

Nonoperative approach feasible in advanced colon cancer

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Treating patients with surgically unresectable metastatic colon cancer and an asymptomatic intact primary tumor with bevacizumab and infusional fluorouracil, leucovorin, and oxaliplatin chemotherapy is a viable and safe option, according to research published online Aug. 6 in the *Journal of Clinical Oncology*.

(HealthDay) -- Treating patients with surgically unresectable metastatic colon cancer and an asymptomatic intact primary tumor with bevacizumab and infusional fluorouracil, leucovorin, and oxaliplatin (mFOLFOX6) chemotherapy is a viable and safe option, according to research published online Aug. 6 in the *Journal of Clinical Oncology*.

Laurence E. McCahill, M.D., of the University of Pittsburgh, and colleagues conducted a multicenter, prospective, phase II trial involving 90 patients with surgically unresectable metastatic colon cancer and an intact asymptomatic primary tumor. Participants were treated with mFOLFOX6 plus [bevacizumab](#) without resection of the primary tumor.

During a median follow-up of 20.7 months, the researchers found that 14 percent of patients experienced major morbidity related to their intact primary tumor, with two patients dying and 10 requiring surgery for obstruction, perforation, or abdominal pain. The cumulative incidence of major morbidity over 24 months was 16.3 percent. Eight tumors were resected without a morbidity event for

attempted cure, and three others were resected for other reasons. Two patients only experienced minor morbidity events. The median overall survival was 19.9 months.

"Overall, this study identified that an initial nonoperative approach, using mFOLFOX6 combined with bevacizumab is a viable and safe option for patients faced with the dilemma of advanced, likely incurable [colon cancer](#)," the authors write. "The majority of patients (84 percent) were able to receive initial systemic therapy to better control distant disease and to avoid potential delays and complications or death related to initial surgical resection without compromising overall survival."

Two authors disclosed financial ties to the pharmaceutical industry.

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