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SIRTEX REPORTS POSITIVE RESULTS FROM ASIAN CLINICAL TRIAL

- Combination of SIR-Spheres® microspheres and chemotherapy shows improved survival for inoperable Hepatocellular Carcinoma (HCC) liver cancer patients
- Median overall survival of 11.75 months in a HCC patient population with limited treatment options

Oncology treatment company Sirtex Medical (ASX: SRX) today said a combination of its radioactive SIR-Spheres microspheres with a standard chemotherapy drug helped extend survival rates for inoperable HCC liver cancer patients according to the results of an independent clinical trial released today.

Detailed results of the prospective independent 35-patient multi-centre trial presented today at the 46th American Society of Clinical Oncology (ASCO) conference in Chicago showed a median overall survival of 11.75 months for patients treated with a combination of SIR-Spheres microspheres and the current standard chemotherapy drug Sorafenib, marketed as Nexavar by Bayer-Schering Pharmaceuticals to treat primary liver cancer.

Sirtex Medical Limited Chief Executive Officer Gilman Wong said, "The results of this study demonstrate a combination of radioactive SIR-spheres microspheres and standard-of-care chemotherapy present clear survival benefits in a HCC patient population with limited treatment options available."

"We are very optimistic the survival benefit observed for this combination of therapies will be confirmed by the larger SORAMIC Phase III study which will soon begin recruiting patients in Europe." Mr Wong said.

Overall survival for patients with major vascular invasion and or extra-hepatic spread compared to those without was 8.75 months and 18.25 months, respectively. This compared very favorably with an overall survival of 5.6 months and 14.3 months respectively in patients on Sorafenib alone in an earlier landmark Asia-Pacific study.

The overall disease control rate was 79.5 per cent with 35.5 per cent in this group reporting tumor response and 44 per cent a stabilization of the disease. Three patients (nine per cent) who presented with unresectable disease had a sufficient reduction in tumor size to permit potentially curative therapy, including one who had a liver transplantation and two who received radio-frequency ablation.

Patients in the advanced stages of liver cancer, particularly those with major vascular invasion in the liver and spread of disease outside the liver, are not candidates for potentially curative therapies such as surgery or transplantation. These patients have a very poor prognosis and relatively low survival rates.

The multi-centre study was conducted in four countries by the Asia Pacific Hepatocellular Carcinoma Trials Group (AHCC) in Singapore and was designed to evaluate tumor response and overall survival in patients with inoperable liver cancer, including those with disease that has spread outside the liver.

The trial team was headed by Professor Pierce Chow, a senior consultant to Singapore General Hospital and National Cancer Centre Singapore.

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