TRIFLURIDINE-TIPIRACIL FOR METASTATIC COLORECTAL CANCER: REAL WORLD DATA EXPERIENCE

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BACKGROUND AND OBJECTIVES

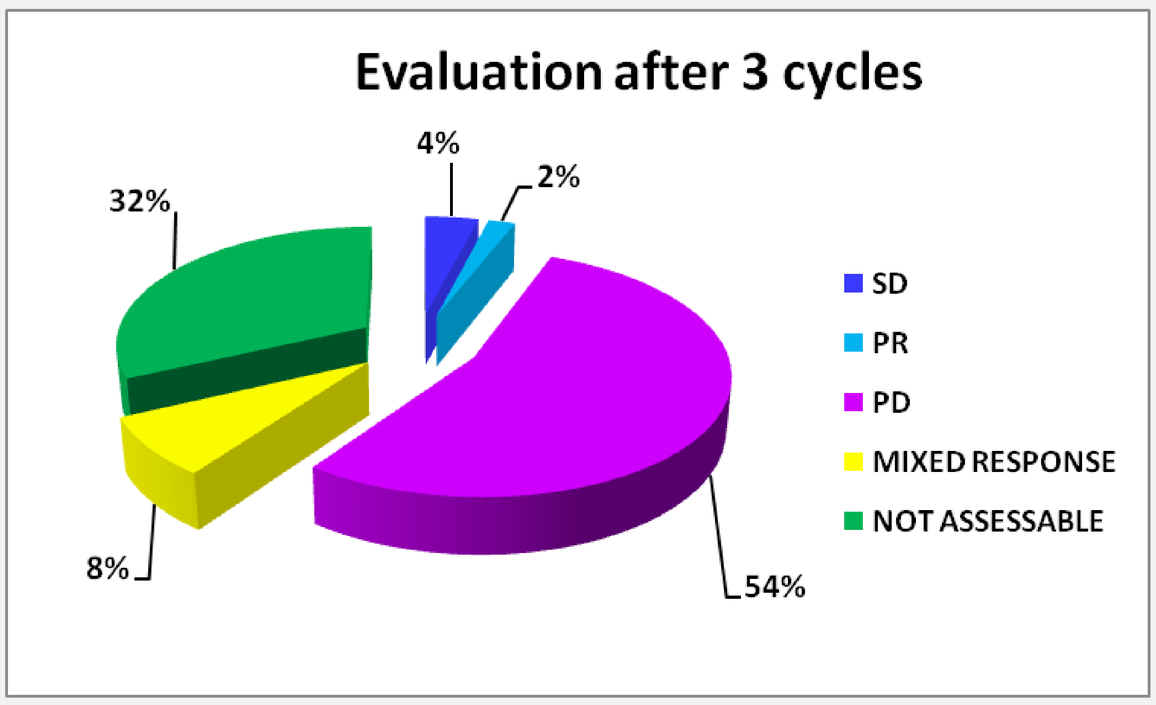
Colorectal cancer represents a major health problem in developed countries. Median age at diagnosis is about 70 years. This creates new needs in antineoplastic treatment, considering the characteristics of this group of patients: functional alterations that increase the toxicity of drugs, high comorbidity and polypharmacy. Trifluridine-tipiracil is an oral antineoplastic agent consisting of trifluridine and tipiracil. Tipiracil blocks the degradation of trifluridine by thymidine phosphorylase, which improves the bioavailability of trifluridine and allows oral administration. A Phase III study comparing trifluridine-tipiracil versus placebo in metastatic colorectal cancer (mCRC) patients refractory to or intolerant to standard therapy (n = 800) showed a modest benefit in overall survival and progression-free survival compared with placebo. The aim of our study was to assess efficacy and safety of trifluridine-tipiracil in a cohort of 49 patients with metastatic colorectal cancer treated in our institution.

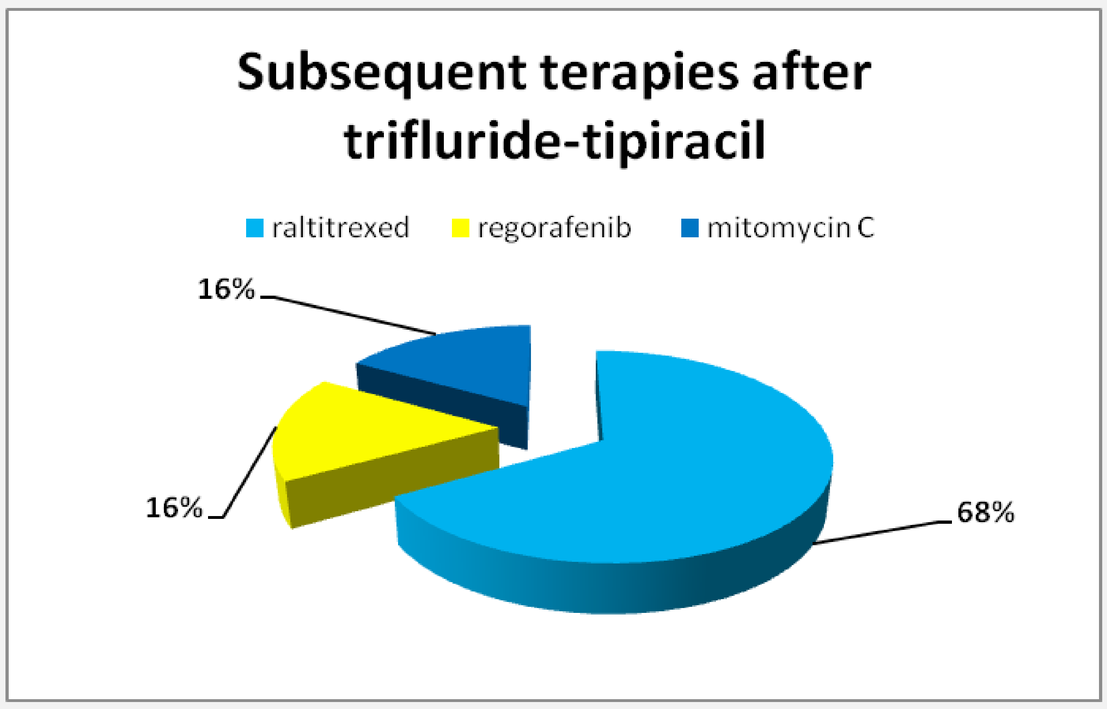
MATERIAL AND METHODS

Observational, retrospective study of patients treated with trifluridine-tipiracil in monotherapy from March 2018 to September 2019.
The data collected, obtained from the electronic medical records, were: sex, age, previous chemotherapy regimens, treatment duration and reason for discontinuation, adverse events (AEs) and follow-up data.

RESULTS

n. of Patients, n	**49**
male n, (%)	**33 (67%)**
median age (range)	**64 (41-84)**
median previously chemotherapy regimens	**2 (1-5)**
median number of cycles of trifluridine and tipiracil (range)	**3 (2-8)**
Patients who underwent subsequent therapies	**24 (49%)**





	Patients
Adverse events	**23**
heamatological events	**47 %**
asthaenia	**30%**
dyspnea	**9%**
hyperbilirubinaemia	**4%**

https://www.eahp.eu/25-4CPS-101

CONCLUSIONS

Our data confirm modest benefits for highly pretreated patients consistently with previously pubblished clinical trials.

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