The Latest in Neuroendocrine Tumor (NET)

Neuroendocrine Cancer Foundation Interview with Dr. Aman Chauhan

Nov 9, 2025

Lisa Yen: I'm Lisa Yen, Director of Programs and Outreach for the Neuroendocrine Cancer Foundation. And we're here in Miami, Florida, where we just wrapped up a patient education event. Dr. Chauhan, thank you so much for partnering with us. And we'd love to hear, you know, this is towards the end of 2025. What is the latest on the horizon for neuroendocrine tumors?

Dr. Aman Chauhan: Thank you, Lisa. Greetings from Miami audience. We are wrapping up a fantastic 2025 we are just returning from Berlin after ESMO and NANETS at Austin Texas and we've seen a lot of developments new developments in the neuroendocrine tumor space. There are few things that I'd like to highlight that is looking very promising.

Let's start off with somatostatin receptor and agonist side the things. So, we finally have a pill alternative to somatostatin analogs that we will have access to in clinical trials. So, there's a clinical trial called CAREFINDER where a drug called paltusotine will be available for carcinoid syndrome patient and this is a large international study. So, patients all over the world would have access to this trial. So very, very excited about that.

In PRRT arena, we are making a lot of moving and shaking and positive changes, especially with alpha PRRT. There are two fantastic drugs currently in development, the VMT alpha NET and the Rayzebio Actinium-based PRRT and lead 212 dotamtate. They all look very promising. the early data looks very promising with good disease shrinkage. Now we are waiting for the more studies to mature, the phase three to mature, and phase two to go into the phase three. So, the field looking very promising with alpha PRRT.

And third, but the closest to my heart is the combination beta PRRT. So, we all know about Lutathera, the Lutetium 177 Dotatate, has been a big game changer for neuroendocrine cancer management in the US and worldwide. It's a big success. But we are now trying to improve on that success by adding radiation sensitizers. So earlier this month, we presented data with the combination triapine and Lutetium 177 Dotatate at ESMO, for which we received the ESMO Merit Award. And we are very excited to see early promising signs. That phase one study that we presented led to a randomized phase two study where we have now treated over 100 patients and the study has now successfully closed to

enrollment. So, stay tuned, friends. In a year, hopefully we share some more good news and see if this concept can go into phase three. So, a lot happening in well-differentiated neuroendocrine tumor.

Last but not the least, I would also like to give a shout out to Dr. Eads at UPenn, who is working hard on cracking the immunotherapy drugs in NET space, and they're working on a very cutting -edge CAR T therapy study there. So all power to them. Overall, super excited to see all -round drug development in neuroendocrine cancer space.

Lisa Yen: Wow. And that's a really wide range of types of treatments, things that target symptoms and things that also target tumor growth for different types of tumors. So very interesting that there's perhaps hopefully something for everyone out there.

Dr. Aman Chauhan: Absolutely. It's unlike five or ten years back where we just had one class of drug. Now who are seeing drugs that are developing for immunotherapy, cellular therapy, PRRT. And I forgot to mention another, the VEGF TKI, the next generation of Cabozantinib called Zanzalintinib. So, we are so excited. There are so many tools and each tool for each patient, it's not one size fit all. Like we know, no two zebra stripes are same, no two NET patients are same. So, we have to tailor patients' treatment to each patient.

Lisa Yen: More tools in the toolbox. We like that. Thank you so much, Dr. Chauhan.

Dr. Aman Chauhan: Thank you, Lisa.