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中国肿瘤临床 2012, Vol. 39 Issue (19): 1443-1445 DOI: doi:10.3969/j.issn. 1000-8179.2012.19.014

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长春瑞滨联合希罗达治疗蒽环类和紫杉类耐药的晚期乳腺癌临床分析

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Clinical Efficacy of Vinorelbine Combined with Xeloda for Patients with Anthracycline- and Taxane-refractory Metastatic Breast Cancer

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摘要 目的: 观察长春瑞滨 (NVB) 联合希罗达 (XEL) 21天方案 ([NX] 方案), 治疗蒽环类和紫杉类药物耐药的转移性乳腺癌 (anthracycline-andtaxane refractorymetastaticbreastcancer, ATRMBC) 患者的疗效和不良反应。方法: NVB 25mg/m², d1, 8, 快速静滴; XEL 2.0 g/ (m² · d), 早晚2次, 餐后30min口服, d1~14, 21天为1个疗程, 最多接受6个周期化疗或至疾病进展。结果: 48例患者共完成172个周期化疗, 中位化疗周期4个周期。均可评价疗效和不良反应。其中完全缓解 (CR) 0例, 部分缓解 (PR) 11例, 稳定 (SD) 23例, 进展 (PD) 14例。总有效率 (CR+PR) 22.92%, 疾病控制率 (DCR) 70.83%, 中位无进展生存期 (TTP) 6.7个月 (1~22个月), 1年生存率32/48 (66.70%), 2年生存率21/48 (43.75%)。治疗后主要不良反应为血液学毒性及手足综合征, 其次为胃肠道反应及脉管炎。结论: [NX] 方案是治疗ATRMBC的有效方案, 不良反应可以耐受。

关键词: 乳腺癌 长春瑞滨 希罗达 药物耐受性

Abstract: Objective: This study aims to evaluate the clinical efficacy and tolerability of a three-week regimen of vinorelbine with xeloda for 48 patients with anthracycline- and taxane-refractory metastatic breast cancer (ATRMBC). Methods: Forty-eight patients with anthracycline- and taxane-refractory metastatic breast cancer were enrolled in this study. All patients were given 25mg/m² of vinorelbine on days one, and eight, combined with 2.0 g/m² of xeloda daily from days 1 to 14. The combined chemotherapy was repeated every 21 days as one cycle. Patients received a maximum chemotherapy of six cycles or until disease progression. Results: All 48 patients completed 172 chemotherapy cycles with a four-cycle median per patient. Adverse events and clinical efficacy were evaluated on all 48 patients. Complete remission (CR) was not observed in any patient, partial remission (PR) in 11 patients, stable disease (SD) in 23 patients, and progression of disease (PD) in 14 patients. The overall response rate (CR+PR) was 22.92% and the disease control rate (DCR) was 70.83%. The median time to progression (TTP) was 6.7 months (1 month to 22 months), 1-year survival rate was 66.70%, and two-year survival rate was 43.75%. The most commonly observed adverse events were hematologic toxicity and hand-foot syndrome, followed by gastrointestinal reaction and angitis. No mortality occurred during the treatment. Conclusion: Vinorelbine combined with xeloda is an effective and safe chemotherapeutic regimen for ATRMBC patients; the adverse reactions are well tolerated.

Key words: Breast cancer Vinorelbine Xeloda Drug tolerance

收稿日期: 2012-01-31; 出版日期: 2012-10-15

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· 长春瑞滨联合希罗达治疗蒽环类和紫杉类耐药的晚期乳腺癌临床分析[J]. 中国肿瘤临床, 2012, 39(19): 1443-1445.

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