



Phase II study of paclitaxel combined with capecitabine as second-line treatment for advanced gastric carcinoma after failure of cisplatin-based regimens

Submitted by Emmanuel Lemoine on Fri, 07/18/2014 - 09:39

Titre	Phase II study of paclitaxel combined with capecitabine as second-line treatment for advanced gastric carcinoma after failure of cisplatin-based regimens
Type de publication	Article de revue
Auteur	Baize, N. [1], Abakar-Mahamat, A. [2], Mounier, N. [3], Berthier, F. [4], Caroli-Bosc, François-Xavier [5]
Editeur	Springer Verlag
Type	Article scientifique dans une revue à comité de lecture
Année	2009
Langue	Anglais
Date	2009/07/01
Numéro	3
Pagination	549 - 555
Volume	64
Titre de la revue	Cancer Chemotherapy and Pharmacology
ISSN	0344-5704
Mots-clés	Advanced gastric cancer [6], Cancer Research [7], Capecitabine [8], Oncology [9], Paclitaxel [10], Pharmacology/Toxicology [11], Second-line chemotherapy [12]
Résumé en anglais	<p>Purpose To determine the safety and the efficacy of paclitaxel and capecitabine as second-line combination chemotherapy after failure of platinum regimens in advanced gastric cancer. Methods Patients with histologically proven gastric cancer and measurable metastatic disease received capecitabine 825 mg/m² twice daily (1,650 mg/m² per day) on days 1-14 and paclitaxel 175 mg/m² by intravenous infusion on day 1 every 3 weeks until disease progression or unacceptable toxicities. Results Between June 2003 and October 2005, 26 patients, of median age 59 years (range 41-84 years) were included in the study and were treated by paclitaxel/capecitabine combination. Overall response rate was 34.6% (95%CI = 17.2-55.7%) with one complete response and 42.3% (95%CI = 17.2-55.7%) of patients achieved a stable disease. Median progression-free survival was 4.5 months (95%CI = 4-4.5 months). Median overall survival was 7.5 months (95%CI = 6-10 months). Cumulated overall survival including cisplatin regimens was 15.5 months (95%CI = 11-18 months). Grade 3/4 adverse events included alopecia (30.8%), neutropenia (11.5%), hand foot skin reaction (11.5%), neuropathy (11.5%), arthralgias (7.5%), and anemia (3.8%). Conclusions Paclitaxel and capecitabine combination was safe and effective in advanced gastric cancer after failure of cisplatin regimens. The cumulated overall survival of 15.5 months suggests a particular interest of taxanes in second-line treatment after failure of platinum salts.</p>
URL de la notice	http://okina.univ-angers.fr/publications/ua3466 [13]

DOI 10.1007/s00280-008-0903-7 [14]
Lien vers le document <http://dx.doi.org/10.1007/s00280-008-0903-7> [14]

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- [14] <http://dx.doi.org/10.1007/s00280-008-0903-7>

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