ENTERAL SUPPLEMENTATION IN UNRESECTABLE PANCREATIC CARCINOMA STUDY OF ONE CENTER

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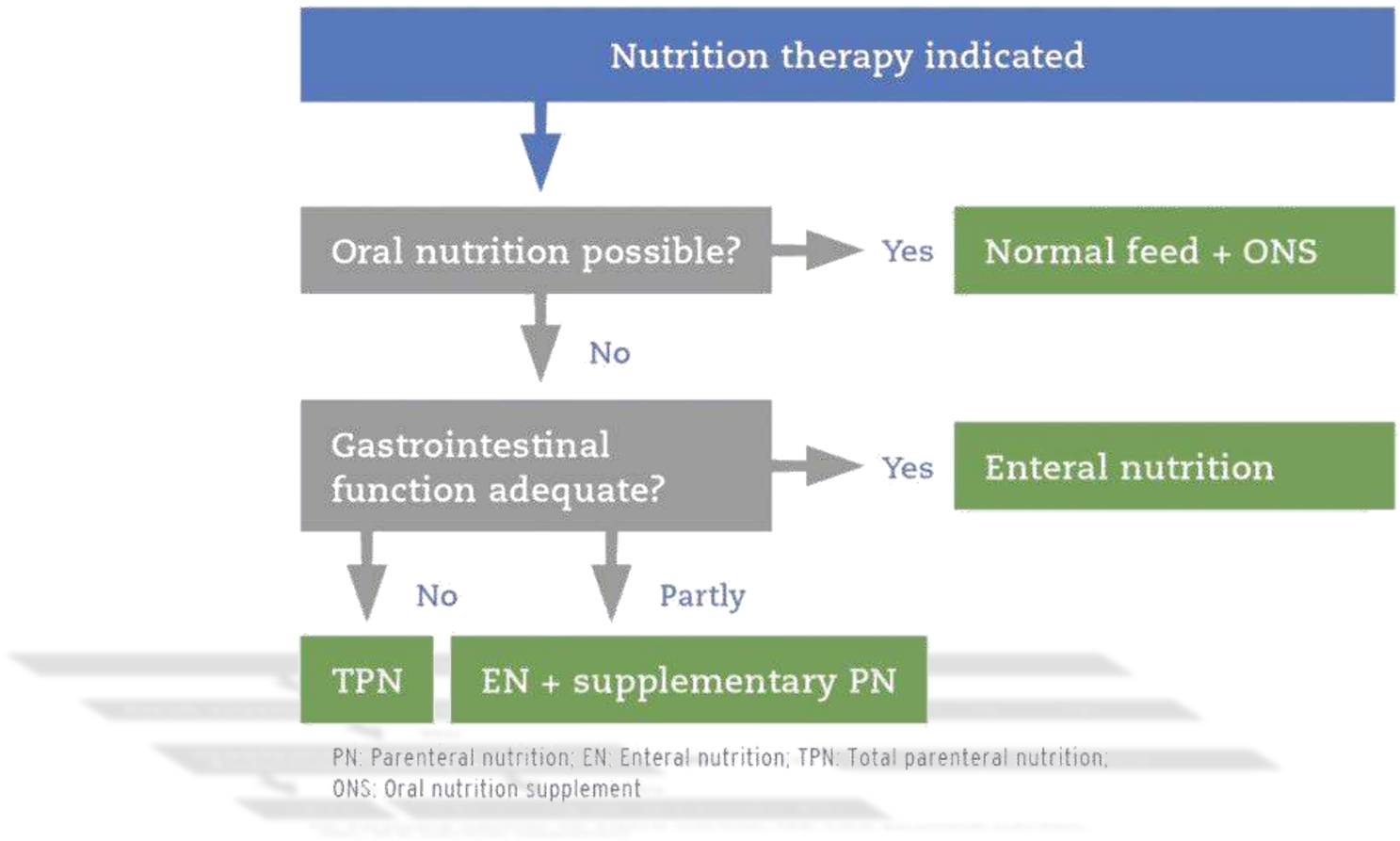
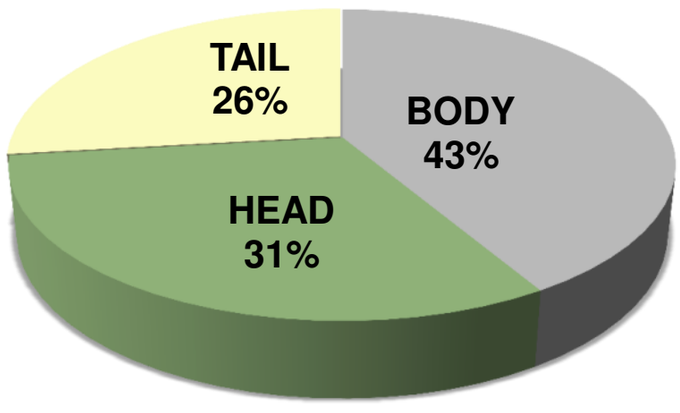


INTRODUCTION: Weight loss in patients (pts) with unresectable pancreatic cancer (UPC), as side effects of chemotherapy (CTP) or/and maldigestion due to pancreatic duct obstruction, is usual. Many other side effects from CTP such as neuropathy from oxaliplatin or/and hematological/gastrointestinal toxicity lead to delay of programmed CTP and reduction of treatment intensification.

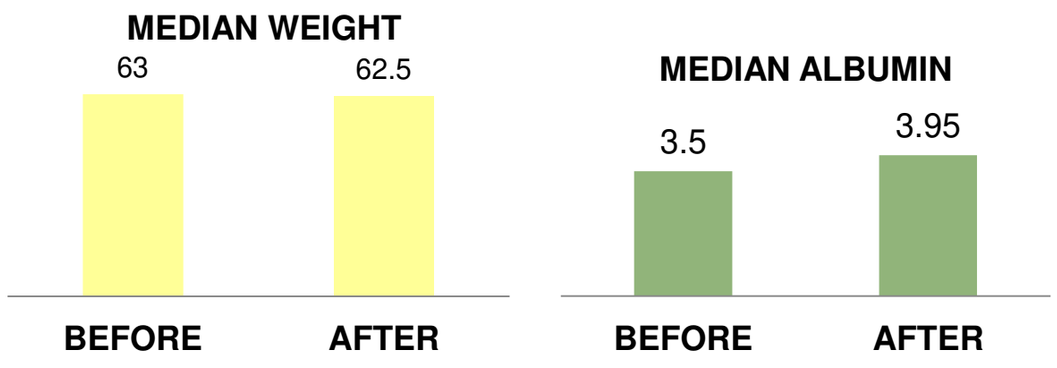
THE AIM of this study is to describe the clinical relevance of protein supplementation (Pentasure HP®) in pts with UPC who were able to receive 6 cycles of aggressive CTP (Folfirinox).

PATIENTS: Forty-two 27men(m), 15women(w) pts of median body weight (MBW) 63(39-88)kg, m/w 64(39-88)/60,5(54-78), with mECOG 1(0-3), median weight loss 4(0-12)kg/last trimester with UPC (18 body, 13 head, 11 tail) were admitted consecutively in our Department between 11/2014-10/2017.



Median serum albumin (MSA) was 3.5(2.5-4.6)gr%, m/w 3,5(3.6-4.1)/3.4(3-4.3)gr%. All pts received 6 cycles of FOLFIRINOX q15d with G-CSF primary prophylaxis, Pentasure HP® 60gr/d p.o., and were reevaluated.

RESULTS: CR, PR, SD and PD were documented in 5(12%)- 2 pts after 6 cycles of CTP and 3 after 3 cycles neoadjuvant CTP followed by surgery and 3 cycles adjuvant CTP- , 11(26%), 15(36%) and 11(26%) pts respectively. After CTP: MBW for all pts was 62,5(37-88) kg, m/w 64(37-88)/60(54-79) kg, MSA 3,9(2,6-4,7), m/w 3.9(2.6-4.7)/4(2.7-4.4) gr/dl. The changes of MSA in the subgroups of CR's, PR's, SD's, PD's respectively were: 3,6(3.1-4.3), 3.5(3-4.1), 3.6(2.6-4), 3.1(2.5-4.1) gr/dl before treatment and 4(3.8-4.7), 4(3.5-4.7), 3.7(3-4.2), 3,4(2.7-4) gr/dl after treatment.



Toxicity grade(gr) III was observed in 9/27(33%) men, 5/15(33%) women and included hematologic 13(31%) and gastrointestinal 11(26%), in 58/252(23%) cycles. Neuropathy gr II was demonstrated in 7/42(17%) pts. The median delay of CTP was 4(3-7) days. No toxic death was observed.

CONCLUSIONS: Pts with UPC, in our study, treated with 6c of FOLFIRINOX and receiving Pentasure HP®:
1) did not reduce MBW,MSA, and received scheduled CTP with no major delays.
2) experienced less toxicity than expected.
3) had RR 38% and SD 36%.

ΓΕΝΙΚΟ ΝΟΣΟΚΟΜΕΙΟ ΑΘΗΝΩΝ
Ο ΕΥΑΓΓΕΛΙΣΜΟΣ

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