

Supplementary Materials 3:

Dual role of TNF and LT α in carcinogenesis as implicated by studies in mice

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Table S3. Recent clinical trials on cancer treatment involving TNF administration or its blockade

Type of cancer	Target cytokine/ cytokine receptor	Drug/ treatment	Additional drugs/ treatments	Outcome	Ref.	NCT trial number and year of study start
Melanoma	TNF	rhTNF	Melphalan, ILP	<ul style="list-style-type: none"> Phase III trial: The addition of TNF to melphalan did not demonstrate a significant enhancement of short-term response rates over melphalan alone by the 3-month follow-up. TNF plus melphalan was associated with a higher complication rate. 	[1]	NCT00003789 (1999)
			Melphalan, IFN γ , hyperthermic ILP	<ul style="list-style-type: none"> Phase III trial: ILP with TNF/IFNγ/melphalan is more effective (CR rate was 72%) then ILP with only melphalan (CR rate was 58%). ILP with TNF/IFNγ/melphalan can be safely performed with mostly mild side effects. 	[2,3]	NCT00001296 (1992)
		L19TNF (recombinant fusion protein that consists of fully human recombinant monoclonal antibody (L19) and the human TNF)	L19IL2	<ul style="list-style-type: none"> Phase II trial: Intralesional injection of L19-IL2 and L19-TNF slowed down metastases progression. Treatment was well tolerated, with mostly mild side effects limited to injection site. 	[4]	NCT02076633 (2012)
Colorectal Cancer	TNF		No	<ul style="list-style-type: none"> Phase I/II trial: No objective tumor responses. The maximally tolerated dose (MTD) was not reached. Intravenous L19-TNF was safe up to 13 μg/kg. 	[5]	NCT01253837 (2007)

Colorectal Cancer, Head and Neck Cancer, Kidney Cancer	TNF	NGR-hTNF (CNGRC peptide-TNF conjugate)	No	<ul style="list-style-type: none"> Phase I trial: No objective responses were observed. NGR-hTNF was well tolerated. The MTD was 45 µg/m². 	[6]	NCT00098943 (2004)
Diffuse large B-cell lymphoma	TNF		Rituximab, doxorubicin, cyclophosphamide, vincristine, prednisone	<ul style="list-style-type: none"> Phase II trial: Fast and prominent tumor regression was observed in 9 of the 12 assessed patients. NGR-hTNF selectively increased vascular permeability in tumoral/peritumoral areas. The NGR-hTNF/R-CHOP* combination was well tolerated. 	[7]	NCT03536039 (2016)
Hematological cancers	Anti-TNF, anti-LTα ₃	Etanercept (fusion protein that consists of extracellular binding domain of the 75kD TNFR2 and the constant portion of human IgG1)	Methylprednisolone	<ul style="list-style-type: none"> Phase II trial: Etanercept in combination with corticosteroids (methylprednisolone) was associated with high response rates and overall survival in children with IPS. Etanercept was well tolerated. 	[8]	NCT00309907 (2006)
Myelodysplastic Syndromes	Anti-TNF, anti-LTα ₃		Azacitidine	<ul style="list-style-type: none"> Phase I/II trial: Etanercept increased the response rate and the duration of response observed with azacitidine therapy. Most of the side effects were qualified as mild. 	[9]	NCT00118287 (2005)
Non-melanoma Skin Cancer	TNF	L19TNF (recombinant fusion protein that consists of fully human recombinant monoclonal antibody (L19) and the human TNF)	L19IL2	-	NP	NCT04362722 (2020)
Melanoma	Anti-TNF	Certolizumab (PEGylated humanized antigen-binding fragment (Fab') of an anti-TNF monoclonal antibody) [10]	Nivolumab, Ipilimumab	-	NP	NCT03293784 (2017)
		Infliximab (chimeric monoclonal antibody)				

TNF – tumor necrosis factor, rhTNF – recombinant human tumor necrosis factor, ILP – isolated limb perfusion, IFN γ – interferon-gamma, CR – complete responses, hTNF – human tumor necrosis factor, MTD – maximum tolerated dose, LT α_3 – lymphotoxin α , IPS - idiopathic pneumonia syndrome, NP – not published.

*R-CHOP is an acronym that stands for combination of drugs used in chemotherapy: R – Rituximab, C – Cyclophosphamide, H – Doxorubicin Hydrochloride (Hydroxydaunomycin), O – Vincristine Sulfate (Oncovin), P – Prednison.

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