

EFFICACY AND SAFETY OF TRASTUZUMAB IN METASTATIC GASTRIC CANCER

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BACKGROUND

HER-2 protein is expressed in some metastatic gastric cancer(MGC), it's when we can use targeted therapies such as trastuzumab.

PURPOSE

Evaluate efficacy and safety of trastuzumab in the treatment of MGC and compare the results with the pivotal studies.

MATERIAL AND METHODS

Retrospective study that includes diagnosed patients with MGC and for which the treatment with trastuzumab has been evaluated (loading dose of 8 mg/kg and maintenance dose of 6 mg/kg every three weeks) in combination with cisplatin and capecitabine or fluorouracil, initiated from April 2013 to October 2016.

Data have been obtained from the Electronic Health Record(SIAS®) and dispensation module(Farmis®)

The variables were: age, sex, Herceptest® result, Karnofsky Index(IK), previous treatments, adverse effect(AE), reductions dose, progression-free survival(PFS) and overall survival(OS).

Data were compared with the results of ToGA trial for MGC(PFS median 6,7 months and OS 13,8 months).

RESULTS

The treatment has been requested for 9 patients, 3 were exitus before starting and 6 began the treatment.

The distribution of patients starting treatment was: 1 women and 5 men, average age 62 years. 83% had triple positive Herceptest® and 17% double positive. IK median was 90%(95% CI 60-90%).

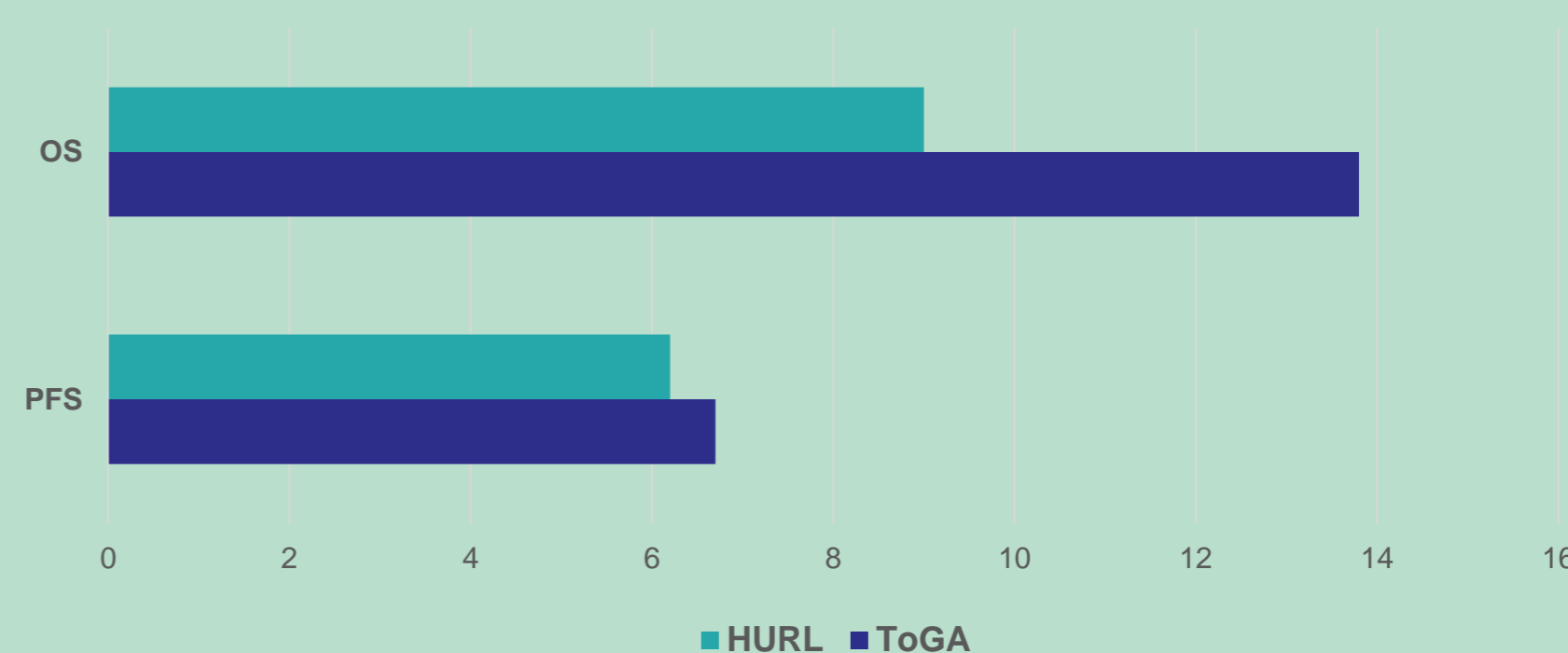
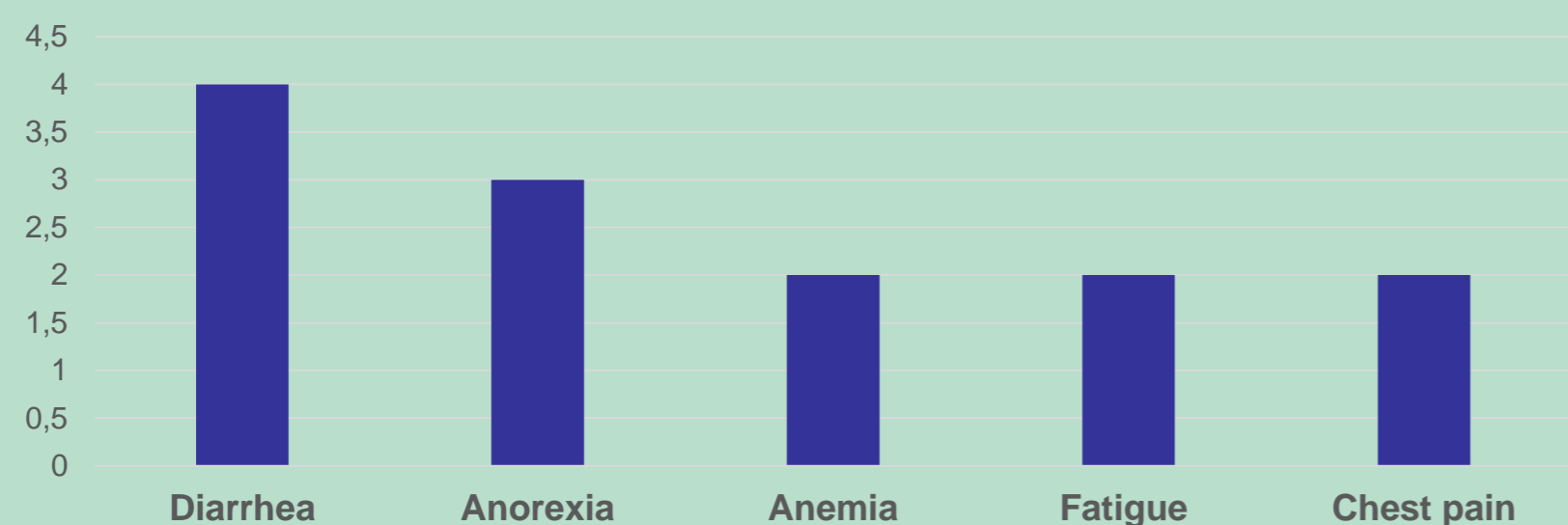
All patients who started treatment had previously received another line of therapy. The main treatments received were cisplatin-fluorouracil and capecitabine-oxaliplatin.

During treatment all patients had AE. 67% of these patients had diarrhea, 50% anorexia, and 33% anemia, fatigue and chest pain. 33% were admitted for febrile neutropenia. Other effects of with lower incidence were: alopecia, vertigo and dry mouth. These AE caused a reduction of 20% of the dose in 50% of patients.

At the time of the study, treatment was suspended to 50% of patients. The cause of discontinuation for these patients was due to progression of the disease.

The PFS median was 6.2 months (95% CI 2.1-13.07) and the OS median was 9 months (95% CI 2.8-28.23). 50% of patients were exitus.

ADVERSE EFFECT



CONCLUSION

Our results, compared with ToGA trial, show similar results in terms of PFS but a lower OS than the one obtained in this study, but we must take into account the limited sample size(n=6). Regarding the safety profile reactions described in data sheet as very frequent appeared.