Evaluation of treatment efficacy in advanced hepatocellular carcinoma patients receiving sorafenib or cytotoxic chemotherapy in Phramongkutklao hospital; a retrospective study

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**Background:** Hepatocellular carcinoma (HCC) is the most common primary hepatic malignancy and the most common cause of death about 15,305 peoples in Thailand 2014. Prior to the 2008 cytotoxic chemotherapy were the therapeutic mainstay for advanced HCC but currently the standard treatment was sorafenib that increased overall survival. There have been very few studies supporting efficacy for chemotherapy compared to sorafenib in this setting. We assessed the efficacy of sorafenib compared with chemotherapy in advanced HCC.

**Method:** From January 2007 to December 2016, 154 patients with advanced HCC were reviewed retrospectively. Fifty-five patients received sorafenib and 99 patients received chemotherapy. We evaluated progression-free survival (PFS) for primary end point. Secondary end points were overall survival, response rate (RR) and toxicity.

**Results:** Median PFS of sorafenib was 5.0 months (95% CI 2.8-6.4) versus 2.1 months (95% CI 1.7-3) for chemotherapy (p=0.001). Sorafenib significantly increased the disease-control rate (DCR) by 50.9% and 25.3% in chemotherapy group (p=0.001). Median OS was 8.0 months (95% CI 7.0-12.9) and 4.9 months (95% CI 4.4-5.9) for sorafenib and chemotherapy groups, respectively (p=0.067). Toxicities from sorafenib were all grade hand-foot-syndrome 61.8% and all grade diarrhea 38.2%. On the other hand, the chemotherapy group was higher in all grade neutropenia 13.2%.

**Conclusions:** Advanced HCC patients received first-line palliative treatment with sorafenib increased median PFS and response rate when compare with chemotherapy but overall survival did not significantly different.