

GP 方案和吉非替尼单药一线治疗非小细胞肺癌疗效比较

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Comparison of GP Regimen and Gefitinib in First Line Treatment of Advanced Non-small Cell Lung Cancer

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全文: PDF (116 KB) HTML (0 KB) 输出: BibTeX | EndNote (RIS) 背景资料

摘要 目的 对比分析以铂类为基础的GP(吉西他滨+ 顺铂)联合化疗和单药吉非替尼(IRESSA)一线治疗IIIB-IV期非小细胞肺癌的近期疗效和毒副作用。方法 60例IIIB~IV期从未接受过化疗的非小细胞肺癌患者中,单用吉非替尼治疗26例,GP方案治疗34例。吉非替尼组为吉非替尼250 mg/d; GP组为吉西他滨1250 mg/m²,第1,8天,顺铂75 mg/m²,第1天。每三周为一周期,两周期后评价客观疗效及不良反应。结果 两组总有效率吉非替尼组26.9%(7/26),GP组29.4%(10/34),P>0.05;疾病控制率吉非替尼组76.9%(20/26),GP组50.0%(17/34),P<0.05。GP组主要存在骨髓抑制和胃肠道反应毒性(P<0.05),吉非替尼组的毒性反应主要为皮疹和腹泻。结论 GP方案和吉非替尼单药一线治疗非小细胞肺癌(NSCLC)可获得一致的客观有效率,但吉非替尼单药的疾病控制率显著高于GP组,且其毒副反应较GP组轻微,患者均可完全耐受。吉非替尼单药口服可考虑作为治疗晚期化疗难耐受的NSCLC患者的一线方案。

关键词: 吉非替尼 吉西他滨 顺铂 非小细胞肺癌 化疗

Abstract: Objective Analyze comparatively the clinical efficacy and toxicity of GP (Gemcitabine + Cisplatin) regimen and single agent Gefitinib in first line treatment of IIIB~IV stage non-small cell lung cancer (NSCLC). Methods Sixty cases with stage IIIB~IV NSCLC pathologically proved were enrolled in this study. Oral Gefitinib 250mg daily were given to twenty-six cases; the other thirty-four cases were treated with Gemcitabine (GEM, 1250 mg/m²) on d1 and d8 and Cisplatin (DDP, 75 mg/m²) on d1. Every three weeks (21 days) as a cycle. The efficacy and adverse effects were evaluated after two cycles of treatment. Results The overall response rate (ORR) of single agent Gefitinib group was 26.9%(7/26), and that of combined GP group was 29.4%(10/34); there is no statistically significant difference (P>0.05). The clinical disease control rate of Gefitinib group was 76.9%(20/26), and that of GP group was 50.0%(17/34); the difference was significant (P<0.05). The main toxicities included the alimentary tract reaction and bone marrow depression were exist in combine GP group; The Major toxicity in IRESSA group is skin rash and diarrhea. Conclusion Gefitinib and GP regimen for advanced NSCLC have similar response rate (P>0.05). The former can get more clinical disease control rate, and has lower toxicity. Gefitinib may be accepted as first line in the treatment of patients with bad constitution who is intolerable for chemotherapy.

Key words: Gefitinib Gemcitabine Cisplatin Non-small cell lung cancer (NSCLC) Chemotherapy

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