

## PharmaCyte Biotech Aims for Consolidated Therapy to Address Unmet Medical Need in Upcoming Cancer Clinical Trial

NEW YORK, NY -- (Marketwired) -- 10/15/15 -- PharmaCyte Biotech's(OTCQB: PMCB) advanced pancreatic cancer treatment of Cell-in-a-Box<sup>®</sup> capsules + low-doses of ifosfamide has outperformed Eli Lilly's anti-cancer chemotherapy drug Gemzar<sup>®</sup> or gemcitabine in early phase clinical trials when compared to historical data for gemcitabine in 3 key areas: median survival time, one-year survivors and harmful side effects. PharmaCyte's treatment also showed better data in those same 3 areas in early phase trials than Celgene's Abraxane<sup>®</sup> plus gemcitabine, the current "gold standard," offers patients.

It now appears that the small Silver Spring, Maryland, biotech firm plans to live by the motto, *if you can beat them, join them*. This week PharmaCyte announced that it has redesigned its upcoming clinical trial in pancreatic cancer to address a critical unmet medical need.

According to the company, the trial is designed to provide an effective treatment for the large percentage of patients who no longer respond to the "gold standard" for the treatment of advanced pancreatic cancer. PharmaCyte said that there are few options for further treatment available to those patients, and even those treatments are only marginally effective.

Interestingly, it was a team of world renowned oncologists, who are advising/consulting with the company on what is the best way to utilize PharmaCyte's technology, that believe that the biotech's treatment (Cell-in-a-Box<sup>®</sup> capsules + low-doses of ifosfamide) "could play an important role in what has been termed a 'consolidation therapy' in the further treatment of patients." It is those patients whose tumors neither progress nor show signs of tumor reduction that there is no effective treatment alternative beyond the current "gold standard." It is believed by these oncologists and by the company that PharmaCyte's treatment for pancreatic cancer may fill this critical unmet medical need for these patients.

It is this term, "consolidation therapy," that caught our eye. It now appears that PharmaCyte has been advised that its treatment could work in concert with Abraxane plus gemcitabine in some way as part of a treatment regimen that offers patients a better option than what is available to patients today beyond the current standard of care (Abraxane plus gemcitabine). If the company is able to produce significant data during its clinical trial, is there a chance that PharmaCyte could become part of what oncologists worldwide prescribe to their advanced pancreatic cancer patients? If so, this new trial design is a homerun for PharmaCyte.

The company also mentioned that it would be conducting its planned clinical trial for the pain

associated with advanced pancreatic cancer tumors, as part of the company's upcoming clinical trial. This is another brilliant move by the executives at PharmaCyte. By using the patients enrolled in its upcoming clinical trial to study the pain associated with pancreatic cancer, PharmaCyte is dramatically reducing the time and the money it will have to spend to study this important "Quality of Life" treatment, and at the same time, potentially creating even stronger data to present to the FDA from the clinical trial about to take place.

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