Continuing Bevacizumab With Second-Line Chemotherapy for Metastatic Colorectal Cancer Lengthens Patients' Lives

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Researchers found that continuing bevacizumab (Avastin) while switching the chemotherapy used for second-line treatment lengthened the lives of patients with metastatic (cancer that has spread) colorectal cancer who had already received bevacizumab and another type of chemotherapy, a new study showed. Second-line treatment is treatment given after the first treatment, called first-line treatment, has stopped working. This approach has been used in the United States, and this study confirms its use as an effective treatment method.

Bevacizumab is a type of targeted therapy called an anti-angiogenic. Targeted therapy is a treatment that targets the cancer's specific genes, proteins, or tissue environment that contributes to cancer growth and survival. An anti-angiogenic is focused on stopping the tumor from making the blood vessels it needs to grow and spread.

The 820 patients who participated in this study had metastatic colorectal cancer that could not be removed with surgery. They received bevacizumab plus standard first-line chemotherapy with either oxaliplatin (Eloxatin) or irinotecan (Camptosar). When the cancer worsened, patients were then given second-line chemotherapy with the alternate drug and either bevacizumab or a placebo (an inactive treatment). Researchers found that the patients who received bevacizumab as part of their second-line treatment lived about 11 months, compared with nearly 10 months for those who received chemotherapy and a placebo for second-line treatment. In addition, second-line treatment with bevacizumab kept the cancer from worsening for about a month and a half longer than chemotherapy alone.

What this means for patients

?These findings confirm what many physicians and researchers have long suspected - that extended bevacizumab treatment provides meaningful benefits for patients with advanced colorectal cancer, without adding significant side effects,? said Dirk Arnold, MD, Director of the Hubertus Wald Tumor Center, University Cancer Center (UCCH) of University Clinic Eppendorf, Hamburg, Germany, and Speaker of the German AIO Colorectal Cancer Collaborative Study Group, which started the study. ?By switching chemotherapy when the cancer worsens and continuing with bevacizumab, we can make second-line treatment even more effective.? Talk with your doctor about the treatment options for colorectal cancer, including the specific drugs that are recommended.

Questions to ask your doctor

- What stage of colorectal cancer do I have? What does this mean?
- What are my treatment options?
- What treatment plan do you recommend? Why?
- Do you recommend switching treatments? Why and at what point during my treatment plan?
- What are the side effects of treatment? How can they be managed?

For More Information

Guide to Colorectal Cancer [1]

Understanding Targeted Treatments [2]

Angiogenesis and Angiogenesis Inhibitors to Treat Cancer [3]

When the First Treatment Doesn?t Work [4]

Placebos in Cancer Clinical Trials [5]

Links:
[1] http://www.cancer.net/patient/Cancer+Types/Colorectal+Cancer
[2] http://www.cancer.net/patient/All+About+Cancer/Cancer.Net+Feature+Articles/Treatments%2C+Tests%2C+and+Procedures/Understanding+Targeted+Treatments
[3] http://www.cancer.net/patient/All+About+Cancer/Cancer.Net+Feature+Articles/Treatments%2C+Tests%2C+and+Procedures/Angiogenesis+and+Angiogenesis+Inhibitors+to+Treat+Cancer
[4] http://www.cancer.net/patient/All+About+Cancer/Cancer.Net+Feature+Articles/Treatments%2C+Tests%2C+and+Procedures/When+the+First+Treatment+Doesn%27t+Work
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