

# Induction chemo beneficial in locally advanced pancreatic CA

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For most patients with locally advanced pancreatic carcinoma (LAPC), induction with a combination of gemcitabine and oxaliplatin (GEMOX) followed by chemoradiotherapy (CRT) is feasible, resulting in clinical benefit, a chance of resectability, and improved survival, according to a study published online July 6 in *Cancer*.

(HealthDay) -- For most patients with locally advanced pancreatic carcinoma (LAPC), induction with a combination of gemcitabine and oxaliplatin (GEMOX) followed by chemoradiotherapy (CRT) is feasible, resulting in clinical benefit, a chance of resectability, and improved survival, according to a study published online July 6 in *Cancer*.

Francesco Leone, M.D., of the University of Turin in Candiolo, Italy, and colleagues conducted a single-institution study involving 39 patients with LAPC who were treated with GEMOX induction, followed by [gemcitabine](#) twice weekly, with concurrent radiotherapy for those who did not progress.

The researchers found that induction and maintenance treatments were well tolerated. Twenty-nine patients obtained disease control, two progressed after GEMOX induction therapy, and a further seven patients progressed after CRT. Median progression-free survival (PFS) at a median of 13 months of follow-up was 10.2 months, but varied from 9.1 months in those with unresectable disease to 16.6 months in those who were borderline resectable ( $P = 0.056$ ). The median overall survival was 16.7 months, ranging from 13.3 for patients with unresectable disease to 27.8 for those with borderline resectable disease ( $P = 0.045$ ). Following treatment, 11 patients were able to undergo a successful resection; this was associated with significantly improved PFS (19.7 versus 7.6 months) and median overall survival (31.5 versus 12.3 months), compared with nonresected patients.

"In conclusion, a regimen of [induction chemotherapy](#) with GEMOX followed by gemcitabine-based CRT for LAPC is feasible and well tolerated," the authors write. "A high disease control rate and [clinical benefit](#) are achievable in most patients."

**More information:** [Abstract](#)  
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