Anpac Bio-Medical Science Company Ltd. Abstract:

## Investigations on Non-Small Cell Lung Cancer Screening

Sub-category: Cancer Prevention

<u>Category:</u> Cancer Prevention, Genetics, and Epidemiology

Meeting: 2015 ASCO Annual Meeting

Abstract No: e12587

Citation:

J Clin Oncol 33, 2015 (suppl; abstr e12587)

Author(s): Xuedong Du, Jiasong Ji, Jingjing Song, Zhongwei Zhao, Jianfei Tu, Xiaoxi Fan, Xing Tang, Da Lou, Hongmei Tao, Yue Lin, Chris Chang Yu; AnPac Bio-Medical Science and Technology Co.,LTD, Shanghai, China; Interventional department of Lishui central hospital,the Fifth affiliated hospital of Wenzhou medical university, the Southern Research Institute of Imaging,Zhejiang province,China., Lishui, China; Anpac Bio-Medical Science Co Ltd, Shanghai, China

## Abstract:

**Background:** Non-small cell lung cancer (NSCLC) is one of the most common cancers in the world. The high mortality rate of lung cancer is partly due to that current image-based technologies are not sensitive enough to screen early lung cancer incidences. A new cancer diagnostics method, named Cancer Differentiation Analysis Technology (CDA hereafter), was developed for diagnosis of lung cancer. In CDA technology, multi-level and multi-parameter data information including protein fragments and cellular information are collected while most existing technologies are single parameter technology, e.g. bio-marker and gene test. **Methods:** Three groups of samples were investigated, NSCLC group (383 samples), non-cancerous lung disease group (103 samples) and control group (149 samples). Samples used in this investigation were whole blood collected via syringe containing EDTA anticoagulant. CDA data were then collected and the differences in CDA data distribution among NSCLC group, non-cancerous lung disease group and control group were investigated. **Results:** Test results are shown in Table 1, which exhibited significant statistical difference with P value < 0.05 between any 2 groups in T test. Based on initial data, the sensitivity and specificity of CDA technology for lung cancer test appears to be higher than that of existing technologies, reaching 87.7% and 79.9% respectively.

**Conclusions:** CDA technology is a promising technology for lung cancer diagnostics. It is able to distinguish control group, non-cancerous disease group and NSCLC group, with sensitivity and specificity higher than existing technologies.

CDA rest results of three Groups of Samples			
Sample Group	Sample Size	CDA Mean(Rel. Units)	CDA Stdev
Control Group	149	34.09	5.23
Non-Cancerous Disease	103	44.77	9.44
NSCLC Group	383	48.93	7.41

## **CDA Test Results of Three Groups of Samples**