A comparison of S1 and S1 with Nedaplatin in definitive chemoradiation in unresectable locally advanced thoracic esophageal cancer patients

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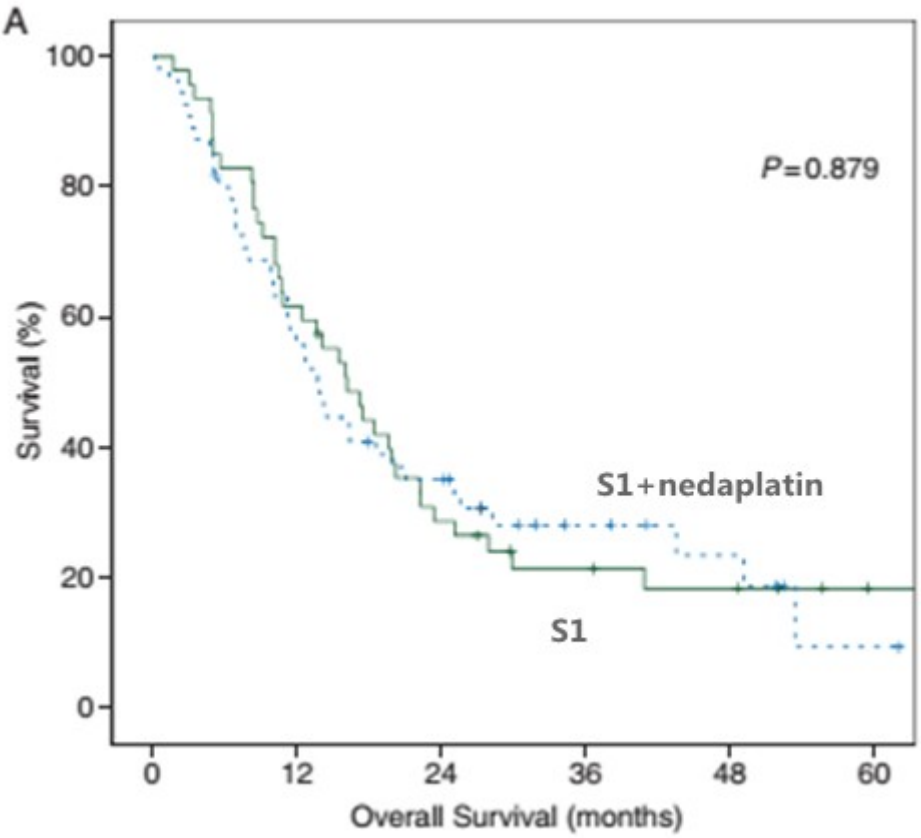
Abstract



purpose: in unresectable locally advanced thoracic esophageal cancer patients, compared survival and toxicity rates between S1 and S1 with Nedaplatin in definitive chemoradiation.

Materials and methods: This singlecenter study included 58 patients 30 patients received S1 with Nedaplatin and 28 patients S1 monotherapy in definitive chemoradiation

Results: Overall survival (OS) was not different between the both regimens[P = 0.879, hazard ratio (HR) 0.97 [confidence interval (CI) 0.62–1.51]}, with a median survival of 16.1 (CI 11.8–20.5) and 13.8 months (CI 10.8–16.9). Median disease-free survival (DFS) was comparable [P = 0.760, HR 0.93 (CI 0.60–1.45)] between the S1 with Nedaplatin group [11.1 months (CI 6.9–15.3)] and the S1 group [9.7 months (CI

5.1 – 14.4)]. High clinical T stage (cT4) was not related to OS and DFS in a

univariate analysis (P = 0.250 and P = 0.201). A higher percentage of patients completed the S1 regimen (82% versus 57%, P = 0.010). Hematological and nonhematological toxicity (≥grade 3) in the S1group (4% and 18%) was significantly lower than in the
S1 with Nedaplatin (19% and 38%, P = 0.001).
Conclusions: In this study, we showed comparable outcome, in terms of DFS and OS for S1 compared with S1 with Nedaplatin as dCRT treatment in EC patients. Toxicity rates were lower in the S1 group together with higher treatment compliance. S1 as an alternative treatment of S1 with Nedaplatin is a good candidate regimen for further evaluation.