

New Combination of Chemotherapy Drugs Delays Tumor Progression in Advanced Colorectal Cancer

The combination of the three drugs is an experimental treatment known as FOLFOX4. The standard treatment for advanced colorectal cancer is a combination of irinotecan (Camptosar), 5-FU, and leucovorin, known as IFL.

In a study of 821 patients with metastatic colorectal cancer that had first been treated with IFL, researchers compared the benefits of three different treatments: 1) 5-FU and leucovorin 2) oxaliplatin alone or 3) the FOLFOX4 regimen.

The results showed:

- 9% of patients benefited from the FOLFOX4 combination, while less than 1% percent of the patients benefited from 5-FU and leucovorin.
- Patients who received FOLFOX4 had a longer delay before their tumors grew, with 4.9 months compared with 2.6 months for those who took 5-FU and leucovorin.
- Symptoms related to the tumor—such as weight loss, abdominal pain, weakness, and fatigue—were relieved in about 30% of patients treated with FOLFOX4, compared with about 15% of patients who received 5-FU and leucovorin. However, patients treated with FOLFOX4 were more likely to experience nausea, diarrhea, numbness, and low white blood cell and platelet counts compared with patients who received IFL or oxaliplatin alone.
- Oxaliplatin alone was no more effective than 5-FU and leucovorin.

"The ability of FOLFOX4 to delay tumor progression and relieve cancer-related symptoms is clinically meaningful to our patients," said lead investigator Mace L. Rothenberg, MD, of the Vanderbilt-Ingram Cancer Center.

Oxaliplatin is a platinum-based chemotherapy drug that is similar to the conventional chemotherapy drugs cisplatin (Platinol) and carboplatin (Paraplatin).

At the center of the drug molecule is an atom of platinum. This atom of platinum attacks the cancer cell and interrupts the process of cell division.

For More Information

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Links:

[1] <http://www.cancer.net/patient/All+About+Cancer/Clinical+Trials>

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[3] <http://www.cancer.net/patient/All+About+Cancer/Treating+Cancer/Managing+Side+Effects>