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Study on the Treatment of Advanced Gastroenteropancreatic Neuroendocrine Tumors: Traditional Chinese Medicine Combined with Somatostatin Analogues

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BACKGROUND: At present, there are few reports on the treatment of GEP-NET with traditional Chinese medicine. The purpose of this study is to observe the efficacy of traditional Chinese medicine combined with SSA in the treatment of advanced GEP-NET.

METHODS: From June 2012 to January 2019, 50 patients with advanced GEP-NET who were treated regularly by traditional Chinese medicine combined with SSA in Chin-Japan Friendship Hospital were retrospectively analyzed, including 26 males and 24 females, with a median age of 53(20-81). Fifteen patients received first-line treatment with traditional Chinese medicine combined with SSA, and 35 patients received other therapy before. The primary site including 23 cases of pancreas, 23 cases of gastrointestinal tract, and 4 cases with unknown primary site. Seven cases were NET G1, 37 cases were NET G2, 5 cases were NET G3, and 1 case was unknown. All patients were treated with traditional Chinese medicine. They were also treated with octreotide LAR 20-40mg/21-28d, or lanreotide LAR 40mg/10-14d. RESIST 1.1 was used to evaluate the tumor response every 2-4 months. The main end point was PFS.

RESULTS: As of February 28, 2019, only 6 of 50 patients died, with a median follow-up of 29.0 months (5.6-86.5). The median OS and PFS were not reached. Thirty-two patients received SSA combined with traditional Chinese medicine only, and the other 18 patients received other treatments. A total of 14 patients developed disease progression, 11 patients turned to other treatment after

stable disease, the remaining 25 patients with stable disease still receiving SSA combined with traditional Chinese medicine. No CR or PR was observed, with an objective response rate of 0%. 44 patients had SD, and the SD rate was 88.0%.

CONCLUSION: Compared with SSA alone, traditional Chinese medicine combined with SSA can significantly prolong PFS in patients with advanced GEP-NET.