Effectiveness of Cisplatin and Capecitabine regimen as the first line treatment compared to the DCF regimen in pationts referring to oncology clinic of Imam Khomeini hospital in Ardabil with advanced gastric cancer in 2017-2018.

Abstract

Background: Gastric cancer is the third leading cause of cancer death in the world. Ardabil province has the highest prevalence of this cancer in Iran. Chemotherapy is an essential part of treatment. Different chemotherapy regimens have been used, but the presence of toxicants is a limiting cause of treatment. Therefore, considering the importance of the subject and the side effects of the drugs used, we conducted a cross-sectional study to compare the two regimens of cisplatin, capecitabine, and DCF and effectiveness of the therapeutic response, complications, cost, and length of hospitalization.

Aim: The aim of this study was to introduce an effective chemotherapy regimen for patients with advanced gastric cancer with the cost and duration of hospitalization and complication were lower compared to conventional diets.

Materials and Methods: In this cross-sectional study, 53 patients with advanced gastric cancer were enrolled by census and retrospective sampling from October 2017 until the end of October 2018. 21 patients were on cisplatin, capecitabine and 32 were on DCF. Demographic findings, response rate, mortality rate, overall survival (OS) and progression-free survival (PFS), drug toxicity, and length of stay were compared.

Results: In cisplatin, capecitabine and DCF groups, complete response rate (CR) was 0% and 3.1%, relative response (PR) were 42.8% and 31.2%, and stable disease were 33.3% and 46.9%, and progression disease were 19.1% and 15.6%,

respectively. The overall response rate (ORR) was 42.8% and 34.3%, respectively. Also, among the drug side effects, only cisplatin-induced neuropathy was prominent, and other side effects and hospitalization associated with complications and costs were fewer.

Conclusion: The results of the present study showed that in patients with advanced gastric cancer, ORR, OS and PFS in cisplatin, capecitabine regimen are relatively equal in comparison with DCF regimen. Also toxicity and duration of hospitalization due to complications and cost of treatment with cisplatin and capecitabine were less. Therefore, seems more appropriate regimes.

Keywords: Advanced gastric cancer, Capecitabine, DCF, Survival rate, Toxicity.