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GRANT SNAPSHOT

2014 Fredman Family Foundation – Pancreatic Cancer Action Network – AACR Research Acceleration Network Grant

Grantees: PI: Dung Le, MD
Institutions: Johns Hopkins University

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Co-PI: Todd Crocenzi, MD Providence Portland Medical Center



Research Project: Award Period:

GVAX + CRS-207 Heterologous Prime Boost Vaccination with PD-1 Blockade

July 1, 2014 – June 30, 2017

Amount: \$1,000,000

Biographical Highlights

Dr. Le is an Assistant Professor at the Sidney Kimmel Comprehensive Cancer Center at the Johns Hopkins University in Baltimore, Maryland. She is a member of the Gastrointestinal Malignancies Division of Medical Oncology. Dr. Le received her undergraduate degree at Yale University and underwent internal medicine and oncology fellowship training at Johns Hopkins University. Her main research focuses are on combination immunotherapy strategies or the use of predictive biomarkers to improve responses to immunotherapy.

After earning his medical degree from Jefferson Medical College, Dr. Crocenzi completed his internship and residency in internal medicine at the University of Maryland Medical Center. At the Dartmouth Hitchcock Medical Center, he was a fellow in hematology/oncology and a research fellow in immunology. He is board-certified in medical oncology and internal medicine. Dr. Crocenzi is the director of gastrointestinal oncology research at the Robert W. Franz Cancer Research Center in the Earle A. Chiles Research Institute at Providence Cancer Center.

Project Overview

Immunotherapy is a strategy to empower a patient's immune system to fight his/her pancreatic tumor. There are currently large clinical trials underway to test a combination vaccine immunotherapy treatment. One vaccine, called GVAX, consists of pancreatic cancer cells that release a compound known to stimulate the immune system. Patients are also treated with CRS-207, a version of the bacteria Listeria that is weakened so that it is safe for the patient, and designed to express a protein commonly expressed on the surface of pancreatic tumors. The intention is to activate the patient's immune system to recognize his/her tumor as foreign, and launch an attack. For this RAN grant project, Drs. Le and Crocenzi propose to include an additional drug with the treatment regimen that blocks a protein called programmed death-1 (PD-1), which would interfere with the tumor's innate ability to evade an immune response, and leave the tumor vulnerable to attack. Positive data could validate the use of immunotherapy in pancreatic cancer, facilitating access to additional immunotherapies on the horizon.