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## Primo autore

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## Area tematica

Gastrointestinal (colorectal) cancers

## Titolo

Monocentric survey about the use of Raltitrexed in the daily clinical practice for patients with metastatic colorectal cancer

## Testo

**Background**: The main setting of use of Raltitrexed for patients with colorectal cancer is when cardiac toxicity is feared or when a deficit of Dihydropyrimidine (DPD) dehydrogenase has been demonstrated. However, this drug is used as an alternative to fluororacil in patients with older age or in third of further line of treatment when exposure to fluoropyrimidines has been huge. However, data from recent clinical trials about these possible settings are scarce and case series can show the real clinical relevance of this drug. Here we describe our clinical experience in using raltitrexed in a tertiary care hospital with a specific Colorectal Cancer Unit.

**Patients and methods:** data about patients receiving Raltitrexed at our Institution since January 2015 were retrospectively collected by using electronical charts records. Patients' data and data about scheme of administration, response rate and toxicities were collected. Patients were analyzed according to the clinical setting of administration:

A) 1$^{st}$ line treatment in patients with cardiac comorbidities;

B) 1$^{st}$ line treatment in older patients;

C) third or further line treatment after FOLFOX and FOLFIRI;

D) Deficit of DPD

**Results:** globally since January 2015 thirty-two patients received Raltitrexed at our hospital, all for metastatic colorectal cancer (mCRC). Patients belonged to clinical setting A, B or C while none to group D.

The followiing Table resumes the main results of our survey:

| Group | N- median age - % male | Characteristics | Benefits | G3 or G4 toxicities* |
|---|---|---|---|---|
| A) Cardiac comorbidities | 6 pts – 70 years – 100% male | 100% 1st line, 50 % ECOG PS 1, 85,7% doublet | ORR 50% (2 pts not evaluable), CB 75% | 33,3% |
| B) Older Age | 2 pts – 82 years – 100% male | 100% 1st line, 100% monotherapy | ORR 50%, no SD | 100% |
| C)Further line | 24 pts – 64 years – 45,8% male | 33,3% 4th-6th line, 54% ECOG PS 1, 50% doublet (45% TOMOX) | ORR 0% (3 pts not evaluable),CB 9,5% Relief from symptoms 25% | 16,7% |
| Doublet = TOMOX or TOMIRI. ORR= overall response rate. CB = ORR + stable disease. | | | | |

Globally 11 patients (45,8%) had G0 or G1 toxicities while none experienced G3 renal failure from Raltitrexed.

**Conclusions**: the administration of Raltitrexed is a part of daily clinical practice at our center in patients with mCRC and cardiac comorbidities or older age with relevant efficacy but frequent severe toxicities. The use in the very advanced setting can bring a clinical benefit/relief rom symptoms in up to 25% of patients but with severe toxicities in up to 17%.

## Parole Chiave

1. Raltitrexed
2. Metastatic Colorectal Cancer
3. Safety

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