## Letter to the Editor

## Phase II-Study Vindesine + 5-Fluoro–Uracil Combination Chemotherapy in Advanced Colorectal Cancer

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FLUORO—URACIL as single agent remains the standard treatment in metastatic colorectal cancer with a response rate of approx. 20%, however of short duration and with minimal impact on survival[1]. Vindesine showed some activity in pretreated patients in phase I and phase II studies [2, 3].

We performed a phase II study with the combination vindesine plus Fluoro-Uracil as first line treatment in advanced colorectal cancer.

Of 21 patients, 13 had surgery, two radiotherapy and three surgery plus radiotherapy as local treatment before.

All patients had measurable disease; all had a Karnofsky index of 70 or higher. Treatment schedule: vindesine 2 mg/m<sup>2</sup> i.v. weekly for 6 weeks and every 2 weeks thereafter plus Fluoro-Uracil 375

mg/m<sup>2</sup> i.v. push weekly.

The dosage was reduced to 75% in case of haematologic toxicity grade I and to 50 in grade II. Response and toxicity evaluation took place after 6 weeks according to the WHO criteria [4].

No objective responses were observed; 11 patients had stable disease with a median time until progression of 12 weeks (range 10-30 weeks).

The toxicity was moderate: light nausea and vomiting in all patients, median haematologic toxicity grade I (grade 2 in two and grade 3 in one); we observed neurotoxicity grade 3 in two patients and alopecia grade 3 in four.

We conclude that this schedule is inactive in colorectal cancer.

## REFERENCES

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