

# HYPOMAGNESEMIA AS A POSSIBLE MARKER OF EFFICACY IN PATIENTS TREATED WITH CETUXIMAB IN HEAD AND NECK CANCER

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### BACKGROUND

It has been reported that the determination of magnesium levels could be used as a surrogate marker of efficacy in chemotherapy regimens with cetuximab.

### **PURPOSE**

We investigated hypomagnesemia caused by cetuximab as a predictor of efficacy and outcome in patients affected by head and neck cancer in first-line treatment.

## **MATERIAL AND METHODS**

Retrospective observational study (Study period: November 2008-October 2012).

Patients with head and neck carcinoma treated with cetuximab in first-line treatment, which had magnesium determinations from the start of treatment until one month after the end of treatment with cetuximab.

Hyponesemiama		Νο	Overall Survival	
during the treatment (<1,7mg/dl)	V5	Hyponesemiama	Remsission Rate	Kaplan-Meier
RESULTS			Progression Free Survival	product-limit method

► 14 patients (92.8% male)		Hypomagnesemia (n=6)	No Hypomagnesemia (n=9)	р
<ul> <li>Median age: 61 years (range: 21-86)</li> <li>Diagnosis:</li> </ul>	Remission rate	66.7%	37.5%	-
<ul> <li>Oral cavity carcinoma (28.6%)</li> <li>Laryngeal carcinoma (21.4%)</li> </ul>	Overall survival (mean; IC95%)	34,8 months (18.8-50.9)	22,4 months (11.9 -32.9)	0.532
	Progression freee survival (Mean; IC95%)	34.5 months (18.1 -50. 9)	19.7 months (7.8-31.5)	0.456

### CONCLUSIONS

Despite the small number of patients studied, hypomagnesemia could be a marker of efficacy of cetuximab in first line therapy in patients with head and neck cancer. Determination of magnesium levels should be performed routinely in patients treated with cetuximab.

