

P – 153 Regorafenib in the third-line treatment of metastatic colorectal cancer: a retrospective study of 27 cases

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Introduction: After lung and breast cancer, colorectal cancer represents the third major cause of cancer-related mortality rate worldwide in terms of frequency. The aim of our study was to provide an overview of the major epidemiological and clinical characteristics, as well as efficacy and safety of metastatic colorectal cancer (CCRM) treated with REGORAFENIB in the third line.

Methods: A retrospective study of 27 patients with metastatic colorectal cancer treated

in a medical oncology department of ORAN cancer center from July 2016 to June 2018 was completed.

Results: We have collected 27 patients with a mean age of 51 years (range 26- 76 years) with 11 women and 16 men. WHO performance status was 1 in 96% of patients. Rectal localization occurred in 59 % of cases and colon localization in 40% of cases. Among the cases, 11% were in pT2N2M1, 62% in pT3N1M1, 25% pT4N1M1. Liver metastasis occurred in 62%, lung in 37%, and peritoneal carcinomatosis in 25%. K-RAS status was performed in all patients showing wild type in 55% and mutated Ras in 45%. The first line of treatment had an average of cycles was 12 (range 3 -25). The second line of treatment had an average of cycles 10 (range 3-30). The third line of treatment had an average of cycles was 4 (range 1- 23). The dose of regorafenib was 80 mg in 12%, 120mg in 48% cases, and 160mg in 28% cases. The therapeutic results were as follows: 10 patients had stability, 6 had progression, 5 patients were lost. There were grade 3 – 4 adverse events reported, including G3 mucositis in 3%, G3 asthenia in 41%, G3 anorexia in 12%, G3 hand-foot syndrome in 11%, and hepatic dysfunction in 7%.

Conclusion: Regorafenib was a tolerated drug that was shown to be active in CCRm pre-treated with chemotherapy in the first or second line. Regorafenib is a new option for therapy in CCRm.