



TALL-104

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The TALL-104 cell line is a novel cell therapy approach to cancer treatment. The TALL-104 cells line is a lethally irradiated, non-proliferating, cloned human T-cell line which has MHC non-restricted killer cell activity against a broad range of tumours and does not react with normal cells.

The TALL-104 cell line was established from a blood sample obtained from a 2 year old Caucasian with high risk T acute lymphoblastic leukaemia/lymphoma in the labs of the Wistar Institute. It has shown to have activity against both hematologic and solid human tumours transplanted into SCID mice, including glioblastoma, prostate, lung, melanoma, and breast cancer. TALL-104 is also an effective adjuvant treatment for osteosarcoma and metastatic mammary carcinoma. The cell line has undergone cGMP process development and has been tested in two Phase I clinical trials involving 15 patients with metastatic breast cancer and 13 paediatric patients affected by refractory leukaemia. A Phase II clinical trial has been recently completed in 15 patients with peritoneal carcinosis due to ovarian cancer and carcinoma of the gastrointestinal tract. The cells were infused either IP and IV and adverse effects from TALL-104 cell therapy were generally minimal, and often of uncertain relationship to cell infusions. A clinical response was observed in a high percentage of the patients, despite the advanced clinical stage of the tumours treated.

Ovarian cancer is cancer of the ovaries (two organs in the female reproductive system that produce eggs). Most ovarian cancers occur in women over the age of 50 years. Due to the absence of symptoms in the early stages of the disease, the majority of patients are diagnosed when the cancer has started to spread to other parts of the body. Ovarian cancer is a life-threatening disease that is associated with poor long-term survival and amounts to 3% of the common gynaecological malignancies among women.

To date, no targeted agents have been approved for ovarian cancer therapy. The firstline standard of care is surgery followed by carboplatin/paclitaxel chemotherapy. Surgery involves the removal of the affected ovary and the fallopian tube, followed by chemotherapy or radiotherapy. To do so, however, represents a risky decision as

childbearing options are few after chemotherapy.

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