Diagnostic signature for liver cancer

An easy and highly-validated tool for diagnosing and stratifying patients to improve clinical trial outcomes and patient survival

Project Overview		
Sector	Oncology, Liver Cancer	
R&D directions	 Prognostic prediction 	
	· Liver Cancer Stratification	
Project stage	TRL 3-4 Validated in laboratory	
Patents	Patent filed	
Inventors	Dr. Carolina Armengol	
	Dr. Marina Simon	
	Juan Carrillo	
Market size	€500M	

Product Profile		
Clinical Indication	· Liver cancer	
MoA	 Immunohistochemistry 	
Efficacy	 Improves clinical stratification of liver cancer Predicts patient prognosis at diagnosis and after treatment 	



License out Co-development

The Need

Liver cancer (HCC) is the sixth most common cancer in the world, with around 782,000 new cases diagnosed in 2012 and with a survival rate at five years of only 13% due to inefficient therapeutic approaches. Despite great advances during the last decades focused on improving clinical patient stratification and treatment, still too many patients die due to liver cancer.

In the current molecular era, there is a clear consensus that to improve the survival of patients with liver cancer, there is a needed to better diagnose and to better define patient stratification and consequent treatments. At present, no biological factors are taken into account to improve the management of liver cancer in contrast to other cancer types.

The solution

After years of cancer research by using proteomic techniques, we defined a strong panel of 3 protein biomarkers highly associated with the prognosis of patients with liver cancer. The technique to assess them is an easy immunohistochemistry or an ELISA depending on the type of available samples (formalin-fixed embedded tissues or plasma/serum). The method is simply to apply and easy to interpret by taking the adjacent non-tumor liver as control or a standard blood sample. The efficacy of the 3-protein signature has been already validated in more nearly 200 patients with HCC and HB.

The opportunity

- Easy to apply and cost/effective
- Tool to improve clinical patient stratification
- Tool to predict patient outcome
- Tool to improve clinical trial findings by stratifying patients according to biological markers
- The material needed is easily accessible: routine pathological sections or a blood sample

Contact Details

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