**Supplement table no. 5: Course of disease case no 5**

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| --- | --- | --- | --- |
| **Year** | **Date** | **Therapy** | **Staging** |
| **2015** | 04/2015 |  | initial diagnosis of a NET G3 of the pancreas head withlymph node metastasessynaptophysin+, chromogranin+, SSTR2, CDX2+Ki-67 26% |
|  | 04/2015 | partial pancreaticoduodenectomy with partial resection of the stomach |  |
|  | 09/2015 |  | initial diagnosis of liver metastases |
| **2016** | 02-04/2016 | STU/5FU |  |
|  | 06-09/2009 | CAP/TEM |  |
|  | 09-12/2016 | FOLFOX-IV |  |
|  | 12/2016 |  | PD |
| **2017** | 01-07/2017 | everolimus |  |
|  | 07/2017 |  | PD |
|  | 08/2017 | liver wedge resection | no mutation in MSH2, MSH6, PMS2PD-L1 + in 5%. RET+ (08/17) |
| **2018** | 03-05/2018 | pembrolizumab |  |
|  | 06/2018 |  | death due to multiorgan failure |

neuroendocrine Tumor (NET), progressive disease (PD), capecitabin/temzolomide (CAP/TEM)