EFFICACY AND SAFETY OF PAZOPANIB FOR UNRESECTABLE SOFT TISSUE SARCOMA: A RETROSPECTIVE STUDY

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Background: A recent phase III trial PALETTE has shown that pazopanib significantly prolonged progression-free survival compared with placebo for patients with previously-treated soft tissue sarcoma. The aim of the present study was to clarify whether the efficacy and safety by pazopanib treatment in Japanese population are similar to those reported in the previous study.

Methods: We retrospectively analyzed best overall responses, durations of therapy and adverse events (AE) for 9 patients with soft tissue sarcoma treated with pazopanib in Tohoku University Hospital. The patients had taken pazopanib orally between December, 2012 and November, 2013.

Results: The median age of patients was 52.8 years, and 5 were male. The histological subtypes include 3 alveolar soft part sarcoma, 2 malignant peripheral nerve sheath tumor, 2 myxofibrosarcoma, 2 liposarcoma, and one undifferentiated sarcoma. The metastatic sites were lung (n = 5), peritoneum (n = 1), and brain (n = 1). Median treatment duration was 2.5 months. Best overall response was PR for 2, SD for 3, and PD for 3 patients. The all AE were observed in 89%; hypertension, anorexia, and fatigue (n = 5), hand-and-foot syndrome, diarrhea and hair color changes (n = 3), and epistaxis and liver enzyme elevation (n = 2). Grade 3 /4 AE were found in 67%; anorexia (n = 4), fatigue and diarrhea (n = 2), and AST and ALT increase (n = 1). Of them, 6 patients continued pazopanib treatment after its dose reduction. In addition, a fatal duodenal perforation and hemorrhage occurred in one patient.

Conclusion: The effect of pazopanib in our cohort was equivalent to that reported in the PALETTE study and the AE were generally tolerable, which support its usefulness for Japanese patients with unresectable soft tissue sarcoma as well. Nonetheless, our study suggests that physicians should pay enough attention to angiogenesis inhibitor-specific toxicities by pazopanib treatment, including gastrointestinal hemorrhage.