

Gastrointestinal Cancer ASCO 2009

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ASCO 2009 GI

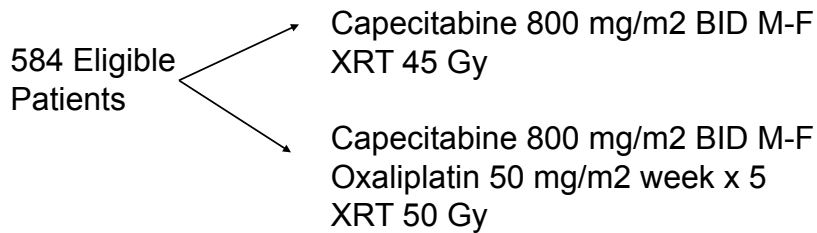
- ⊕ **Neoadjuvant Rectal Cancer #4007**
- ⊕ **Adjuvant Colon Cancer #4**
- ⊕ **Palliative Colon Surgery #4030**
- ⊕ **Palliative Biliary Cancer #4503**
- ⊕ **Adjuvant Pancreatic Cancer #4505**
- ⊕ **Palliative Neuroendocrine Cancer #4508**
- ⊕ **Palliative Gastric Cancer #4509**
- ⊕ **The future: 4001 (4121, 4132), 4000, 4046, 4062**
- ⊕ **Experimental drugs: 4079, 4089, 4629**

Neoadjuvant Rectal Cancer: 4007

⊕ **Phase III Randomized** ACCORD12/0405 Prodigé 2

⊕ **T 3/4, N 0-2, M0. N=598**

⊕ **85% power: pCR increase from 11 to 20%**



ASCO 2009 Abs 4007: Gerard, et al.

Toxicity: Neoadjuvant Rectal Cancer Abs 4007

	Cap 45 (293)	CapOx50 (291)	P
Any G3/4	11 %	25 %	<.0001
Diarrhea	3 %	13 %	<.0001
Neuropathy	0.4 %	5 %	<.002
60 day death	0.3 %	0.3 %	ns
Full dose XRT	99 %	90 %	ns
Surgery	98 %	99 %	ns
G2-4 post op complications	21 %	18 %	ns
LAR	73 %	76 %	ns

ASCO 2009 Abs 4007: Gerard, et al.

Efficacy: Neoadjuvant Rectal Cancer Abs 4007

	Cap 45 (293)	CapOx50(291)	p
ypCR	14 %	19 %	0.11
Dworac 2+3	30 %	41 %	
T2: ypCR	36 %	50 %	
T3: ypCR	13 %	17 %	
T4: ypCR	7 %	13 %	
Adj Chemo	42 %	30 %	
Occult M1	4 %	3 %	

ASCO 2009 Abs 4007: Gerard, et al.

Abs. 4007 (4008) Neoadjuvant Rectal Cancer Conclusions

- ⊕ Oxaliplatin added to fluoropyrimidines:
 - ⊕ -no improvement in pCR
 - ⊕ -no improved sphincter preservation
 - ⊕ -added toxicity
 - ⊕ -4008 lower occult mets at surgery

Adjuvant Colon Cancer: #4

- ⊕ C-08 Phase III Randomized
- ⊕ Stage II and III
- ⊕ Sep 04 - Oct 06, N= 2710
- ⊕ End point: 3 year DFS (25% less events)

Oxaliplatin 85 + LV 400 + 5FU 400/2400 (mg/m²)

+/-
Bevacizumab 5 mg/kg
q 2 weeks

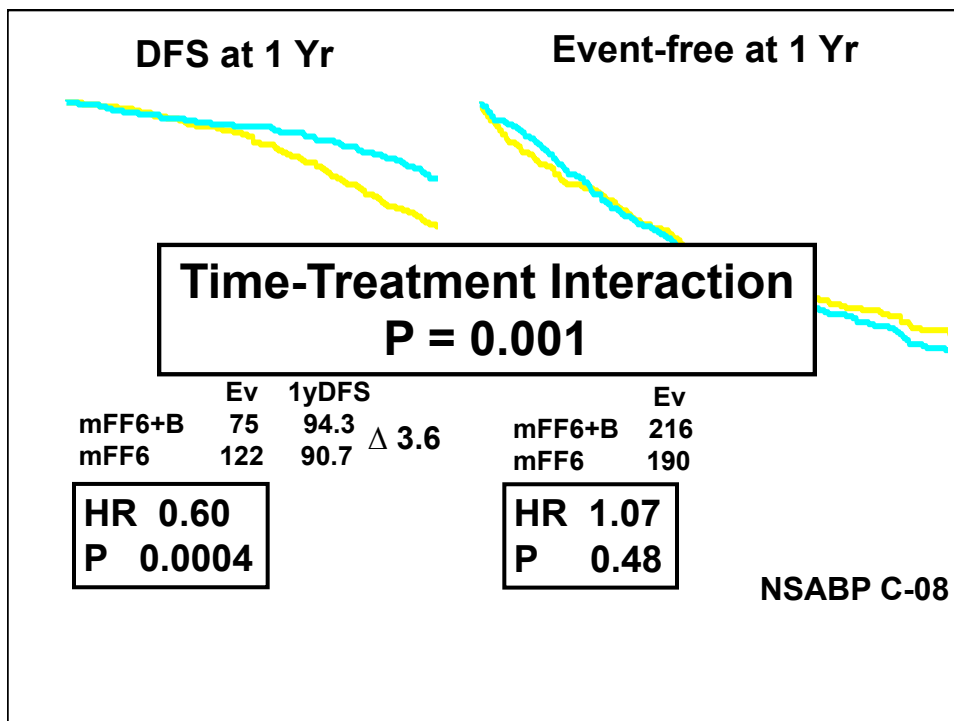
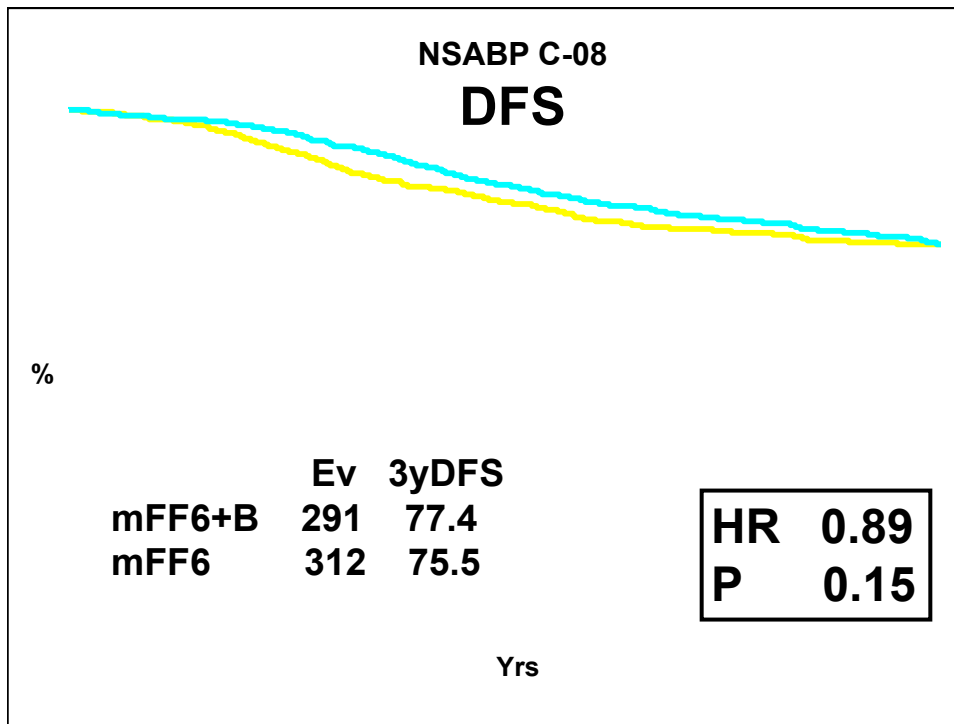
ASCO 2009 Wolmark, ASCO 2009 abs 4

NSABP C-08 Grade 3+ Toxicities Increased with Bevacizumab (%)

	mFF6	mFF6+B	P
Hypertension	1.8	12	<0.0001
Pain	6.3	11.1	<0.0001
Proteinuria	0.8	2.7	<0.001
Wound Comp	0.3	1.7	<0.001

Median Duration of Bev = 11.5 months

Allegra et al JCO May 4, 2009



Palliative Colon Surgery: 4030

- ⊕ Synchronous, not resectable, asymptomatic
- ⊕ Prospective database 2000-06 N=233
- ⊕ Chemo: FOLFOX, IFL, FOLFIRI, bevacizumab
- ⊕ 93% never required surgical palliation
- ⊕ No significance: location, bev., mets burden
- ⊕ Need for urgent intervention: OS unchanged

ASCO 2009, Abs 4030: Poultsides

Palliative Biliary Cancer Therapy Abstract 4503

- ⊕ Phase III Randomized 324 patients
- ⊕ Primary endpoint survival (OS)

Gemzar 1000 mg/m² +/- Cisplatin 25 mg/m² q 21 d.
Day 1,8 15 (G) Day 1,8 (G and C)

ASCO 2009 Abs 4503: Valle et al.

Palliative Biliary Cancer Therapy

Gemzar 1000 mg/m² +/- Cisplatin 25 mg/m² q 21 d.

	Gemzar	Gem/Cis	HR
OS	8.2 months	11.7 months	0.87
PFS	6.8 months	8.5 months	0.7
Toxicity Grade 3, 4	57% week 12	57% week 12	

ASCO 2009 Abs 4503: Valle et al.

Adjuvant Pancreatic Cancer Abstract 4505

- ⊕ **Phase III Randomized 1030 patients**
- ⊕ **90% power: 10% 2 y. survival increase**
- ⊕ **Post R0 or R1 resection**

LV 20 + 5FU 425 (mg/m² iv bolus per day x5) q 28 days

Versus

Gemzar 1000 mg/m² iv day 1,8,15 q 4 weeks

x 6 months

ASCO 2009 Abs 4505: Neoptolemos et al.

Adjuvant Pancreatic Cancer 5FU/LV versus Gemzar

- ⊕ **Median survival 23 : 23.6 months**
- ⊕ **No difference in subgroups (R0/1)**

ASCO 2009 Abs 4505: Neoptolemos et al

Palliative Neuroendocrine Ca Th. #4503

- ⊕ **Phase III Randomized Placebo Controlled, DB**
- ⊕ **85 patients**
- ⊕ **Octreotide 30 mg/month till progression or death**
- ⊕ **Placebo for 18 months**
- ⊕ **At 6 months SD// O : P = 67% : 37.2 %**
- ⊕ **TTP// O : P = 14.3 : 6 months**
- ⊕ **P=0.000072 in favor of Octreotide LAR**

ASCO 2009 Abs 4508: Arnold et al.

Palliative Gastric Ca Th. #4509

- ⊕ **Phase III, Her 2 + (6-35%) GE or G cancer**
- ⊕ **Locally advanced, recurrent, metastatic**

**5FU (or capecitabine) + Cisplatin q 3 weeks x 6
+/-
Herceptin till progression**

ASCO 2009 Abs 4509: Van Cutsem

Palliative Gastric Cancer 5FU (c)+ Cis +/- Herceptin

- ⊕ **3807 patients tested**
- ⊕ **22.1 % Her 2 + (Abs 4556)**
- ⊕ **594 patients randomized**
- ⊕ **Safety similar (LVEF drop 1.1 vs 4.6%)**
- ⊕ **Overall survival (p= 0.0048 HR 0.74)**
- ⊕ **Chemo: Chemo H = 11.1 : 13.5 months**

ASCO 2009 Abs 4509: Van Cutsem

The Future

- ⊕ **4001: Microsatelite instability prognostic**
- ⊕ **4000: 18 genes predict recurrence**
- ⊕ **4046: >60 day adjuvant delay-lower OS**
- ⊕ **4062: CD133 stem cell Ag prognostic**
- ⊕ **4079: AMG 655 death receptor agonist safe**
- ⊕ **4089: herpes virus+ chemo-liver mets stable**
- ⊕ **4629: Seneca Virus iv- promising**