## Experience with UFT/LV in combination therapy P. Artru

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There is evidence that other chemotherapeutic agents active against colorectal cancer may have synergistic effects when added to fluorouracil/folinic acid therapy [1,2]. Oxaliplatin in combination with conventional intravenous (IV) fluorouracil/folinic acid significantly prolongs progression-free survival and improves response rates compared with fluorouracil/folinic acid alone, and supports the combination of oxaliplatin with oral tegafururacil/leucovorin (UFT/LV) [3]. A phase II trial of UFT/LV plus oxaliplatin was conducted at 10 study centres in 60 patients with advanced colorectal cancer, including the patient described below. The dosing schedule comprised UFT 300 mg/m²/day for 1 to 14 days plus oral LV 90 mg/day and IV oxaliplatin 130 mg/m² on day 1, repeated every 3 weeks.

A 72-year old male presented with abdominal pain and blood in the stools, and was diagnosed with left colon adenocarcinoma and intestinal obstruction in April 2002. A CT scan confirmed hepatic and lung metastases and the disease was staged as pT3 N2 M1. Carcinoembryonic antigen (CEA) marker level was 390 units. A left colostomy was performed and the patient gave informed consent to participate in a clinical trial evaluating a 3-week cycle of oral UFT 300 mg/m²/day for 1 to 14 days plus oral LV 90 mg/day and IV oxaliplatin 130 mg/m² on day 1. The patient received 8 treatment cycles and no cycle was delayed. Grade 3 or 4 haematologic toxicities and alopecia were absent. The patient experienced grade 1 neurotoxicity and grade 1 diarrhoea. In July 2002 after 2 cycles, a CT scan revealed the disease was stable

and a repeat scan in September 2002 showed a partial response as defined in the study protocol with the size of the target tumour reduced by 35%.

The activity and acceptable toxicity profile of UFT/LV plus oxaliplatin shown in our patient is an indication of the potential benefits of this combination and suggests it may be worthy of further investigation in the management of advanced colorectal cancer.

The feasibility of combining UFT with irinotecan has also been investigated. A recent study of UFT plus folinic acid and irinotecan as first-line treatment in 55 patients with advanced colorectal cancer found this combination to be active and tolerable in both elderly patients (aged over 65 years; n = 27) and non-elderly patients (aged 65 years or under; n = 28) [4].

## References

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