

# Analysis of first-line treatment in the elderly with metastatic colorectal cancer

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**Background and importance:** The increase in life expectancy, the higher incidence of cancer in elderly patients and the lack of clinical trials in these patients makes it necessary to carry out studies that allow us to know the effect and safety of the treatments.

**Aim and objectives:** To analyse the effectiveness and safety of first-line treatment of metastatic colorectal cancer (CRCm) in the elderly treated in a third level hospital.

**Material and methods:** observational, retrospective

 **Patients:** ≥75 with CRCm, who received chemotherapy treatment in 2017

 **Variables:** type of treatment, Progression-Free Survival (PFS), Overall Survival (OS), dose reductions, and treatment delays due to adverse events.

**Results:**  59 patients: 71,2% men. Median age: 76 (75-84)

## Clinical Features

- **Location:** 41/59 colon
- **Metastases location:** 26/59 hepatic, 11/59 pulmonary, 9/59 hepatic and pulmonary, and 13/59 in other locations

## Treatment

- **Schemes:** 9
  - **Schemes in combination:** 50/59
  - **Monotherapy Schemes:** 9/59
  - **Target therapies:** 36/59
- Median cycles administered: 10**

## Effectiveness

Response type	
Complete	6/59
Partial	29/59
Stable	17/59
Progression	7/59

SLP: 12 months

SG: 30 months

## Safety

Initial dose Reduction	23/59
Dose Reduction	34/59
Delay treatment	30/59

**Adverse events >50%:** Asthenia, peripheral neuropathy, diarrhoea, and palmoplantar erythrodysesthesia

\*\*Left colon tumour, no RAS mutation, tumours with degree of differentiation 1 and 2 (well differentiated), and patients rescued by surgery had better OS (p<0.05).

**CONCLUSION:** Our patients presented baseline clinical characteristics similar to the general adult population, with no tumour characteristics associated with advanced age. The effectiveness and safety were similar to those in the clinical trials, although our patients had more dose reductions. Considering the heterogeneity of patients and in the absence of clinical trials in the elderly, real-life studies can be very useful.