

Posterdiskussion - Gastrointestinale Tumoren, Hepatozelluläres Karzinom, Pankreaskarzinom

P868 - Treatment and survival of patients with advanced pancreatic cancer in community-based oncology group practices 2012 - 2015

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Introduction: Evaluation of treatment strategies and outcome of patients with advanced pancreatic cancer who received their treatment in oncology group practices in Germany since the introduction of FOLFIRINOX and gemcitabine+nab-paclitaxel. Comparison of overall survival between different treatment periods (1995 - 2004 versus 2012 - 2015).

Methods: All consecutive patients with advanced pancreatic cancer who were treated between 01/2012 - 12/2015 in 4 oncology group practices were analysed retrospectively concerning treatment and outcome. Data were collected from patient files into a database and analysed statistically using SPSS.

Results: 334 patients were analysed. Median age at diagnosis was 70 (32 - 94). 44% were female, 56% were male. 94 (28%) had locally advanced disease, 240 (72%) had distant metastases. 273 patients (82%) received some form of cytoreductive therapy, 61 (18%) best supportive care only. First line therapy was gemcitabine mono in 88 patients (32%), gemcitabine+nab-paclitaxel in 69 (25%), gemcitabine+erlotinib in 52 (19%) and FOLFIRINOX in 40 (15%). Radiotherapy was applied in 1 (0.4%). 105 patients (31%) received second line therapy consisting of gemcitabine+nab-paclitaxel in 23%, FOLFOX in 22%, gemcitabine mono in 19% and FOLFIRINOX in 9%. Third line therapy was given to 45 patients (13%) consisting of gemcitabine+nab-paclitaxel in 29%, FOLFOX in 18%, FOLFIRI in 13% and gemcitabine mono in 9%. 13 patients (4%) received some form of fourth line therapy. The median overall survival of the whole cohort is 36 weeks (1.7 - 365.6+). Median overall survival of patients receiving cytoreductive therapy is 37 weeks (3 - 209.3) compared to 25 weeks (1.7 - 365.6+) for patients receiving best supportive care only. Median overall survival for patients with locally advanced disease is 59.3 weeks (4.1 - 365.6+) compared to 30.4 weeks (1.7 - 166.6) for patients with distant metastases. Compared to our previous report 1995 - 2004 (J Support Oncol, 2004:159-163) the median overall survival for patients receiving cytotoxic treatment was reduced from 42 weeks to 37 weeks (3 - 209.3) for patients treated between 2012 - 2015.

Conclusion: 82% of patients with advanced pancreatic cancer treated in community-based oncology group practices receive modern cytotoxic therapy, leading to an overall survival that compares favourably with prospective randomized trials. Survival seems to have not improved over time during the last 20 years in routine care.

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