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# Syncromune®<sup>®</sup>, Inc. Presents Innovative SYNC-T™ Combination Immunotherapy Approach at Major European Interventional Oncology Conference

Novel procedure combines image-guided tumor cryolysis with intratumoral immunotherapy infusion, with early clinical findings in metastatic prostate cancer

FORT LAUDERDALE, Fla., April 29, 2026 (GLOBE NEWSWIRE) -- Syncromune<sup>®</sup>, Inc., a clinical-stage biopharmaceutical company advancing SYNC-T™, an investigational platform combination immunotherapy for metastatic solid tumor cancers, today presented an oral presentation at the 2026 European Conference on Interventional Oncology (ECIO) in Basel, Switzerland. The oral presentation reflects continued clinical and scientific interest in the SYNC-T platform as development progresses.

The presentation, titled “Abscopal effects of an Image-Guided Percutaneous Combination Device/Drug Immunotherapy Approach to Metastatic Prostate Cancer,” was delivered by Stephen Kee, M.D., EVP, Clinical Medical & Business Operations, EMEA, at Syncromune. Dr. Kee described the minimally invasive outpatient SYNC-T combination drug/device immunotherapy procedure, noting that a single needle/infusion sheath device is placed percutaneously under image guidance into the center of a target tumor, either primary or metastatic. A cycle of partial cryolysis is then performed to disrupt tumor cell membranes and release tumor-derived antigens into the tumor microenvironment (TME), facilitating immune recognition. Immediately following lysis, a fixed dose of the multi-target drug SV-102 is infused through the same device into the zone of lysis where it co-locates with tumor antigens in the TME.

The infusion volume is designed to promote the flow of tumor antigens and SV-102 into regional lymphatics, where they synchronize location with immune cells. This synchronization approach is

intended to create conditions for T cell activation and a systemic anti-tumor response, also known as an abscopal effect. SYNC-T's intratumoral delivery enables effective high dose local drug concentrations while limiting systemic exposure, which may reduce immune-related toxicity.

"ECIO brings together experts who understand the clinical implications of innovative cancer therapies like SYNC-T," said Stephen Kee, M.D., presenter of the ECIO oral presentation and EVP, Clinical Medical & Business Operations, EMEA at Syncromune. "Today's presentation highlights the distinct procedural logic of SYNC-T: combining partial cryolysis and intratumoral infusion through a single device using an image-guided percutaneous method. This novel approach has the potential to drive systemic anti-tumor responses, including regression of metastatic lesions, while maintaining a favorable tolerability profile."

Charles Link, M.D., Executive Chairman and Chief Innovation Officer of Syncromune added: "SYNC-T is designed to integrate cryolysis with a precisely coordinated immunomodulatory biologic, through a streamlined minimally invasive procedure intended to generate systemic anti-tumor effects. The Phase 1 clinical findings reviewed today continue to support the potential of the SYNC-T platform as we advance our ongoing Phase 2 LEGION-100 trial in patients with metastatic castration-resistant prostate cancer and support the broader potential of the platform across metastatic solid tumors."

The presentation also reviewed previously reported preliminary Phase 1 findings supporting the clinical rationale for the approach. In a single-arm study of 15 patients with metastatic prostate cancer, SYNC-T Therapy SV-102 demonstrated an overall response rate of 87%, including complete responses in 53% of patients. Among the 13 patients with bone metastases at baseline, all bone metastases resolved in seven patients (54%), as confirmed by imaging. Median time to response was 2.9 months, median duration of response was 12.1 months, and median overall survival had not been reached at 17.2 months of follow-up.

Previously reported safety findings were also reviewed. A total of 41 treatment-emergent adverse events were observed in 13 patients, with 95% graded 1 or 2. The most common events were hematuria and fever. Two Grade 2 immune-related adverse events and two Grade 3 treatment-emergent adverse events were reported, with no Grade 4 or 5 events observed.

Syncromune is advancing SYNC-T Therapy SV-102 in the ongoing Phase 2 LEGION-100 study (NCT06533644), which is actively enrolling across multiple sites in the U.S. Please visit [www.legion100trial.com](http://www.legion100trial.com) to learn more.

## **About Syncromune<sup>®</sup> and SYNC-T<sup>™</sup> Therapy**

Syncromune is a privately held, clinical-stage biopharmaceutical company dedicated to the development of SYNC-T, a potentially first-in-class platform immunotherapy designed to address major unmet medical needs and treatment challenges of metastatic solid tumor cancers. SYNC-T is an in situ personalized cancer therapy engineered to synchronize the location of three components critical to T cell activation and an anti-tumor immune response. The platform features a novel proprietary needle-like device delivery system that is optimized for combination drug/device immunotherapy. First, the system lyses a portion of a target tumor via a proprietary freeze/thaw method to rupture tumor cells and release patient-specific tumor antigens into the tumor microenvironment (TME) that helps to activate the immune system. Next, the delivery system facilitates the infusion of our proprietary multi-target biologic drug directly into the lysed area of the tumor. This approach of location synchronization is designed to unite the three critical components of patient-specific tumor antigens, immune cells, and our multi-target biologic drug together in the draining lymphatics where the immune system optimally functions. The combination therapy targets numerous mechanisms of cancer, promoting in situ immune activation while also battling immune suppression and minimizing systemic drug exposure. The goal is to activate T cells that can recognize and attack both primary and metastatic tumors throughout the body and defend with immune memory. Our lead candidate, SYNC-T Therapy SV-102 for metastatic castration-resistant prostate cancer (mCRPC), is being evaluated in the LEGION-100 U.S., multicenter, Phase 2 trial. For more information, please visit [www.legion100trial.com](http://www.legion100trial.com).

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be identified by phrases such as “plans,” “intends,” “believes,” “expects,” “anticipates,” “foresees,” “forecasts,” “estimates” or other words or phrases of similar import. Similarly, statements herein that describe our business strategy, outlook, objectives, plans, intentions or goals also are forward-looking statements. All such forward-looking statements are subject to certain risks and uncertainties that could cause actual results to differ materially from those in the forward-looking statements. Accordingly, you should not place undue reliance on our forward-looking statements. The forward-looking statements contained in this press release or expressed orally in connection herewith are made only as of the date of this press release and we undertake no obligation to update the forward-looking statements to reflect subsequent events or circumstances, except as required by applicable law. None of Syncromune, Inc., its affiliates or their respective directors, officers, employees or agents gives any representation or warranty, express or implied, as to: (i) the achievement or reasonableness of future projections, management targets, estimates or prospects contained in this press release; or (ii) the accuracy or completeness of any information contained in this press release, any other written information or oral information provided in connection herewith or any data that any of them generates. The forward-looking statements regarding the anticipated timing and results of clinical trials, the potential therapeutic benefits and future development of SYNC-T Therapy SV-102, and the Company’s clinical and regulatory plans are based on current expectations and assumptions but are subject to risks and uncertainties. Actual results may differ materially from those expressed or implied due to various factors, including the early-stage nature of our clinical data, the small sample size of our Phase 1 study (n=15), and the possibility that results from our ongoing Phase 2 LEGION-100 trial may not be consistent with the observations from the Phase 1 study. Additional risks include, but are not limited to, challenges in clinical trial enrollment and execution, regulatory approval processes, manufacturing and supply risks, and the inherent uncertainties of biotechnology product development. This press release was prepared by us for informational purposes only and does not constitute an offer, or solicitation of an offer, to sell any securities at any time. None of Syncromune’s securities have been registered under the Securities Act of 1933, as amended, or any state securities law. Such securities have not been approved or disapproved by the Securities and Exchange Commission or by any state securities regulatory authority, nor has the Securities and Exchange Commission or any such state authority passed on the accuracy or adequacy of this press release. Any representation to the contrary is a criminal offense. Some of the information contained in this press release may be derived from information provided by industry sources. We believe that such information is accurate and that the sources from which it has been obtained are reliable; however, we cannot guarantee the accuracy of such information and have not independently verified such information.

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