COMPARATIVE ANALYSIS OF SKIN TOXICITY ON PATIENTS WITH METASTATIC COLON CANCER TREATED WITH EPIDERMAL GROWTH RECEPTOR BLOCKING DRUGS

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Background and importance
Treatment with cetuximab and panitumumab, epidermal growth factor receptor (anti-EGFR) blocking antibodies, is associated with skin and subcutaneous tissue disorders in most patients. This may result in treatment discontinuation in patients with stage IV colon cancer.

Aim and objectives
To evaluate skin toxicity and analyze tolerance to both anti-EGFR drugs.

Material and methods
✓ Study design: observational, retrospective, and descriptive study
✓ Setting: tertiary hospital
✓ Information: from the Oncofarm® program and the Diraya® digital medical record.

Data analysis: PASWStadistic18 statistical package.

Results
35/42 (80%) developed skin toxicity

Table 1: results on skin intoxication

<table>
<thead>
<tr>
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<th>Panitumab (n=21)</th>
<th>Cetuximab (n=21)</th>
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</thead>
<tbody>
<tr>
<td>Skin toxicity: n (%)</td>
<td>18 (87.5)</td>
<td>17 (81)</td>
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<td>Developed skin toxicity in cycle 1 (%)</td>
<td>88.9</td>
<td>64.7</td>
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<td>Most frequent grade of toxicity: % (main reaction)</td>
<td>Grade 2-3</td>
<td>Grade 1</td>
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<td></td>
<td>50 (xerosis and acneiform rash)</td>
<td>70.6 (acne)</td>
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<tr>
<td>Tolerance (%)</td>
<td>68</td>
<td>70.6</td>
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</table>

11% discontinue treatment due to skin toxicity

* n=patients

Conclusion and relevance
Panitumumab has shown more aggressive toxicity than cetuximab. Good practice in preventive toxicity treatment is necessary for the continuity of anti-EGFR therapy.