

**International Society of Gastrointestinal Oncology**  
**2011 Gastrointestinal Oncology Conference**  
**September 15–17, 2011**  
[ABSTRACTS SELECTED FOR POSTER PRESENTATIONS](#)

**Esophageal/Gastric Cancer**

abstr 1126

**Concurrent Radiotherapy and Capecitabine as Adjuvant Treatment after Surgery for Gastric Cancer**

**Abbas H<sup>1</sup>**, Wessam A. El Sherief<sup>2</sup>, Mohamed Abou Elmagd Salem<sup>3</sup>, A.S. Salem<sup>3</sup>, Ahmed S. Mostafa<sup>4</sup>.

<sup>1</sup>Department of Radiation Oncology, South Egypt Cancer Institute, Assiut University, Egypt.

<sup>2</sup>Lecturer of clinical oncology at Cairo University, Kasr EL Aini school of Medicine

<sup>3</sup>Department of surgical Oncology, South Egypt Cancer Institute, Assiut University, Egypt.

<sup>4</sup>Assistant Professor ,general surgery , Cairo university

**Purpose:** Aim of this prospective, phase II trial was to evaluate efficacy and toxicity of adjuvant concurrent capecitabine and radiation in adenocarcinoma of the stomach after surgery.

**Patients and method:** The study included 30 patients having histologically proven adenocarcinoma of the stomach or gastroesophageal junction; stage Ib–IV (M0) after gastrectomy with D2 lymph node dissection. Patients received one cycle of capecitabine 1,000 mg/m<sup>2</sup> BID (Days 1–14) followed, on day 22, by radiotherapy 45 Gy in 5 weeks concurrently with capecitabine (825 mg/m<sup>2</sup>, BID). Four weeks after radiation therapy, they started another 3 cycles of capecitabine.

**Results:** Four patients could not complete their whole treatment course because of either progressive disease or G3 toxicity. Four patients presented with grade 3 toxicities; anemia (two patients), vomiting (one patient), and neutropenia (one patient). GIT toxicity was the most common toxicity while thrombocytopenia was mild. There was no grade 3/4 hand foot syndrome.

During a median follow-up period of 24 months, the 2-year disease free and overall survivals in this study were 63.3% and 70%, respectively. Eleven patients (36.7%) relapsed during follow-up. Loco-regional recurrence occurred in 5 (45.5%) of the relapsed patients. Peritoneal relapse was reported in 6 (55.5%) patients and 6 (55.5%) had distant metastases.

**Conclusion:** Oral capecitabine concurrently with radiation therapy is effective and safe with manageable toxicity as postoperative adjuvant therapy for gastric adenocarcinoma.