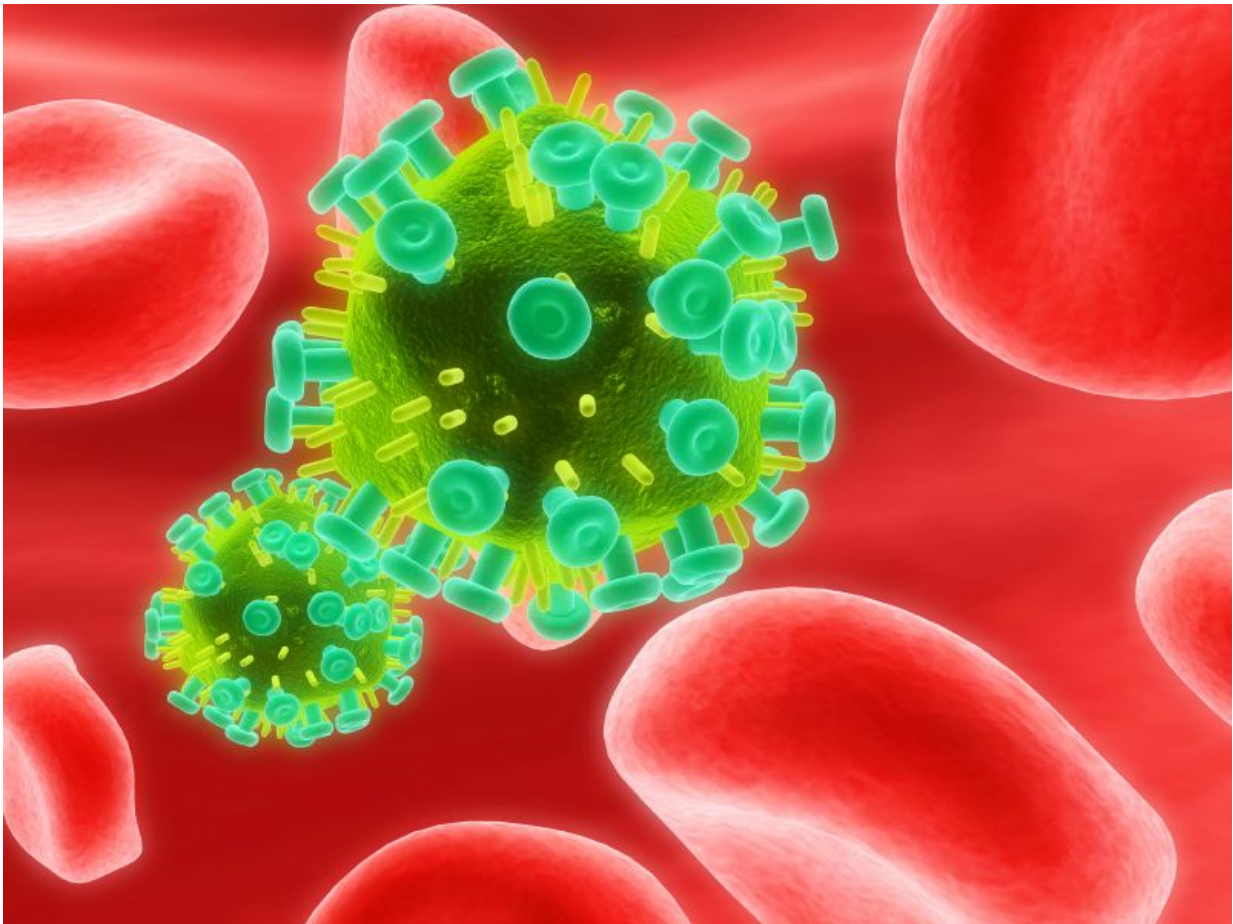


Cetuximab + chemoradiation can cure HIV-associated anal cancer

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(HealthDay)—Definitive chemoradiation (CRT) can potentially cure

HIV-associated squamous cell carcinoma of the anal canal (SCCAC), with the addition of cetuximab resulting in less locoregional failure (LRF), according to a study published online Dec. 12 in the *Journal of Clinical Oncology*.

Joseph A. Sparano, M.D., from the Montefiore Medical Center in Bronx, N.Y., and colleagues examined whether adding cetuximab to CRT would reduce LRF in 45 patients with stage I to III SCCAC and HIV infection. Participants received 45 to 54 Gy radiation therapy to the primary tumor and regional lymph nodes plus concurrent cetuximab and two cisplatin and fluorouracil cycles. Assuming a 35 percent LRF rate from historical data, the study was designed to detect at least a 50 percent reduction in three-year LRF.

The researchers found that the three-year LRF rate was 42 percent by binomial proportional estimate using the prespecified end point of LRF or alive without LRF, and was 20 percent by Kaplan-Meier estimate using definitions and methods consistent with historical data. The three-year rates for progression-free and overall survival were 72 and 79 percent, respectively, by Kaplan-Meier estimate. Twenty-six percent had grade 4 toxicity and 4 percent had treatment-associated deaths.

"HIV-associated SCCAC is potentially curable with definitive CRT," the authors write. "Although addition of cetuximab may result in less LRF, the 20 percent recurrence and 26 percent grade 4 toxicity rates indicate the continued need for more-effective and less-toxic therapies."

Several authors disclosed financial ties to pharmaceutical companies, including Eli Lilly, the manufacturer of cetuximab.

More information: [Full Text \(subscription or payment may be required\)](#)

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