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Adding Targeted Therapy to Chemotherapy Improves Survival and Quality of Life for People with Metastatic Stomach Cancer [1]

Gastrointestinal Cancers Symposium
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Combining the chemotherapy drug paclitaxel (Taxol) with a monoclonal antibody known as ramucirumab helps people with stomach or gastroesophageal junction (GEJ, lower part of the esophagus that connects to the stomach) cancer that has spread to other parts of the body live longer than paclitaxel treatment alone, according to a new study. These treatments were given as second-line therapy (treatment given if the first does not work, starts but then stops working, or causes serious side effects). The researchers also noted that people who received the drug combination reported a better quality of life.

Ramucirumab is a type of targeted therapy (treatment that targets specific genes, proteins, or the tissue environment that contributes to cancer growth and survival) that blocks a process called angiogenesis. Angiogenesis is the formation of new blood vessels. Because a tumor needs the nutrients delivered by these blood vessels to grow and spread, the goal of stopping angiogenesis is to essentially ?starve? the tumor.

As part of this study, 665 people with metastatic GEJ or stomach cancer whose disease got worse during chemotherapy or within four months after finishing chemotherapy received either paclitaxel or a combination of ramucirumab and paclitaxel. The results of the study show that half of the patients who received ramucirumab and chemotherapy as second-line therapy were alive nearly 10 months later compared with seven months for those who had chemotherapy alone. Overall, cancers in 28% of patients responded to treatment with ramucirumab and paclitaxel, while 16% responded to treatment with paclitaxel.

The most common side effects of treatment with ramucirumab and paclitaxel include abnormally low levels of red and white blood cells (neutropenia, leukopenia, and anemia), fatigue, abdominal pain, and general weakness. All of these side effects were manageable, and very few patients participating in this study had to stop treatment because of side effects.

What this means for patients

?A two-month survival gain for patients with gastric cancer receiving second-line therapy is a big improvement,? said lead study author Hansjochen Wilke, MD, Director of the Department of Oncology, Hematology and Center of Palliative Care at Kliniken Essen-Mitte in Essen, Germany. ?This study shows that we can achieve more with targeted therapy and chemotherapy together than we can with chemotherapy alone. We?re also encouraged that this combination not only helps patients live longer but also offers a better quality of life.? The U.S. Food and Drug Administration assigned ramucirumab a priority review designation in October 2013 as a second-line treatment for patients with advanced gastric cancer. A priority review designation is given to drugs that, if approved, could provide a significant improvement over existing treatment options. A decision is expected in early 2014.

Questions to ask the doctor

- What type and stage of gastric cancer do I have? What does this mean?
- What are my treatment options?
- What other options are available if the first treatment doesn?t work?
- What clinical trials are open to me?

For More Information

Guide to Stomach Cancer [2]

Guide to Esophageal Cancer [3]

Understanding Targeted Therapy [4]

Angiogenesis and Angiogenesis Inhibitors to Treat Cancer [5]

When the First Treatment Doesn?t Work [6]

Links:
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