



The Role of Capecitabine/Temozolomide (CAPTEM) In Metastatic Neuroendocrine Tumors



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Introduction

- Neuroendocrine Tumors (NETs) are commonly treated via multimodality therapy.
- The combination of CAPTEM has been suggested as a treatment option for patients with metastatic NETs.
- We report the findings from the Ochsner/Louisiana State University Neuroendocrine (NET) Program.

Methods

- Twenty-nine patients who had been placed on CAPTEM at the Neuroendocrine Tumor Program were identified via an eVELOs patient database.
- Patients with histologically confirmed NETs who received at least one cycle of CAPTEM were included.
- Rate of Response (RR) was evaluated by RECIST 1.1.
- Progression-Free Survival (PFS) and Overall Survival (OS) were calculated by the Kaplan-Meier Survival Method.
- Dual LSU Health Sciences Center and Ochsner Medical Center-Kenner Institutional Review Board approval was attained.

Results

Patient Characteristics (N=29)	N (%)
Median Age at CAPTEM Initiation (range)	58 (26-77)
Median Number of Cycles (range)	8 (1-55)
Race	
•Caucasian	18 (62%)
•African-American	7 (24%)
•Other	4 (14%)
Sex	
•Male	17 (59%)
•Female	12 (41%)
Primary Tumor Location	
•Small Bowel	9 (31%)
•Pancreas	15 (52%)
•Lung	3 (10%)
•Rectum	2 (7%)
Tumor Grade	
•Low	19 (66%)
•Intermediate	2 (7%)
•High	2 (7%)
•Undefined or Unknown	6 (21%)

Results

Response by Primary Tumor Site

	N, (%)	Partial Response, n (%)	Partial Response + Stable Disease, n (%)
Small Bowel	9 (31%)	2 (22%)	7 (78%)
Pancreas	15 (52%)	3 (20%)	8 (53%)
Lung	3 (10%)	0	2 (67%)
Rectum	2 (7%)	0	2 (100%)

CAPTEM Treatment Toxicities

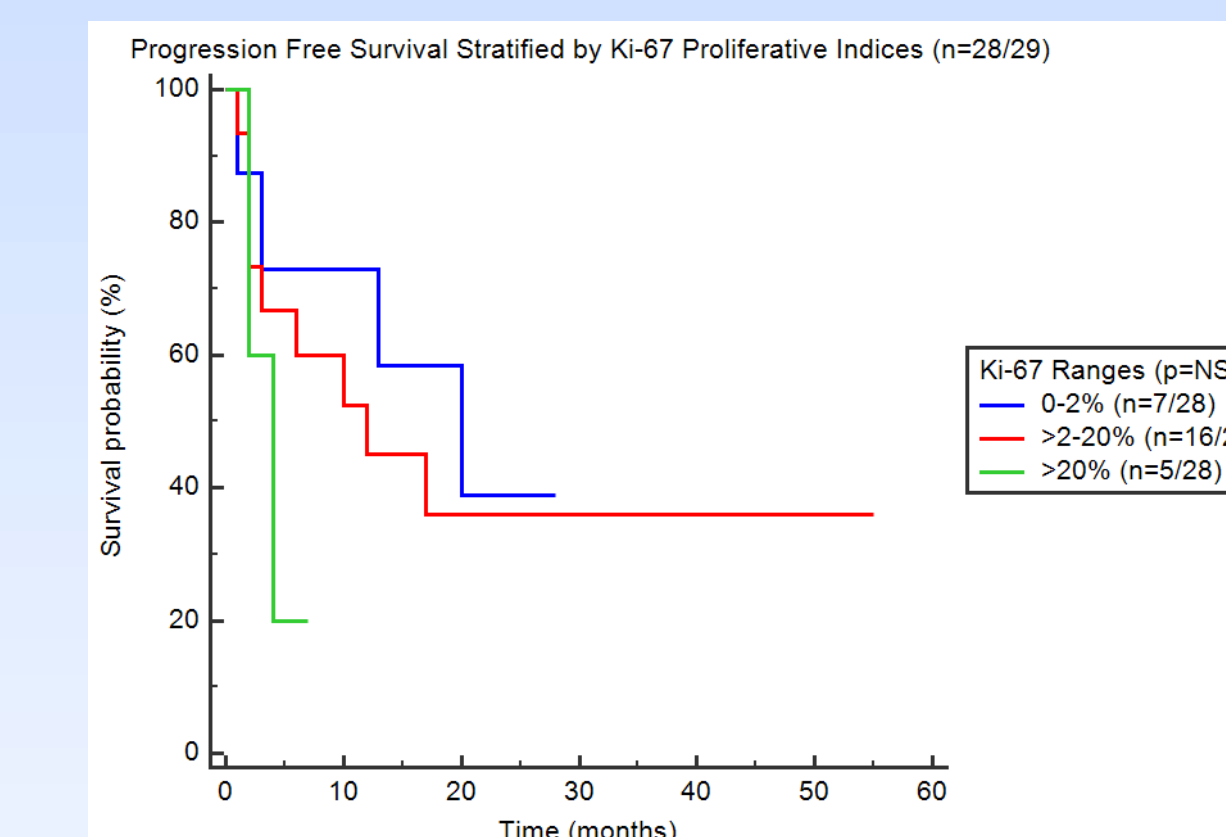
Toxicity	N (%)
Cytopenias	19 (66%)
Nausea	13 (45%)
Hand/Foot	9 (31%)
Fatigue	10 (34%)

- Median Overall Kaplan-Meier Survival was not reached.
- **2-year Kaplan-Meier Survival Rate = 86%**
- **Median PFS = 12 months**

Results

Response by Ki-67 Proliferative Index

Ki-67 Ranges	N, (%)	Partial Response, n (%)	Partial Response + Stable Disease, n (%)
0-2%	8 (28%)	1 (13%)	6 (75%)
>2-20%	16 (55%)	3 (19%)	11 (69%)
>20%	5 (17%)	1 (20%)	2 (40%)



Conclusion

- Although adverse reactions were experienced, this regimen was generally well-tolerated.
- For non-surgical candidates, CAPTEM can provide clinical benefit regardless of primary disease site or Ki-67.
- Additional prospective data is eagerly awaited.