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XLOT Regimen Instead of FLOT Regimen in the Primary Treatment for Patients with Locally Advanced and Metastatic Gastric Cancer

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Purpose: To evaluate the efficacy and safety of docetaxel plus oxaliplatin and capecitabine (XLOT) in the treatment of locally advanced and metastatic gastric adenocarcinoma.
Methods: A total of 32 locally advanced gastric cancer (LAGC) and metastatic gastric cancer (MGC) patients in between 2019 to 2021 were enrolled into this study. Patients received XLOT regimen (docetaxel 50 mg/m² and oxaliplatin 85 mg/m² intravenous infusion on day 1, and capecitabine 2000 mg (day 1-14) orally. Treatment was repeated every 3 weeks.
Results: All 32 patients were assessable for evaluation. The median age of 32 patients was 59.5 (26-79) years. The median cure count was 5 (1-11), and the median follow-up duration was 7 (3-19) months. The numbers of patients with compelete responsens (CR), partial responses (PR), stable disease (SD), and progressive disease (PD) were 6 (18.8%), 19 (59.4%), 5 (15.6%), and 2 (6.3%), respectively. The objective response rate (ORR) was 78.2%, with the disease control rate (DCR) of 93.8%. Median progression free survival (mPFS) and overall survival (mOS) were 11.7 (9.6-13.9) and 18.9 (15.4-22.3) month, respectively. The most common grade 3/4 toxicities were hematological toxicities. The most common toxicity was neutropenia which was observed in 18 (56.3%) patients. The most common grade 3/4 nonhematological toxicities were fatigue, nausea, vomiting, diarrhea.
Conclusion: The XLOT regimen demonstrated a promising efficacy as the first line regimen in treating locally advanced and metastatic gastric cancer patients. Toxicities were tolerated and controllable.

Anahtar Kelimeler: capecitabine, docetaxel, Locally advanced and metastatic gastric cancer, oxaliplatin