**Supplement table no. 3: Course of disease case no 3 (modified according to20)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **Date** | **Therapy** | **Staging** |
| **2012** | 08/2012 |  | initial diagnosis of a NET G2 of the pancreas tail withliver, lymph node, spleen, adrenal metastases and peritoneal carcinomatosisSynaptophysin+, CD56+, CK20+Ki-67 20% |
|  | 08/2012-06/2013  | FOLFOX |  |
| **2013** | 06/2013 |  | PD |
|  | 06/2013-01/2017 | CAP/TEM |  |
| **2016** | 10/2016 |  | PD (hepatic progression) |
|  | 10/2016 | liver biopsy | NEC G3Ki-67 50%, PD-L1 30% |
|  | 10/2016 | brachytherapy |  |
| **2017** | 01-04/2017   | everolimus |  |
|  | 04/2017 |  | PD |
|  | 04-05/2017 | FOLFIRI |  |
|  | 06/2017 |  | PD  |
|  | 06/2017 | liver biopsy | NEC G3Ki-67 35%  |
|  | 07/2017-  | pembrolizumab |  |
|  | 10/2017-01/2020 |  | PR |

neuroendocrine carcinoma (NEC), partial remission (PR), progressive disease (PD), capecitabin/temzolomide (CAP/TEM), single nucleotide variant (SNV)