ARA Theranostics
EXPERTS IN MOLECULAR IMAGING & THERAPY

PROVIDER INFORMATION
LU-177 PSMA TREATMENT

INNOVATIVE THERAPY FOR PROSTATE CANCER PATIENTS

PROSTATE-SPECIFIC MEMBRANE ANTIGEN (PSMA) THERAPY

The FDA approved Lu-177 PSMA-617 in March of 2022 for treatment in certain men with metastatic prostate cancer. Known by the brand name **Pluvicto**, Lu-177 PSMA-617 is the first of a new class of PSMA based radiopharmaceuticals that use selective targeting to attack prostate cancer cells while leaving surrounding healthy tissues virtually untouched. In doing so, they provide a treatment option for men whose prostate cancer has progressed despite having received traditional therapies. **Pluvicto** is awaiting full CMS approval, which is expected by the end of the year. In the meantime, it is offered at ARA under some Medicare codes. It is also available for patients on a self-pay basis. You are encouraged to check with our theranostics team if you have questions about eligibility of a particular patient as coverage is expanding quickly.

Approval of Lu-177 PSMA treatment was based on the success of the VISION trial*. The trial enrolled 831 men with mCRPC. In the study, participants who received Lu-177 PSMA-617 (**Pluvicto**) along with standard therapy lived longer than those who received standard therapy alone: a median of 15.3 months versus 11.3 months. Given the advanced stage of disease in the participants, the results were considered sufficiently positive to warrant approval of the treatment. Overall side effects were mild, including dry mouth, nausea, vomiting, bone marrow suppression, fatigue, loss of appetite, weight loss, change in bowel habits, urinary tract infection, and abdominal pain. There were a small number of severe side effects, including five deaths attributable to 177 LuPSMA-617. All deaths were the result of marrow suppression from the treatment.

VISION treatment group	Overall survival	Progression-free survival
177 Lu-PSMA-617 + standard therapy	15.3 months	8.7 months
Standard therapy only	11.3 months	3.4 months

TREATMENT PROTOCOL AND SIDE EFFECTS

Pluvicto is given in six doses, each six weeks apart. The ARA theranostics team works in partnership with the cancer care provider to assess the patient's suitability for the treatment, and to monitor his ongoing health during the treatment period. Severe adverse side effects to the treatment may result in dose reduction, dose interruption, or permanent discontinuation. These modifications to the treatment protocol will be made in consultation with the patient and their cancer care provider.

**N Engl J Med. 2021 Sep 16;385(12):1091-1103.*

If you have a patient that might be a candidate for Lu-177 PSMA treatment, please send the ARA Theranostics PSMA referral form along with the patient's medical history and physical, current labs, and any pertinent imaging or pathology reports to the Theranostics Center at theranostics@ausrad.com or fax to (512) 451-3554. Feel free to contact our theranostics coordinator to ask any questions you might have about the treatment. You can also speak with one of our molecular radiologists to answer any questions.

ARA THERANOSTICS CENTER

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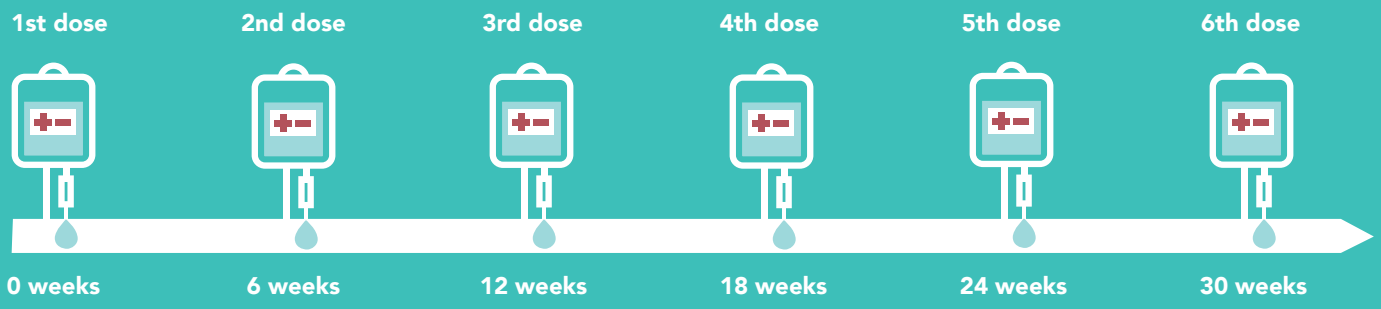
ARA DIAGNOSTIC IMAGING

PSMA treatment schedule

Depending on the patient's reaction to treatment, the provider may choose to adjust the schedule.



WHO IS A CANDIDATE FOR PLUVICTO

Men with metastatic, castrate-resistant prostate carcinoma (mCRPC) are potential candidates for **Pluvicto**. Generally, these men have previously had surgical resection and/or radiation therapy of their primary tumor. Subsequent local or metastatic recurrences have typically been treated with androgen receptor pathway inhibition and/or taxane-based chemotherapy. PET/CT imaging with PSMA is required to confirm that the metastases will accumulate PSMA, and therefore respond to **Pluvicto**. **Guidelines are expected to change over time as additional treatment data become available.** You are encouraged to check with the theranostics team if you have questions about a particular patient. Please direct inquiries to Alex DiFonzo at (512) 519-3456, ext. 2351, or you can email the theranostics team at theranostics@ausrad.com. Alex or one of our molecular radiologists will then contact you to discuss your patient.

ABOUT THE ARA THERANOSTICS TEAM

The ARA theranostics team includes six molecular radiologists who are all double boarded in diagnostic radiology and nuclear medicine, plus highly-trained nuclear medicine technologists and a medical support group that works with insurance and scheduling. Our team partners with the patient's cancer care provider to ascertain and monitor the treatment that is best for each patient.

MANAGING POST-TREATMENT RADIATION

Most of the radiation from the treatment leaves the patient's body in the urine within three days after the radiopharmaceutical infusion. During that period, the patient will need to follow safety guidelines to protect others from radiation exposure. The theranostics team will go over the protocols with the patient before they leave the ARA Theranostics Center.

THE ARA THERANOSTICS CENTER

The Theranostics Center at ARA has been designed at our Midtown location to comfortably and safely administer the radiopharmaceuticals that are used in theranostics treatments.

The treatments typically last from 2 to 6 hours depending on the radiopharmaceutical being used and the Center is made to be accommodating for patients during their stay. Wi-Fi and television are provided in the infusion room. Patients may also bring a book, computer, or other quiet activity to occupy their time. Snacks and drinks are provided to patients during the treatment period. Lunch is also offered to patients whose treatments last most of the day.

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