INFLUENCE OF GENETIC VARIANTS IN THE VITAMIN D HYDROXYLATION PATHWAY AS A RESPONSE FACTOR TO PLATINUM-BASED CHEMOTHERAPY IN NONSMALL CELL LUNG CANCER

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Background and importance

Chemotherapy based on platinum compounds is the standard treatment for non-small cell lung cancer (NSCLC) patients with EGFR wild type and is also used as second line in mutated EGFR patients.

Vitamin-D may influence chemotherapy response by inhibiting tumor progression, suppressing metastasis, cell proliferation, and angiogenesis, or promoting apoptosis.

Aim and objectives

The aim of this study was to evaluate the influence of polymorphisms in the CYP2R1 and CYP27B1 genes on the platinum based chemotherapy response in patients with NSCLC.

Results

Patients median age at NSCLC diagnosis was 62[53-67] years; 73.3% (121/165) men; 69.09% (114/165) stage IIIB-V; 59.39% (98/165) adenocarcinoma; 58.18% (96/165) family history of cancer; 24.24% (40/165) Previous lung disease; EGFR status: 52.73% (87/165) Wild type, 10.91% (18/165) Mutated, 36.36% (18/165) Unknown; 22.56% Surgery; 31.52% Radiotherapy; Chemotherapy agents: 18.29% (30/164) Gemcitabine; 21.34% (35/164) Paclitaxel; 24.39% (40/164); 35.98% (59/164). 65.85% (108/164) response; 34.15% (56/164) no response.

Patients carrying the CYP2R1-rs10741657-G allele were associated with better response (p=0.017; OR: 3.17; 95% CI: 1.19-8.42; G vs AA). However, for CYP27B1 (rs4646536, rs3782130, rs703842, rs10877012) we did not find a statistically significant association.

Conclusion and relevance

Our results suggest that CYP2R1 rs10741657 G-allele influences response in platinum-based chemotherapy in NSCLC patients. Therefore, this polymorphism could be used as a response biomarker in NSCLC patients in treatment with platinum based chemotherapy.