overall subset. Which is more than half a year which you know which is great in the pancreatic cancer world. And the profile of the patients who live longer is what we would expect right. They were younger patients and they were fitter patients and had lower levels of CA19-9 so probably a lower disease burden. And I think you know it's what we would expect, that the younger fitter patients live longer and the reason is they can tolerate treatment for longer and I believe in that abstract that they received treatment for a longer duration. |
| Tara Seery, M.D.          | Correct. And Dr. Oberstein at ASCO GI this past year they also talked about those who could stay on longer with dose modifications and what's your opinion on this and do you do that?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Paul E. Oberstein, MD     | Yeah. So I think that abstract at GI ASCO was very much, you know they showed the same kind of trend in the one yesterday about long-term survivors. And basically the message there, which I think is very similar to what we see in practice, is that if we modify doses and we can keep patients on longer they're going to sometimes to do better. And so it really I would say that's our practice it gives us a lot of reinforcement to do that which is that the key thing here is not necessarily being too strong, too aggressive on day one, it's keeping patients on treatment if it's working. Right. And I think for a large number of patients it is working and we get a high response rate. And the question then becomes how do you stay on trial, well not on trial, how do you                                          |

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|                           | stay on treatment outside of the trial. And what they showed at GI ASCO is that with dose modifications in both liposomal irinotecan and oxaliplatin, patients who were able to modify and stay on trial seem to do much better.                   |
| Tara Seery, M.D.          | And it's interesting because when you see patients and you tell them I'm going to reduce your dose or I have to delay you a week, some of them get very upset. So now you can say oh no the data shows you actually do better when we can do this. |
| Pryadarshini Pathak, MBBS | I actually always tell my patients it's a marathon not a sprint and I think that kinds of helps them visualize what they're looking at.                                                                                                            |