

Effects of chemoradiation therapy by using capecitabine on gastric cancer patients

20 September 2010

A research team from Singapore reviewed the outcome of patients with resected gastric cancers treated with capecitabine and radiation compared to 5-fluorouracil with radiation or fluoropyrimidine-based chemotherapy only. They found that survival of patients treated with capecitabine and radiation was comparable to the other two conventional treatments

More information: Tham CK, Choo SP, Poon DYH, Toh HC, Ong SYK, Tan SH, Wang MLC, Foo KF. Capecitabine with radiation is an effective adjuvant therapy in gastric cancers. World J Gastroenterol 2010; 16(29): 3709-3715 www.wjgnet.com/1007-9327/full/v16/i29/3709.htm

Gastric cancer is a major cause of cancer deaths in the world. The outcome of large gastric tumors and those with lymph node involvement remains poor after surgical resection. The optimal adjuvant therapy after surgical resection remains to be determined. The most common strategies in the adjuvant treatment of gastric cancers include fluoropyrimidine-based chemotherapy with or without radiation. The introduction of capecitabine has largely replaced continuous-infusion 5-fluorouracil (5-FU) owing to its ease of administration. However, its efficacy is not proven in randomized phase III trials involving gastric cancers.

Provided by World Journal of Gastroenterology

A research article published on August 7, 2010 in the World Journal of Gastroenterology addresses this question. In this retrospective review study, the authors examined the role of capecitabine with radiation and compared its efficacy to the 5-FU with radiation regimen and fluoropyrimidinebased chemotherapy alone.

This study showed that capecitabine with concurrent radiation was as effective as 5-FU with radiation or fluoropyrimidine-based chemotherapy alone without radiation when given as adjuvant treatment for locally advanced gastric cancer.

The result from this hypothesis-generating study provides the basis for a further prospective study in evaluating the role of radiation with concurrent capecitabine as adjuvant therapy in resected gastric cancers.



APA citation: Effects of chemoradiation therapy by using capecitabine on gastric cancer patients (2010, September 20) retrieved 11 October 2022 from https://medicalxpress.com/news/2010-09-effects-chemoradiation-therapy-capecitabine-gastric.html

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