Oral session

Phase II study of chemoradiotherapy with docetaxel for elderly patients with stage II / III esophageal carcinoma

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Background: Definitive chemoradiotherapy (CRT) is one of the curative options for resectable esophageal carcinoma (EC). However, there are limited data on CRT in elderly patients, and it is difficult for some elderly patients to receive cisplatin chemotherapy. The aim of this prospective study was to clarify the efficacy and safety of definitive CRT with docetaxel (DTX) in elderly patients.

Methods: The eligibility criteria were as follows: clinical stage II-III (UICC 6th, non-T4) EC; performance status (PS) 0-1; age > 70; and no desire for surgical treatment. Chemotherapy consisted of 6 cycles of a 1-h infusion of DTX (10 mg/m2) repeated weekly. Radiation was concurrently applied at a dose of 60 Gy in 30 fractions. We calculated that with a sample of 37 patients, assuming that the expected and threshold for 2-year overall survival was 50% and 30% with one-sided alpha of 5% with 80% power.

Results: Between July 2008 and January 2011, 16 patients were enrolled. The study was closed prematurely due to poor accrual. The median age was 77 years; male/female: 14/2; PS 0/1: 4/12; clinical stage IIA/IIB/III: 3/4/9. Of the 16 patients, 14 (88%) completed the CRT. The median follow-up was 57.9 months. Seven patients achieved complete response (CR), resulting in a 43.8% CR rate (95% CI 19.8-70.1). 2-year overall survival was 62.5% (95% CI 38.8-86.2), with median survival time of 27.7 months (95% CI 23.4-32.0). Acute toxicities included grade 3/4 esophagitis (31%), anorexia (13%), leukopenia (6%), neutropenia (6%), thrombocytopenia (6%), mucositis (6%), and infection (6%). Grade 3 esophagitis, pleural effusion, pericardial effusion, and pneumonitis developed as late adverse events in 13%, 13%, 6%, and 6%, respectively.

Conclusions: Although efficacy of CRT with DTX for elderly patients with EC appeared to be good, high frequency of grade 3 esophagitis was observed. Some modification and alteration are needed to proceed the future clinical trial of CRT for elderly EC patients.