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Systemic Chemotherapy With Cextuximab Plus CAPIRI for Patients With Liver Metastases From Colorectal Cancer

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Background: Surgical resection is standard of care for patients with liver metastases from colorectal cancer, but they have a poor prognosis due to relapse. We evaluated the effect of systemic chemotherapy with CAPIRI plus cetuximab compared with CAPIRI alone in patients with liver metastases from colorectal cancer.

Methods: Currently, 52 patients with liver metastases from colorectal cancer are included, of which 21 have wild type k-ras or are EGFR positive. All patients received six cycles of systemic chemotherapy. Patients received CAPIRI (irinotecan 170 mg/m² IV day 1 and capecitabine 1,000 mg/m² days 1–14. every 21 days or CAPIRI with cetuximab 400 mg/m² IV day 1, and 250 mg/m² IV thereafter. After chemotherapy, patients were assigned to an additional six cycles of chemotherapy or to surgery.

Results: After chemotherapy 8 patients underwent surgery. Six patients were EGFR positive or k-ras wild type. After 2 years of follow-up, 16 patients in the cetuximab group and 10 patients in the CAPIRI group are alive.

Conclusion: At this point in our analysis, results of the study show that adding cetuximab to chemotherapy with CAPIRI improve survival in patients with liver metastases from colorectal cancer.