Oxaliplatin, Fluorouracil and Leucovorin As Adjuvant Treatment for Stage III Colon Cancer In Ramathibodi Hospital

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Background: The standard treatment of stage III colon cancer is surgery followed by adjuvant chemotherapy. Fluorouracil (5-FU) and leucovorin (LV) were the most common and standard regimen. Adding oxaliplatin to 5-FU/LV or capecitabine has been shown the benefit in DFS and OS over 5-FU/LV alone in stage III colon cancer. Our study would like to prove the benefit of adding oxaliplatin in 5-FU/LV adjuvant treatment in stage III colon cancer in Ramathibodi hospital.

Method: We performed retrospective case-control study in stage III colon cancer patients who underwent resection followed by adjuvant chemotherapy in Ramathibodi hospital from Jan 1, 2004 – Dec 31, 2010. The primary endpoint was disease-free survival and secondary end points were overall survival and toxicity.

Results: 104 colon cancer patients were analyzed. 76 received oxaliplatin-base chemotherapy and 28 received non-oxaliplatin (5-FU/LV) regimen. The Median follow-up time was 31.9 months. 35 patients in oxaliplatin group (46.08%) had relapsed or died, as compared with 20 patients (71.42%) in the non-oxaliplatin group. Estimated 5-year DFS was 57.3% vs. 40.5% in oxaliplatin group and non-oxaliplatin group respectively. Hazard ratio was 0.633, (95% CI 0.347-1.153), P = 0.135. The absolute risk reduction (ARR) was 16.24% at 5 years. Median OS was 61.65 and 40.43 months in oxaliplatin and non-oxaliplatin group respectively. Estimated 5-year OS was 50.6% vs. 49.2% in oxaliplatin and non-oxaliplatin group respectively. Hazard ratio was 0.924, (95% CI 0.502-1.703), P = 0.801. Oxaliplatin based regimen was well tolerated. Paresthesia and neutropenia grade 3-4 was found more in oxaliplatin group, but there were no different in neutropenic fever in both groups.

Conclusion: Adding oxaliplatin with 5-FU/LV has trend to benefit especially in DFS over 5-FU/LV alone in stage III colon cancer patients who underwent resection. Our results were comparable with previous published studies. Oxaliplatin combination with 5-FU/LV should be considered as the standard of care in Thailand.