白蛋白结合型紫杉醇单药与吉西他滨单药治疗晚期铂类耐药复发性卵巢癌的疗效比较

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Title: **Clinical analysis of albumin-bound paclitaxel and gemcitabine in the treatment of advanced platinum-resistant recurrent ovarian cancer**

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摘要: 目的：探讨白蛋白结合型紫杉醇与吉西他滨方案在晚期复发卵巢癌中的疗效及安全性。方法：回顾性分析56例中晚期复发性卵巢癌患者，56例患者均为铂类耐药复发患者分别采用白蛋白结合型紫杉醇与吉西他滨方案化疗。21 天为1疗程，共行6周期化疗，对两组患者的疗效进行评估观察，并比较治疗后两组的不良反应。结果：白蛋白结合型紫杉醇组治疗有效率为 39.3%(10/28)，吉西他滨组治疗有效率为25.0%(7/28)，两组对比差异无统计学意义(P=0.38 > 0.05);白蛋白结合型紫杉醇组中位无进展生存期(mPFS)为 8.2个月，吉西他滨mPFS为6.4 个月，两组对比差异无统计学意义(P > 0.05)。白蛋白结合型紫杉醇组没有合并糖尿病者与合并糖尿病者有效率比较同样采用Fisher精确检验P=0.062 > 0.05,两组有效率无差别。白蛋白结合型紫杉醇亚组中无糖尿病的患者与合并糖尿病的患者的中位mPFS分别为 8.9、4.2个月，两者比较差异有统计学意义(P < 0.05)，不良反应中性粒细胞比较差异有统计学意义(P < 0.05)，血小板降低、肝损伤、肾损伤不良反应发生率比较差异无统计学意义(P > 0.05)。结论：白蛋白结合型紫杉醇治疗晚期复发性卵巢癌疗效较吉西他滨治疗疗效较好，患者中位无进展生存期较长；另外我们发现伴有糖尿病的患者应用白蛋白结合型紫杉醇组不良反应高于无糖尿病的患者，疗效亦偏差。

Abstract: Objective:To investigate the efficacy and safety of albumin-bound paclitaxel and gemcitabine regimen in the treatment of advanced recurrent ovarian cancer.Methods:56 patients with advanced recurrent ovarian cancer were retrospectively analyzed.56 patients with platinum-resistant recurrent ovarian cancer were treated with albumin-bounding paclitaxel and gemcitabine regimens respectively.21 days as a course of treatment,a total of 6 cycles of chemotherapy,the efficacy of two groups of patients were evaluated and observed,and the adverse reactions after treatment were compared between the two groups.Results:The effective rate of albumin-bound paclitaxel group was 39.3%(10/28) and gemcitabine group was 25.0%(7/28).There was no significant difference between the two groups(P=0.38 > 0.05).The progression-free survival (mPFS) was 8.2 months in albumin-bound paclitaxel group and 6.4 months in gemcitabine group.There was no significant difference between the two groups (P > 0.05).The effective rate of albumin-bound paclitaxel group without diabetes mellitus was compared with that of diabetes mellitus group.Fisher's exact test was also used for P=0.062 > 0.05.There was no difference in the effective rate between the two groups.The median mPFS of non-diabetic and diabetic patients in the albumin-bound paclitaxel subgroup was 8.9 and 4.2 months,respectively.There was significant difference between the two groups (P < 0.05).There was no significant difference in the incidence of adverse reactions of neutrophils (P < 0.05).There was no significant difference in the incidence of thrombocytopenia,liver injury and kidney injury (P > 0.05).Conclusion:Albumin-bound paclitaxel is more

effective than gemcitabine in the treatment of advanced recurrent ovarian cancer.The median progression-free survival and median survival of patients are longer.In addition,we found that the adverse reactions of patients with diabetes treated with albumin-bound paclitaxel are significantly higher than those without diabetes,and the efficacy is also biased.

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