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A Meta-analysis of Platinum Plus Taxanes Regimen on Treating Advanced Non-small Cell Lung Cancer

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摘要

Background and objective The platinum-based plus a third-generation agent doublet chemotherapy regimen has been recommended as the standard first-line chemotherapy for advanced NSCLC by ASCO and NCCN. This study was aimed to evaluate the clinical efficacy and side effects of the Platinum plus Taxanes or other novel agent. Methods The databases PubMed, CENTRAL, EMBASE and Chinese Biomedical Literature database were retrieved by using the key words "non small cell lung cancer" or "Carcinoma, Non Small Cell Lung" so as to search the studies about the randomized controlled clinical trials, which compared Platinum plus Taxanes with Platinum plus other novel agents. A meta-analysis was conducted and the quality scores were evaluated according to the improved Jadad's score. Results Nine randomized controlled clinical trials with 4 703 patients were included. The overall response rate and 1 year survival rate of the two groups were not significantly different (RR=1.00, 95%CI: 0.91-1.11, P=0.95; RR=0.98, 95%CI: 0.84-1.15, P=0.83). The incidence rate of grade 3-4 leukopenia, neutropenia, anemia, nausea and vomiting in TP is much lower than that in platinum plus other novel agent. Sub-group analysis showed that the overall response rate and 1 year survival rate of TP aren't statistically different from NP or GP. The incidence rate of grade 3-4 leukopenia, neutropenia and anemia in TP is statistically lower than that in NP. The incidence rate of grade 3-4 anemia and thrombocytopenia in TP is statistically lower than that in GP. Conclusion The clinical efficacy of TP and platinum plus other novel agent is quite similar, but quite different from each other in side effects, which provides important evidence on selecting individual chemotherapy regimen.

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