Pågående forskningsprosjekter

Project	Type	Start	End	Aim	Included patients (Included/aim)	Partners
Chemotherapy in neuroendocrine carcinomas	Clinical Retrospective	17.07.07	ongoing	Retrospective study of effect of chemoteherapy and prognosis in Grade 3 (WHO) neuroendocrine carcinomas. secondary aim is to study immunohistochemical and genetical factors in neuroendocrine carcinomas	24	University of Bergen. University of Uppsala, University of Copenhagen, University of Aarhus
ONEST	Clinical Prospective		ongoing	Observational study monitoring follow up interventions in NET patients with neuroendocrine tumours with rest tumour, metastases and non-operable patients and primary location in pancreas, small intestine or origo incognita. *Primary objective* is to compare the association between chromogranin A test results and CT-scans (measured by latest RECIST-version)	48	University og Bergen. University of Uppsala, University of Copenhagen, University of Aarhus

Single-arm international multi-center study of the safety and efficacy of sunitinib malate in patients with progressive advanced/ metastatic well-differentiated, unresectable pancreatic neuroendocrine tumors	Clinical Prospective	01.01.13	ongoing	To assess progression-free survival (PFS) in patients with advanced/ metastatic well-differentiated unresectable pancreatic neuroendocrine tumors per RECIST. *Secondary Objectives:* To assess: PFS per independent radiological review, overall survival, the objective response rate, duration of response, time to tumor response.To evaluate: Choi criteria, Chromogranin A response, the safety and tolerability of sunitinib. To explore the potential relationship between plasma soluble KIT levels and measure the efficacy including PFS	3/10	Multicenter, international, Pfizer Inc.
A European Multicenter Comparison of Laparoscopic and Open Distal Pancreatectomy for Pancreatic Neuroendocrine Tumors	Clinical/ basal Prospective	01.11.13	01.08.14	To compare perioperative and oncologic outcomes of patients undergoing open distal pancreatectomy with laparoscopic distal pancreatectomy.	0/200	Department of Hepato-Biliary-Pancreatic Surgery, Pole des maladies de l'appareil digestif, Hopital Beaujon, Assistance Publique–Hopitaux de Paris, Clichy, France; Department of General Surgery, Royal Infirmary of Edinburgh, Edinburgh, Scotland

Correlation between genomic imbalances, cell proliferation and tumor size in sporadic pancreatic neuroendocrine tumors	Basal	01.04.11	01.11.13	To increase knowledge about the genetic mechanisms underlying sporadic pancreatic neuroendocrine tumors	15/15	Section for Cancer Cytogenetics, Institute for Medical Informatics, The Norwegian Radium Hospital; Centre for Cancer Biomedicine, University of Oslo
Whole transcriptome sequencing of sporadic pancreatic tumors	Basal	01.01.12	01.06.14	To detect fusion genes in sporadic pancreatic neuroendocrine tumors	13/13	Section for Cancer Cytogenetics, Institute for Medical Informatics, The Norwegian Radium Hospital; Centre for Cancer Biomedicine, University of Oslo; Norwegian Sequencing Centre, Ullevål Hospital

Surgical treatment of pancreatic neuroendocrine carcinoma (WHO G3): a nordic multicenter case-control study	Clinical Prospective	01.05.13	01.03.14	To define the role of surgery in the treatment of pancreatic NEC	120/120 12 patients from Oslo	Nordic Neuroendocrine Tumor Group (contributions from 12 Nordic University Hospitals)
Risk factors for sporadic pancreatic neuroendocrine tumors: a european multicenter case-control study – the ePiNET Study	Clinical Prospective	01.10.12	01.01.15	To determine risk factors for the development of sporadic pancreatic neuroendocrine tumors	65/250 30 patients from Oslo	Pancreas 2000 Program (contributions from 5 European University Hospitals)
Second cancer in patients with NET	Epidemiology	15,04,12	ongoing	By the official figures of Cancer Norway evaluate the proportion of patients with NET that also get a second cancer diagnosed compared to the rest of the population		Cancer Norway
Do patients with small intestinal neuroendocrine tumors (SI-NETs) develop hyperkeratosis and skin fibrosis secondary to chronic hyperserotoninemia?	Basal	01.01.13	01.09.13	To determine whether patients with serotonin producing ileal neuroendocrine tumors (SI-NETs, previously called carcinoids) develop skin fibrosis and hyperkeratosis secondary to chronic hyperserotinemia.	2/2	St. Olavs Hospital, Trondheim Norway
Epidemiological and prognostic factors for patients with neuroendocrine pancratic tumors	Epidemiology	01.08.11	01.09.13	To evaluate epidemiological and prognostic factors in patients with neuroendocrine pancratic tumors treated at our center.	114	

Myocardial function by two dimensional speckle tracking echocardiography and Activin A may predict mortality in patients with carcinoid intestinal disease	Clinical/basal Prospective	01.01.11	30.08.13	To identify factors that influence mortality in patients with carcinoid intestinal disease, with special focus on biventricular cardiac involvement as assessed by estimating systolic function by 2D STE in the RV and the LV. To study the association of inflammatory and fibrinogenic biomarkers to mortality in these patients was also evaluated	92	
Stress, social support, general self-efficacy and health related quality of life in patients with neuroendocrine tumors	Clinical Prospective/ retrospective	01.08.05	01.06.13	To obtain increased understanding and knowledge concerning quality of life for patients with the rare cancer diagnosis neuroendocrine tumor (NET) and an educational program based on health promotion behaviors due to the multidisciplinary cognitive theory including the concept of self-efficacy.	269 113 from Oslo Prospective part including 20 patients.	University of Bergen
Pancreatic surgery with vascular reconstruction in patients with locally advanced pancreatic neuroendocrine tumors	Clinical Prospective	01.06.12	01.01013	To evaluate the feasibility and outcome of pancreatic resections with vascular reconstruction in patients with locally advanced PNET	7/7	

Why do liver metastases from neuroendocrine small intestinal tumors grow so much faster than the primary tumor?	Basal	2013		To compare gene-activation in tissue specimen from the primary tumor with tissue from liver and other metastases in the same patient to find genetic pathways that are activated in the metastases and not in the primary tumor to give new insight into the biological behavior of neuroendocrine tumors and could give potential new therapeutic targets. *Secondary objective:* Try to find genetic markers specific for neuroendocrine tumors that could be detected in blood samples.	0/15	
Characterization and targeting of the neuroendocrine stem cell niche	Basal	Winter 2014		1) Examine the role of hypoxic stress in the development of the stem-cell phenotype and determine the NET-stem cell hypoxic signature. 2) Determine critical regulators of hypoxia-mediated proliferation and metastasis in NET-stem cells. 3) Identify and collect “multipotential” cell populations from NETs and assess expression of hypoxia-associated malignant signatures (proliferation and metastases) in clinical samples.	0/5	-Yale School of Medicine, New Haven, USA, -St. Olavs Hospital, Trondheim Norway
Symptoms, symptom allieviation and quality of in patients with metastatic small intestinal neuroendocrin tumors	Clinical	2014		To relate quality of life in patients with metastatic small intestinal neuroendocrin umors and relate this to disease extent, progression and treatment	0/50	Haukeland University Hospital, bergen, Norway

Expletory non-interventional study for evaluating the diagnostic, prognostic and response-predictive value of a multimarker approach in metastatic midgut neuroendocrine tumors	Clinical	Spring 2014		To describe the potential prognostic value of a multivariate analysis of 92 potential cancer biomarkers in patients with metastatic midgut NETs. *Secondary objectives:* To investigate a possible diagnostic value of a multivariate analysis of 92 potential cancer biomarkers in patients with metastatic midgut NETs. To investigate a possible response predictive value of a multivariate analysis of 92 potential cancer biomarkers in patients with metastatic midgut NETs.To investigate how the analysed biomarker levels respond to somatostatin analog treatment. To investigate how the analysed biomarker levels respond to other treatment modalities.	0/15	Nordic multicenterfe