

Exhibit 3. NON-TECHNICAL ABSTRACT

Prostate cancer is the leading cancer diagnosis in men above 50 years of age in the United States. Although definitive radiation therapy is the most frequently used treatment for localized disease in America, 30% of patients will experience evidence of recurrence during the first 5 years following treatment. Once disease recurs following initial regional therapy, there is no single treatment which consistently prolongs survival in a significant way in the majority of patients. Consequently, the proposed phase I trial is of enormous potential significance. If the vaccine therapy proposed for a phase I trial in this document is ultimately proven effective or if it is ultimately shown to be effective in combination with other therapy in advanced disease, this therapy could be of value for men with high risk disease in the adjuvant setting as well as in the instance of advanced recurrent disease. In addition, since the overexpression of the hMUC-1 antigen correlates with an aggressive clinical phenotype (inclusive of resistance to radiation, chemotherapy) and is also associated with an increased probability of metastatic disease, it is a suitable target for immunotherapy. Since MUC-1 to which the vaccine induces an immune response is overexpressed in carcinomas of the lung, colon, ovary, cervix, endometrial, stomach, pancreas and breast as well as prostate, it is conceivable that this vaccine could have relevance for the treatment of these neoplasms as well.