

### Phase II trial of irinotecan and cisplatin with concurrent radiotherapy in limited-disease small cell lung cancer

Yong Wha Moon, M.D.<sup>\*</sup>, Joo Hyuk Sohn, M.D., Chang Geol Lee, M.D.<sup>1</sup>, Gwi Eon Kim, M.D.<sup>1</sup>,  
Kyung Young Chung, M.D.<sup>2</sup>, Joon Chang, M.D., Se Kyu Kim, M.D., Young Sam Kim, M.D.,  
Chul Kim, M.D., Byoung Wook Choi, M.D.<sup>3</sup>, Joo Hang Kim, M.D.

Yonsei Cancer Center, Department of Internal Medicine, Radiation Oncology<sup>1</sup>, Thoracic and Cardiovascular Surgery<sup>2</sup>, and Radiology<sup>3</sup>, Yonsei University College of Medicine, Seoul, Korea

**Purpose** : We performed a phase II trial of irinotecan and cisplatin with concurrent radiotherapy in limited-disease small cell lung cancer (LDSCLC) to evaluate the efficacy and toxicity of this protocol. **Methods** : Chemotherapy of irinotecan (60mg/m<sup>2</sup>, days 1, 8 and 15) and cisplatin (40mg/m<sup>2</sup>, days 1 and 8) were repeated every 4 weeks until maximum 6 cycles. Radiotherapy of 2Gy/day was commenced on day 1 of second chemotherapy cycle upto a total of 54Gy. Prophylactic cranial irradiation was performed in the patients who achieved complete response (CR) after completion of chemotherapy.

**Results** : 22 patients were enrolled from December 2002 to June 2004. The median follow-up duration was 10.5 months. Median age was 63 years and the ratio of male : female was 19:3. ECOG performance status was 1 in 19 and 2 in 3 patients. Evaluation of response and toxicity was done in all the patients. Response rate was 81.8% (18 patients) with CR rate of 59.1% (13 patients) under intent-to-treat analysis. Median cycles of chemotherapy administered was 6 (range, 1-6). Relative dose intensity of irinotecan and cisplatin were 66.7% and 83.3%, respectively. The median progression-free and overall survival durations were not reached. One-year progression-free and overall survival rates were 66.4% and 80.1%, respectively. The dominating toxicity was neutropenia with a grade 3/4 of 34.7% (34/98 cycles). Grade 3/4 nonhematological toxicities were anorexia (22.7%, 5/22 patients), diarrhea (18.1%, 4/22), nausea (18.1%, 4/22), esophagitis (18.1%, 4/22), and hyperbilirubinemia (4.5%, 1/22). There was one treatment related death because of sepsis.

**Conclusion** : Irinotecan and cisplatin with concurrent radiotherapy was effective and tolerable in limited-disease small cell lung cancer.

### 전이성 유방암환자에서 일차항암제로 Herceptin과 Taxane의 병행요법

국립암센터 임상시험센터 및 유방암센터 임형석, 양기영, 이은숙, 노정실

유방암조직의 20-30%에서 HER2가 과발현되며, Herceptin은 인간화된 항 HER2 항체로서 HER2 과발현 재발성 유방암환자의 치료제로 적용되고 있다. 전임상 시험 및 유방암환자류 대상으로 한 임상에서 Herceptin은 단독 투여시보다 항암화학제와 병행투여시 반응을 및 생존율이 향상되는 결과가 보고되어 있다.

연구자들은 2002년 4월부터 2004년 8월까지 국립암센터에 내원한 HER2 과발현된 재발 혹은 제4기 유방암환자(N=18)로서 일차항암제로 Herceptin과 paclitaxel(N=14) 혹은 Herceptin과 docetaxel(N=4)을 병행투여받았던 환자의 치료결과에 대하여 후향적 분석을 시행하였다.

1)18명 환자의 중앙연령 49세(35-70), 제4기유방암, 4명, 재발유방암, 14명, 질병장기: 유방 4명, 폐 11명, 간 6명, 림프절/피부 11명, 뼈 11명, ER양성 8명, PR양성 6명, HER2양성(3+ 17명, FISH+ 1명), 간기능정상 17명

2)반응: 평가가능 14명중 PR 71.4%, SD 21.4%, PD 7.1%, 질병진행까지기간: 50주(중앙값)

3)뇌전이: 치료시작후 2명

이상의 결과 Herceptin과 taxane의 병행요법을 제한된 숫자의 전이성유방암환자에서 일차요법으로 투여시 반응율이 71.4%, 질병진행까지기간이 50주로 외국문헌의 결과와 유사한 우수한 효과를 보였다.