SUPER – SOLVING UNKNOWN PRIMARY CANCER

A prospective cohort study of patients with Cancer of Unknown Primary (CUP) to create a national information resource and improve the understanding of the molecular biology, clinical, quality of life and psychosocial characteristics.

The information resource is a national cohort of CUP patients with associated biospecimens, clinical, quality of life, health economic and psychosocial data. The work also aims to determine the frequency of clinically actionable mutations in CUP tumour samples and evaluate the impact of performing molecular diagnostic tests. SUPER is recruiting participants at 11 metro and rural sites across Australia; please see below for a full list of participating sites.

MOLECULAR TESTING FOR CUP PARTICIPANTS

As part of the SUPER team's larger body of work, we currently offer participants two molecular tests; the SUPERDx site-of-origin and the Comprehensive Cancer Panel (CCP) mutation profiling. Both reports are prepared simultaneously at the Peter MacCallum Cancer Centre and results are fed back to clinicians within 4-6 weeks from receipt of tissue at Peter Mac.

SUPERDx

SUPERDx is a site-of-origin test newly developed by the SUPER team at the Peter MacCallum Cancer Centre. RNA from the patient's archival tumour tissue is used to provide up to two site-of-origin predictions with high, medium or low confidence and a corresponding probability score.

Comprehensive Cancer Panel (CCP)

DNA from the same tissue sample is used for next generation sequencing mutation profiling to return information on both somatic and germline variants of clinical significance, including identified clinically actionable mutations.

**Please note that the largest barrier to conducting molecular testing is the limited tissue remaining in samples following extensive CUP diagnostic workup, however once testing is complete we aim to inform clinicians of the results as quickly as possible. It is not routine to re-biopsy patients as part of the study, however should additional sample material be acquired it is feasible to analyse the new tissue.*

INCLUSION CRITERIA

1. Patient is considered CUP (may have differential diagnosis, but no confirmed primary) and has had:
   - Preliminary diagnostic work-up (including a detailed clinical assessment, CT of the chest, abdomen & pelvis)
   - Pathological review of tumour tissue
   - Gender appropriate diagnostic tests (e.g. Mammogram, PSA)
2. Yet to commence treatment or treatment commenced less than 6 months ago
3. Can read and write English and provide written informed consent

EXCLUSION CRITERIA

1. Under 18 years of age
2. ECOG ≥3
3. Uncontrolled medical or psychological conditions

STUDY REQUIREMENTS

Patients

- Patients to provide 10-20mL blood sample at time of consent (for germline testing)
- Consent to access patient archival diagnostic block
- Consent to access Medicare / PBS data (optional)
- Consent to access medical records
- Consent to complete questionnaires at baseline, 3, 6, 9 and 12 months

Clinicians

Treating clinicians will also be asked to complete a short questionnaire around baseline, with a follow-up when any molecular results are released, to help ascertain the clinical significance of molecular results.

MORE INFORMATION

Please contact your local study coordinator or the SUPER project team if you have any questions or would like to refer a patient to the study.

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PARTICIPATING SITES

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