

Posterdiskussion - Kolorektale Karzinome

P307 - Treatment and outcome of patients with metastatic colorectal cancer (mCRC) in routine care 1995 - 2015

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Introduction: Evaluation of treatment strategies and outcome of patients with mCRC who received their treatment in an oncology group practice by 5 oncologists between 06/95 - 04/15. Comparison of different treatment periods (1995 - 2004 versus 2005 - 2015).

Methods: All consecutive patients with mCRC who were diagnosed between 06/95 - 04/15 were analysed retrospectively concerning treatment and outcome. Data were collected from patient files into a data base and analysed statistically using SPSS.

Results: 526 patients were analysed. Median age was 66 (28 - 89). 45% were female, 55% were male. KRAS-mutation status was known in 25%; 44% were mutated, 56% showed a KRAS-wildtype. In patients diagnosed between 2007 and 2015 (n=148) KRAS-mutation status was known in 75%; 48% were mutated, 52% wildtype. First line therapy consisted of 5-FU+folinic acid-regimens in 75%; FOLFIRI was applied in 14%, FOLFOX in 25%, CAPIRI in 2% and CAPOX in 4%. Bevacizumab was used in 17%, an Anti-EGFR-antibody in 1%. Second line therapy consisted of 5-FU+folinic acid-regimens in 64%; FOLFIRI was applied in 21%, FOLFOX in 28%, CAPIRI in 2% and CAPOX in 7%. Bevacizumab was used in 22%, an Anti-EGFR-antibody in 4%. Third line therapy consisted of 5-FU+folinic acid-regimens in 44%; FOLFIRI was applied in 23%, FOLFOX in 15%, CAPIRI in 7% and CAPOX in 6%. Bevacizumab was used in 18%, an Anti-EGFR-antibody was used in 18% as well. 18 patients (3%) received regorafenib as third and further line therapy. 4% of patients received best supportive care only. The median overall survival is 23.5 months (1.4 - 193.4+). In patients >75 years median overall survival is 22.6 months (2.8 - 163.1+). The comparison of different treatment periods (1995 - 2004 versus 2005 - 2015) revealed a substantial difference in survival (22.3 months versus 27.8 months).

Conclusion: Modern cytoreductive therapy leads to an improvement in overall survival in patients with mCRC who receive routine care. Substantial improvement has been achieved during the last ten years compared to 1995 - 2004.

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Angaben für Zitate:

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- Namen der Autoren, siehe oben
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