

One-day DCF regimen in patients with metastatic gastric cancer

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ABSTRACT

Background. Cytotoxic chemotherapy is the basic treatment for metastatic gastric cancer. The “docetaxel, cisplatin, 5-day infusion of 5-FU (DCF5)” regimen is regarded as an effective therapy. However, the poor toxicity profile of this regimen and administration by 5-day infusion are major drawbacks of this method.

Methods. Patients with measurable metastatic gastric carcinoma, Eastern Cooperative Oncology Group (ECOG) performance status ≤ 2 , normal hematological and renal function, adequate hepatic function, and not pretreated for advanced disease with chemotherapy, received docetaxel on day 1, cisplatin on day 1, and 5-FU peripheral IV on day 1 (DCF1) every 3 weeks. The patients undergoing the DCF1 regimen could not receive the infusion regimen. This was a retrospective study about the use of DCF in 1 day in not previously treated metastatic gastric cancer.

Results. In total, 95 patients were treated with a median of 5 cycles per patient. Those not previously treated for advanced disease received docetaxel 75 mg/m² on day 1, cisplatin 75 mg/m² on day 1, and 5-FU peripheral IV 750 mg/m²/day on day 1, plus filgrastim or lenograstim between days 3 and 7. Grade ≥ 3 toxicities were neutropenia (12%), anemia (11%), thrombocytopenia (3%), fatigue (18%), mucositis (10%), diarrhea (3%), nausea/vomiting (6%), neurological (3%), and palmar-plantar (2%). Two nonfatal febrile neutropenia episodes were recorded. There were no treatment-related deaths. In all patients with measurable disease, we observed an overall response rate of 46% (40 partial responses, 4 complete responses). Thirty-one patients (33%) had stable disease. The median overall survival was 9.0 months (95% CI 7.34-10.6).

Conclusions. Use of the DCF1 regimen in metastatic gastric cancer is feasible, with comparable activity to previous results achieved with epirubicin-based chemotherapy and infusion DCF in terms of overall survival. However, randomized and prospective studies need to be carried out with this regimen.

Key words: metastatic gastric cancer, DCF regimen, survival, toxicity.

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