Second-line palliative chemotherapy for gastric cancer: a single center cohort analysis

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Introduction: A palliative chemotherapy has been widely used in gastric cancer in metastatic and locally advanced unresectable patients for many years, while clinical studies indicating that it can affect overall survival has been published recently. We targeted this analysis to identify the differences between the clinical practice and treatment outcomes in patients treated between 2010 and 2015 in Maria Skłodowska-Curie Memorial Cancer Center in Warsaw, Poland.

Methods: Serial database enquiries were used to collect data. We performed a cohort screening for all patients with diagnosis of gastric cancer (C16) with collection of demographic, clinical and treatment-related data.

Results: 864 patients diagnosed gastric cancer and treated with chemotherapy were identified in hospital electronic records of Maria Skłodowska-Curie Memorial Cancer Center in Warsaw, Poland. Among these, 186 patients underwent a palliative second-line chemotherapy. 109 and 50 patients were treated with irinotecan or docetaxel respectively, with similar overall survival in both groups of patients (median time to observation - 3.2 months; 95% CI 2.95-4.85). Additionally 27 patients were treated with both irinotecan and docetaxel-based therapies. This latter group is characterized with longer survival (median 7.3 months of observation – 95% CI 5.8-8.7; p < 0.002). Notable, while docetaxel is used mainly as single agent, irinotecan is used in combination with 5FU (FOLFIRI).

Conclusion: There were several trends between 2010 and 2015: 1. more frequent use of third line chemotherapy, 2. significant longer survival in patients when both docetaxel- and irinotecan-based chemotherapies are used, 3. increasing role of docetaxel in salvage treatment starting from 2013.