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Title: Efficacy and safety of full oral vinorelbine (NVBO) on D1 and D8 with carboplatin (CBDCA) as first line treatment in advanced non-small lung cancer (NSCLC) patients: Results of a prospective study in nonrandomized population of 259 patients

Prof. Dr. Jana 4342 Skrickova jskric@fnbrno.cz MD ¹, Dr. Bohdan 6195 Kadlec bkadlec@fnbrno.cz MD ¹, Dr. Ondrej 6199 Venclicek venclicek@fnbrno.cz MD ¹, Dr. Tereza 6200 Janaskova janaskova@nmv.cz MD ², Prof. Dr. Vitezslav 6206 Kolek vitezslav.kolek@fnol.cz MD ³, Dr. Ivona 6210 Grygarkova grygarkova@fnol.cz MD ³, Dr. Helena 6215 Coupkova coupkova@mou.cz MD ⁴ and Dr. Pavel 6216 Reiterer reiterer@nul.cz MD ⁵. ¹ Department of Respiratory Diseases and TB, Masaryk University Hospital, Brno, Czech Republic, 62500 ; ² Department of Respiratory Diseases and TB, Hospital Vitkovice, Ostrava, Czech Republic ; ³ Department of Respiratory Diseases and TB, University Hospital Olomouc, Olomouc, Czech Republic ; ⁴ Department of Oncology, Masaryk Memorial Institute, Brno, Czech Republic and ⁵ Department of Respiratory Diseases and TB, Hospital Usti Nad Labem, Usti Nad Labem, Czech Republic .

Body: Background The purpose was to evaluate the activity and feasibility of CBDCA together with NVBO in 1st line treatment NSCLC patients. Patients and methods 259 patients (80,7% men, 19,3% women, median age 65 years) with advanced NSCLC received NVBO 80 mg/m² on D1 and D8 with CBDCA AUC5 on D1 every three weeks. Results At inclusion was PS 0 in 18,2% PS 1 in 71,7% and PS 2 in 10,1% patients. Most patients had stage IIIB (37,5%) and stage IV NSCLC (50,2%), only 12,4% stage IIIA. Adenocarcinoma was confirmed in 20,1%, squamous-cell carcinoma in 58,7%, large-cell carcinoma in 3,1% and other in 18,4%. CR was confirmed in 0,4%, PR in 46,7%, SD in 22,4% and 30,5% progressed. Median cycles was 4, the dosage of NVBO was without changes in 61% patients, reduced was in 4,7% and escalated in 24,8%. Major toxicities (grade 3-4) were neutropenia in 26,9%, leucopenia in 19,8%, anemia in 2,7%, and thrombocytopenia in 2,3% patients. Febrile neutropenia was observed in 6,6% patients. Gastrointestinal toxicity grade 3-4 was observed in 18,4% patients. The estimated mOS was 13,8 months. and the estimated mPFS was 9,4 months by median follow-up 8,5 months. The differences between groups of pts according to PS (0+1 vs. 2) were statistically significant (p < 0,001) better for patients with PS 0+1. The differences between groups according histology were not statistically significant. Conclusions The treatment with NVBO and CBDCA was well tolerated with evidence of high antitumour activity. This combination was active in all groups patients according histology.