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L01 ANTINEOPLASTIC AGENTS

EFFECTIVENESS AND SAFETY OF LIPOSOMAL IRINOTECAN IN THE TREATMENT OF METASTATIC PANCREATIC CANCER IN ROUTINE CLINICAL PRACTICE

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BACKGROUND AND IMPORTANCE

Metastatic pancreatic cancer (mPC) has a very poor prognosis and limited treatment options. The regimen of liposomal irinotecan in combination with fluorouracil and folinic acid (NALIRI) has proven effective. However, data from real-world clinical practice remain scarce.

AIM AND OBJECTIVES

To evaluate the effectiveness and safety profile of NALIRI in patients with mPC under normal clinical practice conditions.

MATERIALS AND METHODS

Observational, retrospective, single-centre study

December-2016-April-2025

Electronic medical records and R software (v 4.2.2)

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- Demographic data
- Location of metastases
- Previous treatments
- Functional status (ECOG)
- Duration of treatment
- Follow-up time
- Tolerance

→

EFFECTIVENESS

RECIST criteria
Progression-free survival (PFS)
Overall survival (OS)

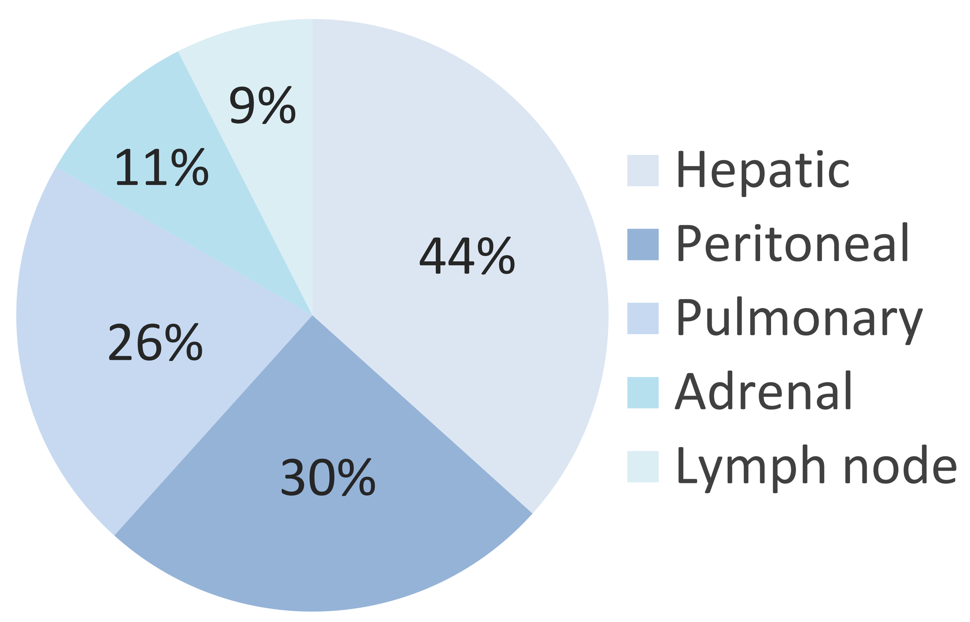
TOXICITIES

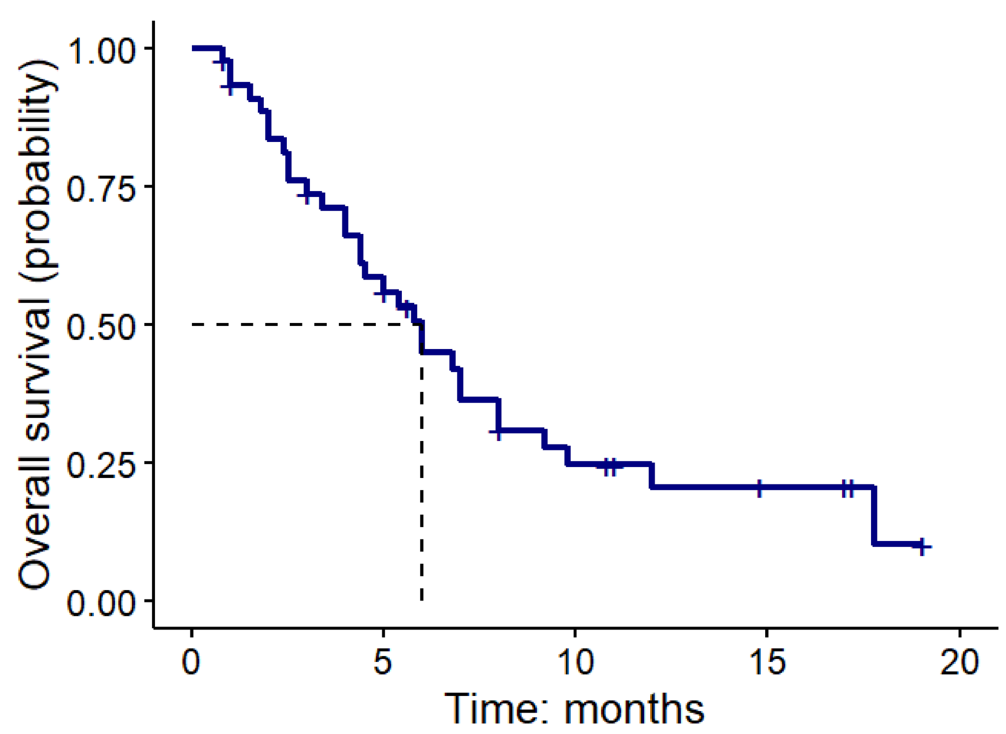
CTCAE v5.0.

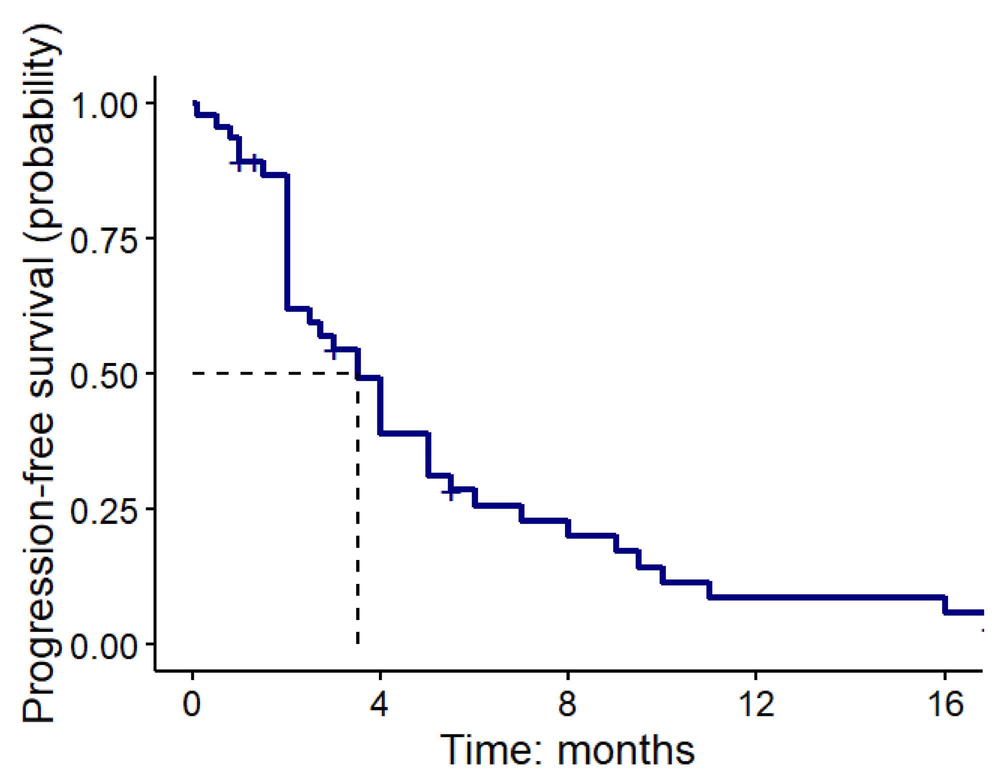
RESULTS

N = **46** (**52% women**)
Median age = **65.50 years** (45-80)

METASTASES







- **22%** had undergone surgery
- **40** patients gemcitabine-nabpaclitaxel as first-line treatment
- **72%** patients NALIRI as second-line treatment
- ECOG at the start of treatment : **0 (13%)**, **1 (65%)**, **2 (20%)**
- Median follow-up: **5 months** (1-19)
- Median duration of treatment: **2.5 months** (0.5-17)
- At the end of the study, **35** patients had died

TOXICITIES

90% experienced some AR:

- Gastrointestinal (**67%;** 5 cases G3)
- Haematological (**59%;** 1 G4 and 3 G3)
- Asthenia (**63%**; 1 G4 and 5 G3)

- **17** dose reductions
- **19** treatment delays
- **12** suspensions due to toxicity

CONCLUSION AND RELEVANCE

The effectiveness of NALIRI was comparable to NAPOLI-1 trial. NALIRI showed a high incidence of adverse effects, which in many cases required dose adjustments or treatment discontinuation.