Gemcitabine/Cisplatin in the treatment of metastatic breast cancer patients pretreated with anthracyclines

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PAJO, June 2010, 3(2): 22-28

Abstract

Purpose: A phase II prospective study to evaluate efficacy and tolerability of gemcitabine and cisplatin as a first line combination chemotherapy in patients with metastatic breast cancer (MBC) pretreated with anthracyclines in their adjuvant setting.

Patients & Methods: Patients were assigned to receive gemcitabine 1250 mg/m2 on days 1 & 8 plus cisplatin 75 mg/m2 day 1 , repeated every 3 weeks (for 6-8 cycles).

Results: The study included 40 female patients with MBC and took place during the period from December 2006 to June 2009 with a median follow up period of 12 months (range 3-24 ms).The overall objective response rate was 57.9%. The median duration of response was 9.5 ms (95% CI, 8.07 to 11.83 ms) and the median time to disease progression was 12.5 ms (95% CI, 10.85 to 14.43 ms).The estimated median survival was 22 ms (95% CI, 16.34 to 27.66 ms).The 1 and 2 years survival probabilities were 68.52% and 31%, respectively .The study regimen proved to be quite tolerable with the main hematological toxicities of this protocol were grade III anemia in 10% of patients, grade III/IV neutropenia in 20% of patients and grade III/IV thrombocytopenia in 17.5% of patients. There were no grade IV non hematological toxicity observed within the study and the only grade III non hematological toxicities recorded in the study were grade III nausea in 25% of patients, grade III vomiting in 17.5% of patients, grade III fatigue in 15% of patients and grade III renal toxicity in 2.5% of patients.

Conclusion: Gemcitabine/cisplatin combination was both effective and tolerable as first-line therapy in MBC pretreated with anthracyclines. However, initiation of larger phase III studies comparing gemcitabine cisplatin combination directly with other chemotherapy combinations in MBC patients pretreated with anthracyclines is recommended.