## abstracts

## P – 154 Real life triplet FIr/FOx chemotherapy in first line metastatic pancreatic ductal adenocarcinoma: Recommended schedule for expected activity and safety and phase II study

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Introduction: Gemcitabine/nab-paclitaxel and FOLFIRINOX demonstrated significantly increased survival vs gemcitabine in metastatic pancreatic ductal adenocarcinoma (PDAC): objective response rate (ORR) 23 and 31.6%, progression-free survival (PFS) 5.5 and 6.4 months, overall survival (OS) 8.7 and 11.1 months. Phase II study investigated first line triplet FIr/FOx.

Methods: Simon two-step design: p0 10%, p1 30%, power 80%, α 5%, β 20%. Projected ORR: I step, 1/10; II 5/29. Schedule: 12h-timed-flat-infusion/5-fluorouracil 750-800-900 mg/m2 d1-2,8-9,15-16,22-23; irinotecan 120-140-160 mg/m2 d1,15; oxaliplatin 70-80 mg/m2 d8,22; every 4 weeks, according to clinical parameters (age, comorbidities, performance status (PS), liver function). Activity, efficacy were evaluated, compared using log-rank; limiting toxicity syndromes (LTS) using chi-square. **Results:** Twenty-nine consecutive patients  $\leq 65, > 65 \leq 75, \geq 75$  years enrolled, discriminated according to primary/intermediate/secondary Cumulative Illness Rating Scale (CIRS). Median age 62; elderly 13 (44.7%); PS2 3 (10.4%), secondary CIRS 5 (17.2%). Primary endpoint was met: OR 7/13 as-treated (53%), 50% intent-to-treat. Cumulative G3-4 toxicities: diarrhea 17%, asthenia 14%, vomiting 3%, hypertransaminasemy 7%, mucositis 7%, anemia 3%, thrombocytopenia 3%. LTS: 27.5% overall, 38.4% in elderly, multiple vs single site not significantly different. At 3 months followup, PFS 4 months, OS 11 months, not significantly different in elderly vs non-elderly. PFS and OS not significantly different according to dosage, tumor location, metastatic sites. PS2 patients showed significantly worse OS (P 0.022).

**Conclusion:** Intensive first-line triplet FIr/FOx is tolerable at adapted doses, confirms high activity/efficacy in metastatic PDAC. Careful selection of patients, PS2 exclusion, to maintain safety profile and efficient dose intensity can increase OS, compared to gemcitabine, in real life.