

group and 64.7% (11/17) in the CS group. 18 patients had disease progression (NCS 10, CS 8); median TTP was 5.5 months in the NCS group and 3 months in the CS group, and average TTP was 5.3 months in NCS group and 3.1 months in CS group. The incidence of adverse events was similar for both groups. No adverse events of grade 3 skin rash or grade 3 infusion-related reactions were observed.

**Interpretation:** This study provides evidence that nimotuzumab combined with cisplatin and S-1 has better outcomes than cisplatin and S-1. Initial results show a benefit in TTP improvement and a potential improvement in OS, and the study is ongoing.

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#### P52 3T MRI DETERMINATION OF CIRCUMFERENTIAL RESECTION MARGIN IN RECTAL CANCER – CORRELATION WITH HISTOPATHOLOGY

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**Background:** Recent surgical trials show that in patients with rectal carcinoma, evaluating the involvement of the mesorectal fat and mesorectal fascia is more important than T staging for planning treatment. We studied the accuracy of 3T MRI for prediction of mesorectal fascia involvement and circumferential resection margin (CRM; shortest distance between tumour and mesorectal fascia) in patients with rectal cancer.

**Methods:** 40 consecutive patients with biopsy-proven rectal cancer from the Department of Colorectal Surgery were included in the study. 3T MR imaging was done after patients had a 4-h fast and cleansing water enema. T1-weighted and T2-weighted images were obtained, with high resolution images in 3 planes. The image series were evaluated after verification by an experienced gastrointestinal radiologist, and CRM measurements and mesorectal fascia involvement were documented. These results were compared with the final histopathology report.

**Findings:** Sensitivity, specificity, positive predictive value (PPV), and negative predictive value (NPV) of 3T MRI for prediction of CRM involvement was 100%, 33.3%, 61.9%, and 100%, respectively.

**Interpretation:** 3T MRI has high sensitivity and NPV, and low specificity and PPV for prediction of CRM involvement. The low specificity could be due to the high resolution of the images, which picked up areas of tumour reaction, increased flow, and oedema. This low specificity is compounded by the difficulty in assessing CRM in cachectic patients and in low anterior tumours. However, MR imaging has a high sensitivity and NPV for mesorectal fascia assessment, and is therefore indispensable for pre-operative staging of rectal cancer.

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#### P53 OPEN-LABEL, RANDOMISED, MULTICENTRE, PHASE 2A STUDY OF GAMBOGIC ACID INJECTION (THS) FOR TREATMENT OF ADVANCED CANCER

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**Background:** Gamboge Acid is a pure active compound isolated from the Camboge (Garcinia morella Desv), a traditional Chinese herb medicine. Based on preliminary results of the completed phase 1 study, this phase 2a study compared the efficacy and safety of different dosage schedules.

**Methods:** 47 patients were randomly assigned to one of two groups. Group A received a daily intravenous infusion of gamboge acid (THS) of 45 mg/m<sup>2</sup> every day for 5 days, every 2 weeks (n = 21). Group B received intravenous THS 45 mg/m<sup>2</sup> every other day five times, every 2 weeks (n = 26). All patients had two consecutive courses of treatment prior to safety and efficacy evaluation.

**Findings:** In group A, the objective remission rate (ORR) was 14.29% and overall disease control rate (DCR) was 76.2%, compared with an ORR of 0% and DCR of 61.5% in group B. Apart from ORR (with a insufficient value of zero) comparison of DCR was statistically significant ( $p = 0.0456$ ), with a positive relative risk and odds ratio and 95% confidence intervals. Adverse events or reactions were mainly grade 1 and 2, and were observed, in most cases, after patients received the trial drugs. The incidence rate of adverse events or reactions did not differ significantly between the two groups.

**Interpretation:** Preliminary results of this exploratory study showed favourable safety profiles for THS at 45 mg/m<sup>2</sup>, and DCR was higher for 5-day consecutive dosing of THS than for an every-other-day schedule.

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#### P54 DOSIMETRIC COMPARISON OF <sup>18</sup>FLT AND <sup>18</sup>FDG PET-CT IN CONTOURING BIOLOGICAL TUMOUR VOLUME IN THORACIC OESOPHAGEAL CARCINOMA

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