

WORLD CONGRESS OF GASTROENTEROLOGY AND DIGESTIVE DISEASES



Brigitte Haberkorn

Maastad Hospital, The Netherlands

Real life data important to make appropriate choices at the end of life in patients with pancreatic cancer

Abstract: Introduction Pancreatic cancer is one of the five most common causes of cancer mortality in developed countries. In patients with metastatic disease, the most frequent treatment used is FOLFIRINOX, which is associated with moderate toxicity which could influence quality of life. The efficacy of FOLFIRINOX in a general population in the Netherlands has not been subject of research before, and therefore, this research has been set up in order to investigate what the real-life benefits of FOLFIRINOX are in a population with metastatic pancreatic cancer (mPC) treated in three general hospitals in the Netherlands. Methods The data used in this study was collected by patient records leading to a noninterventional retrospective cohort study. Eighty-six patients, over 18 years of age, diagnosed with mPC between the years 2015 and 2022 and treated with FOLFIRINOX at Maastad Hospital in Rotterdam, Amphia Hospital in Breda, or Catharina Hospital in Eindhoven, were included in the study. Kaplan-Meier models were used in order to represent survival outcomes.

Results: The results showed a median overall survival of 228 days (IQR 118–355). Only 14.0% (n = 12) completed the firstline treatment, and 51.2% (n = 44) of patients stopped treatment before or during cycle 6. Toxicity is highest, grade 3, after the first cycle but remains high for grade 1 and 2 during all treatment cycles. Conclusion Survival rates for patient with metastatic pancreatic cancer treated with FOLFIRINOX were worse in our study population than in comparative studies. It is evident that results from trials cannot always be directly translated to daily practice. It is therefore necessary to check after approval whether new drugs live up to their expectations. And thereby, should we not be more critical in offering treatment to patients with such a poor life expectancy and focus more on the quality of life?