Background: There is limited information on treatment patterns for NET from clinical practice. This analysis describes initial treatment patterns among NET patients.

Methods: The National Comprehensive Cancer Network (NCCN) Oncology Outcomes Database was queried to identify newly diagnosed patients presenting to seven NCCN institutions with a confirmed metastatic cNET or pNET in 2004-2005. Patients with at least 5-years of follow-up or confirmed death were included. Demographics, clinical characteristics, initial treatment, and 5-year survival were described.

Results: Among 187 cNET patients, 52% were male, median age at diagnosis was 58, and 51% alive; 58% had a known primary tumor; 65% of which was small bowel. Most cNET patients (85%) presented with symptoms, 33% had carcinoid syndrome. Initial treatment included surgical therapy (43%), drug therapy (41%), and other therapies (16%). 82% had imaging prior to treatment; 79% had a CT and 35% had somatostatin receptor scintigraphy (SRS). CGA was the most common biomarker test; performed in 64 pts, elevated in 53. Of 76 cNET patients receiving drug therapy, 82% were treated with a somatostatin analog (SA). Kaplan-Meier (K-M) curves indicated a 62% 5-year survival among surgery patients and 56% among drug therapy patients. Among 104 pNET patients, 61% were male, median age at diagnosis was 54, and 41% alive. 82% presented with symptoms, among which 25% were hormone related. Among the 84% of patients imaged prior to treatment, CT (79%) and SRS (38%) were most common. pNET patients received drug therapy most often (56%); 60% received SAs; 31% chemotherapy. 25% underwent surgery. K-M curves indicated a 63% 5-year survival among surgical patients compared to 31% for drug therapy patients.

Conclusions: Initial treatment among the majority of patients was surgery or drug therapy. Among cNET and pNET patients receiving drug therapy, 82% (n=62) and 60% (n=35) respectively, received a SA.