



贝伐单抗联合卡培他滨治疗转移性结直肠癌的临床观察

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Efficacy and Safety of Bevacizumab plus Capecitabine for Metastatic Colorectal Cancer

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摘要

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摘要 目的观察贝伐单抗联合卡培他滨治疗转移性结直肠癌的疗效及不良反应。方法11例经病理组织学证实的转移性结直肠癌患者中5例应用贝伐单抗剂量为5mg/kg, 每两周用药1次[4例为10mg/kg, 每两周用药1次[2例为15mg/kg, 每3周用药1次。应用贝伐单抗的同时联合应用卡培他滨单药化疗, 剂量为2000mg/(m²·d), 共14d, 每21天重复。结果5例患者获得部分缓解, 5例稳定, 1例进展。疾病控制率为90.9%。中位无进展生存期4个月, 中位总生存15个月。与贝伐单抗相关的不良反应主要有2级高血压

(27.3%), 1到2级蛋白尿(36.4%),其他不良反应有口腔黏膜炎、乏力、皮下出血等。无严重出血和血栓形成以及其他3到4级的不良反应。与卡培他滨有关的不良反应主要为手足综合征(54.6%)、腹泻(27.3%)、中性粒细胞减少(18.2%)。结论贝伐单抗联合卡培他滨治疗转移性结直肠癌近期疗效肯定, 但停药后维持时间较短。总体不良反应轻, 耐受性较好。

关键词: 贝伐单抗 卡培他滨 转移性结直肠癌

Abstract: Objective To evaluate the efficacy and safety of bevacizumab plus capecitabine in treating metastatic colorectal cancer(mCRC). Methods Eleven patients with mCRC(6 females and 5 males)were enrolled in this study. Bevacizumab was given with 5 mg/kg every two weeks in five patients, 10 mg/kg every two weeks in four patients and 15 mg/kg every three weeks in two patients. All patients received capecitabine 2000mg/m² per day for 14 days. Results Five of 11 patients had partial response and five patients had stable disease and two patients had progressive disease. The disease control rate was 90.9%. The progress-free survival were 4 months and the median overall survival time were 15 months. The adverse events related to bevacizumab were grade 2 hypertension in 3 patients(27.3%)and grade 1 or 2 proteinuria in 4 patients(36.4%). Other adverse events such as mucositis, fatigue, subcutaneous haemorrhage were also observed. No thromboembolism or severe haemorrhage happened. No other grade 3 or 4 adverse events were observed. The adverse events in the combined therapy were hand-foot-syndrome(54.6%), diarrhea(27.3%), and neutropenia(18.2%), mainly due to capecitabine. Conclusions The combination of bevacizumab plus capecitabine has definite benefit in patients with mCRC. However, these benefits can not be maintained after the withdrawal of bevacizumab. The adverse drug reactions are well tolerated.

Keywords: bevacizumab capecitabine metastatic colorectal cancer

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