Capecitabine and temozolomide as a promising therapy for advanced thymic atypical carcinoid

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Huangying Tan

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Abstract

Introduction

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- Introduce： Thymic atypical carcinoid (TAC) is a rare thymic neuroendocrine tumour that originates in the neuroendocrine system and lacks a standardized treatment. The combination of capecitabine (CAP) and temozolomide (TEM) is associated with an extremely high and long-lasting response rate in patients with metastatic pancreatic neuroendocrine tumours. However, there is little evidence showing that the CAPTEM regimen is effective for TAC. For patients with unresectable or metastatic atypical carcinoid of the thymus, few treatment options are available, and the treatment efficacy is not satisfactory. To explore the efficacy and safety of the CAPTEM regimen against TAC, we conducted a retrospective review.
- Methods： A total of 9 patients with advanced atypical carcinoid of the thymus in the China-Japan Friendship Hospital were treated with capecitabine (750 mg/m2 twice daily, days 1–14) and temozolomide (200 mg/m2 once daily, days 10–14) every 28 days between 2014 and 2018. The disease control rate （DCR）, progression-free survival (PFS) and adverse effects after treatment were analysed. The DCR was calculated by RECIST1.1. Progression-free survival was calculated by the Kaplan-Meier survival method.
- Results： A total of 9 patients (6 males and 3 females) were included. The median age at CAPTEM initiation was 50 years (range: 26–58). The median number of CAPTEM cycles was 8 (range: 3–23). The DCR was 89% (8/9), with 8 patients achieving stable disease. Only one patient (11%) showed progressive disease. The median PFS was 8 months. Since we applied vitamin B6 and ondansetron before taking the drugs, the side effects of this regimen are very small. Adverse reactions were all below the level 3 myelosuppression, digestive tract reaction.
- Conclusion:Our results suggest that the CAPTEM regimen may be effective and well tolerated for the treatment of TAC. More evidence is needed to validate the effectiveness of this regimen.
- Keyword:neuroendocrine tumour, thymic atypical carcinoid, capecitabine, temozolomide

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Methods

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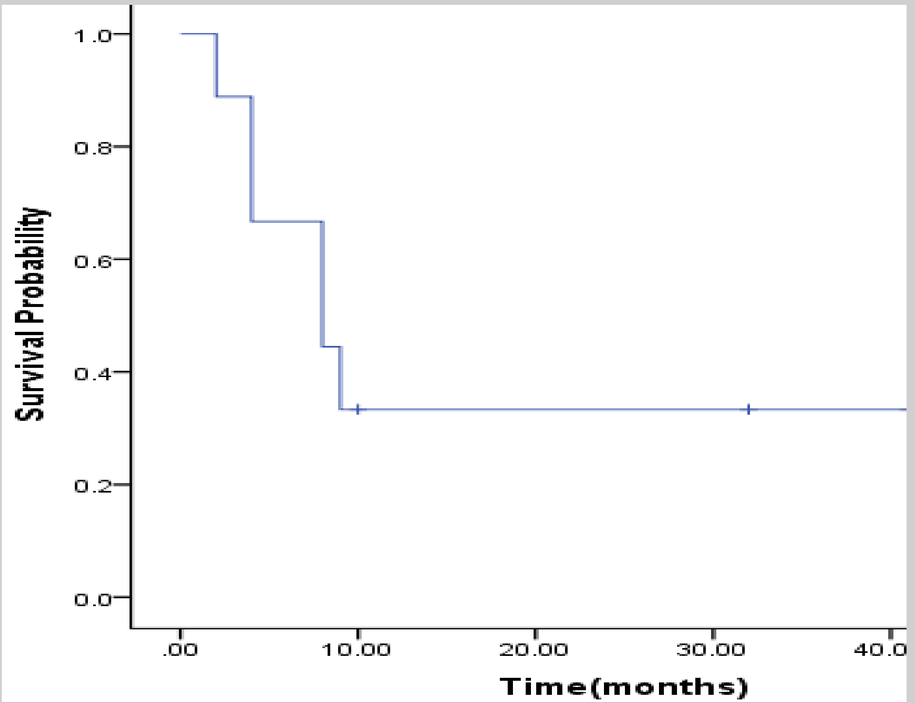

Figure 1. Progression-free survival (PFS) from the date of the beginning of the CAPTEM regimen for the entire cohort. Median PFS for the entire cohort was 8 months.

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