

## Palisades Therapeutics Targets the IHOP Protein as a Biomarker to Detect Pancreatic Cancer and Enable PT Therapeutic

A collaborative effort between Palisades Therapeutics and Georgetown University could produce a pancreatic cancer breakthrough

CLIFFSIDE PARK, NJ, UNITED STATES, March 1, 2022 /EINPresswire.com/ --Early detection is key to life saving treatments for pancreatic cancer. <u>Palisades Therapeutics</u> (PT) in



collaboration with Georgetown University's Dr. Christopher Albanese, Professor of Oncology and Radiology, are testing the proprietary PT detection and therapeutic paradigm to improve pancreatic outcomes. The preliminary data are promising.

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Georgetown University

Islet Homeostasis Protein (IHoP) is a novel molecule that appears to play an important role in maintaining pancreatic stability. The <u>Palisades</u>' IHoP blood test could be utilized as a non-invasive method to determine the health of the pancreas. This method could enhance early recognition and subtle diagnosis of pancreatic neoplastic diseases.

The ability to diagnose pancreatic cancer in the earliest stages is urgently needed. Patients whose disease is diagnosed in its early stages have overall survival rates greatly exceeding those of stage IV patients. This survival is due to the availability of more treatment options, including surgery and effective chemotherapeutic options. For

eligible, earlier stage patients, surgery is the best option for long-term survival of pancreatic cancer, improving patient survival by approximately ten-fold, but surgery is not an option for most patients because they are diagnosed too late. Likewise, chemotherapies are usually ineffectual in later stage patients. Pancreatic ductal adenocarcinoma (PDAC) is a highly aggressive disease and patients with this malignancy have less than a 10% overall five-year survival rate. PDAC is the third leading cause of cancer-related deaths and is expected to become the second leading cause of cancer-related deaths in the next 15 years according to the American Cancer Society. The addition of Abraxane (nab-paclitaxel, n-PTX) to gemcitabine, the standard first-line treatment for unresectable locally advanced and metastatic PDAC does not even bring median overall survival to a year, shifting the bar only from 6.7 months to 8.5-9.4 months median overall survival. Thus, unfortunately, nearly all patients succumb to the disease and do so quickly.

Dr. Albanese has established a panel of both n-PTX sensitive and resistant patient-derived PDAC cells. Using these unique resources, Dr. Albanese's lab first established the effective concentration where 50% of the cells died (EC50) when treated with Palisades' glucocorticoid receptor (GR) antagonists, clinical stage PT150 or preclinical stage PT157. Next, the impact of the GR antagonists on sensitivity to nab-PTX was tested in the n-PTX-resistant cells. Our preliminary, preclinical data suggested that the co-treatment with the GR inhibitors strongly reduced the n-PTX resistance. Dr. Albanese says, "We hypothesize that inhibition of the GR causes a downregulation of key GR target genes and downstream pathways and mechanisms that may lead to better responses to cytotoxic drugs such as n-PTX/Abraxane." Palisades Therapeutics, therefore, leads with a potential two-prong approach to the treatment of pancreatic cancer: developing screening tests for early detection and developing novel therapeutics to improve chemotherapeutic outcomes.

Palisades invites leading companies such as Eli Lilly and Company (NYSE: LLY), Bristol-Myers Squibb Company (NYSE: BMY) and Sanofi (Nasdaq GS: SNY) to review our data.

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