Gemcitabine and Abraxane Mechanisms of Action in Pancreatic Cancer (GAMA-PANC)

Dr. Natalie Cook, The 2013/14 Wilfred G. Lewitt Fellowship in Pancreas Cancer Princess Margaret Cancer Centre

I am pleased to provide the following update about my clinical and research activities over the past year. I had a productive year gaining additional experience working with internationally renowned physicians and researchers at The Princess Margaret.

Having chosen a career in medicine I quickly realized medical oncology was the area I wished to specialize in, being a research driven speciality with opportunities for an academic career. After completing my medical oncology training and PhD at the University of Cambridge, I applied for a fellowship outside of the UK. I was extremely interested in spending time working in a different health care system. I believe this gives me a unique advantage to ascertain the benefits and disadvantages of how differing methods of health care in cancer are utilized on a different continent.

There were many reasons I chose to work at The Princess Margaret specifically for my fellowship. The Princess Margaret has achieved an international reputation as a leader in the fight against cancer. Clinical and research staff at Princess Margaret represent many of the world's leading experts in oncology.

Working with Dr. Moore in the fields of pancreatic cancer and drug development is an ideal opportunity to study the areas I am particularly captivated by. I have been involved in the planning, coordination, and implementation of selected innovative early stage clinical trials and research, including pancreas specific trials. The opportunity to conduct timely and high quality clinical and translational studies would be difficult to gain in any other program.

The following study is one of the two projects I have designed for my fellowship and the other study is the **Profiling of Pancreatic Cancer Survivors (POPS)**.

Gemcitabine and Abraxane Mechanisms of Action in Pancreatic Cancer (GAMA-PANC) Recent Phase III trial results have revealed a significantly improved survival for patients with metastatic pancreatic cancer treated with the drugs Abraxane and Gemcitabine versus Gemcitabine alone.

It is likely to become a new standard of care treatment. Despite this, we do not fully understand why these two drugs are more effective than multiple other regimes that have been tested over the past 30 years. The aim of this trial is to treat patients with Abraxane and Gemcitabine and also obtain samples (blood and tumour), to allow us to perform certain tests to understand the activities of the drugs on the cancer cells and the cancer microenvironment.