

CARBOPLATIN - PACLITAXEL - BEVACIZUMAB BASED TREATMENT FOR NON-SMALL CELL LUNG ADVANCED CANCER PATIENTS: USE REVIEW



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OBJECTIVES

- ▶ To know the demographic characteristics of a group of patients with advanced non squamous non-small cell lung cancer (NSCLC) who received carboplatin -paclitaxel - bevacizumab based chemotherapy in our hospital.
- ▶ Calculate the median overall survival (OS) and the median progression-free survival (PFS) of these patients.

METHODS

- ▶ Observational retrospective study: from 20/11/2008 to 31/08/2011
- ▶ To extract information about patients' characteristics and their therapy: cytostatic prescription program (Oncofarm®) and electronic medical history program (Global Clinic®).
- ▶ To determinate descriptive characteristics and survival analysis (Kaplan-Meier method): SPSS® statistics.

RESULTS

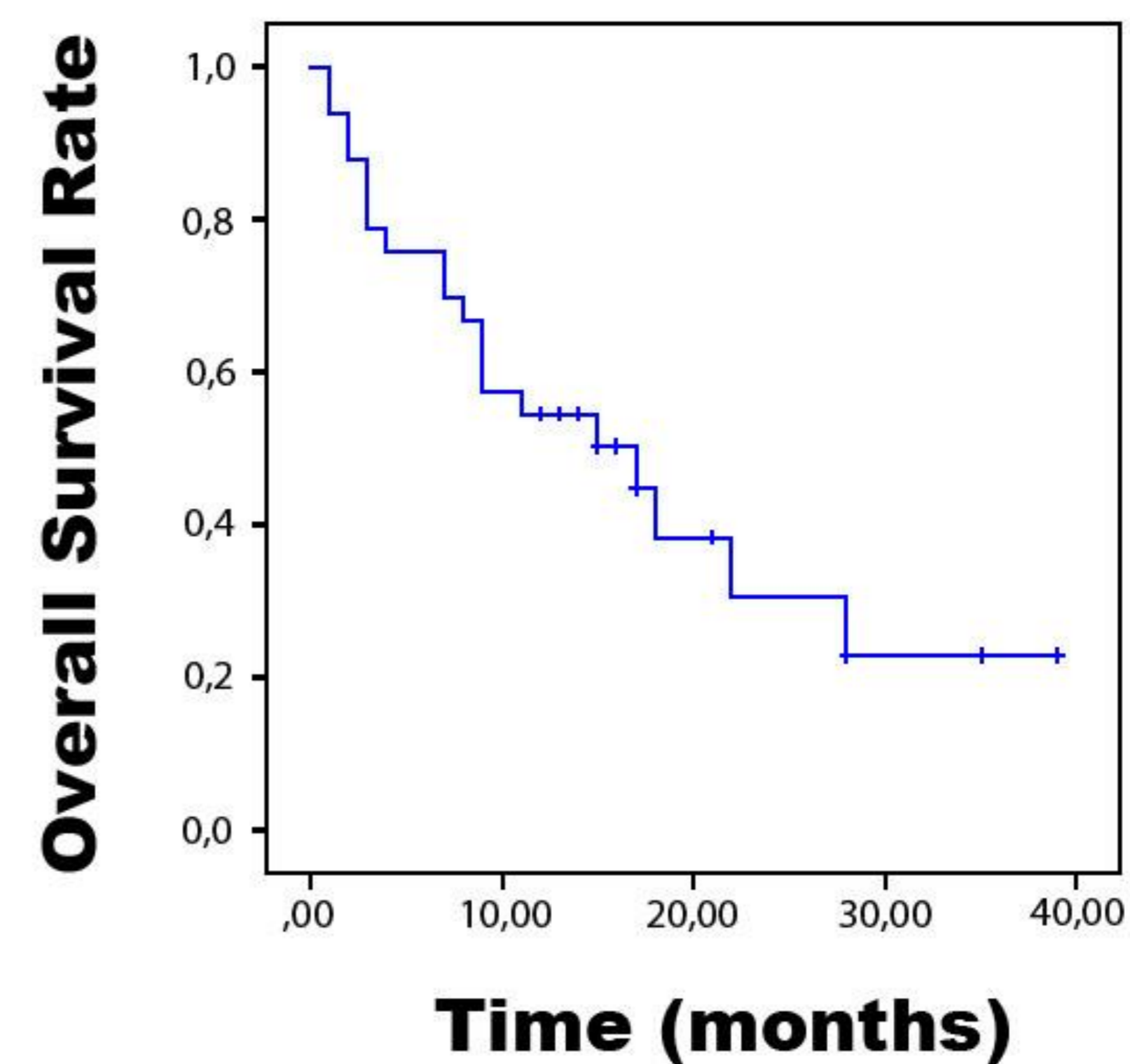
Table 1: Demographic characteristics

PARAMETERS		PATIENTS (33)
SEX	MEN	66.7 %
	WOMEN	33.3 %
AGE		56.4 years
Cancer stage at diagnosis	→ IV	100 %
PS*	0	18.2 %
	0-1	15.2 %
	1	54.5 %
	1-2	3.0 %
	2	9.1 %
Histology	Poorly-differentiated	11 patients
	Adenocarcinoma	10 patients
	Large cell carcinoma	4 patients
	Non-differentiated	4 patients
	Squamous cell**	3 patients
	Other	1 patient
Disease progression in August 2012		28 patients
Completed 6 cycles of carboplatin → paclitaxel - bevacizumab therapy		22 patients
	Continued with bevacizumab monotherapy	↓ 15 patients

* Performance status (PS)
**This therapy does not have indication for squamous cell histology but compassionate use was granted.

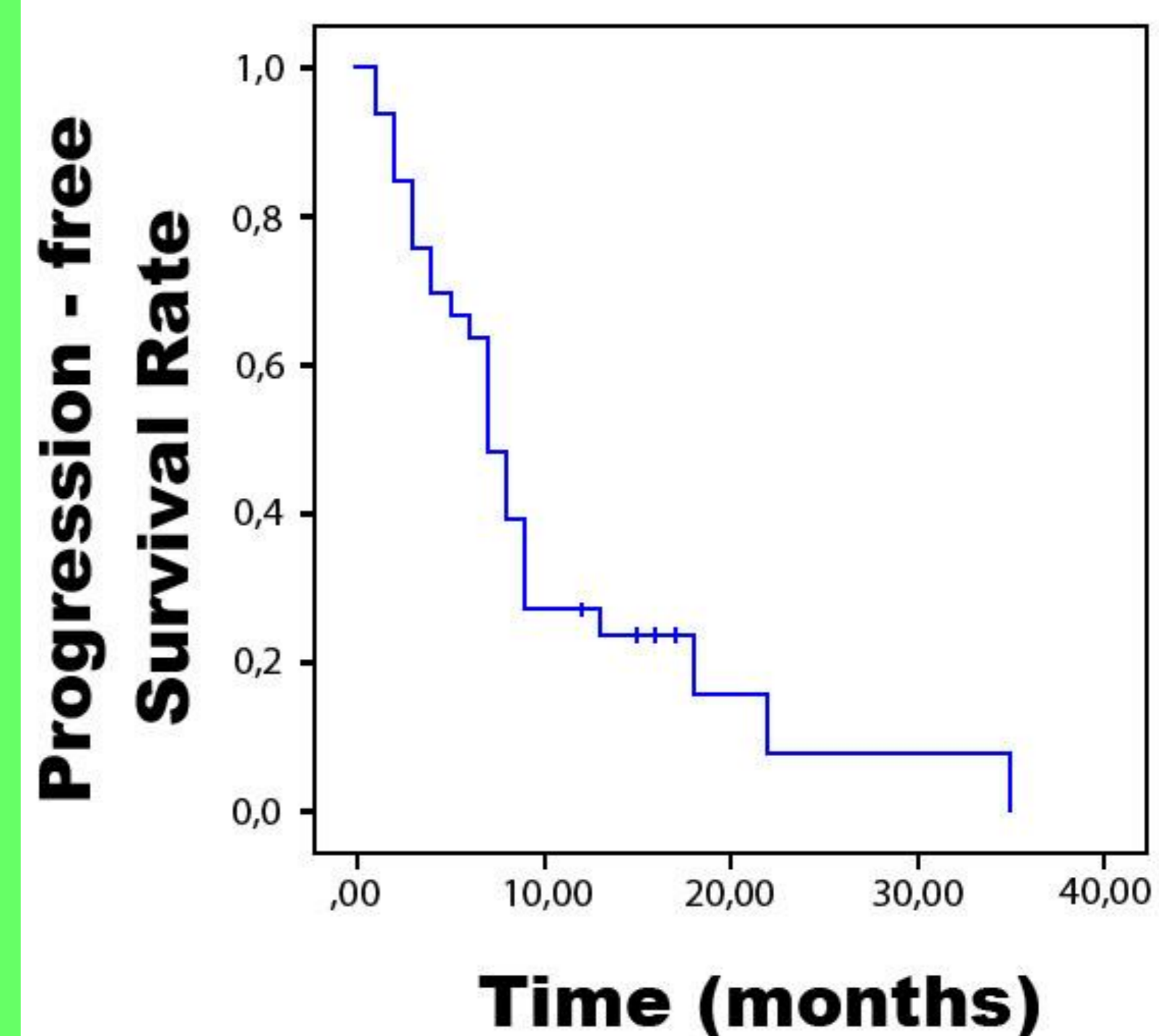
Figure 1. Kaplan – Meier curves showing overall survival (panel A) and Progression - free survival (panel B).

Panel A



Median overall survival (OS): 17.0 months (95% CI: 5.3 - 28.7)

Panel B



Median progression free survival (PFS): 7.0 months (95% CI: 5.6 - 8.4)

CONCLUSIONS

- ▶ Demographic characteristics of patients, median OS and PFS are similar to published randomized clinical trials, except for histology (adenocarcinoma is not the most frequent type in our observational study).
- ▶ The observational retrospective design, low number of patients, and dosage differences limited the extrapolation of these results.