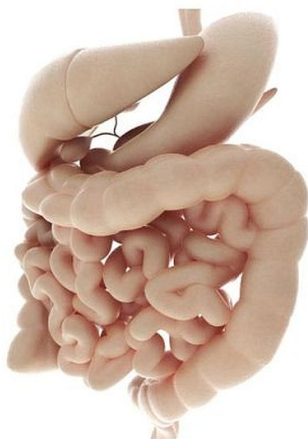


ASCO: new regimen effective for locally advanced rectal cancer

19 January 2016



patients who were able to undergo radical surgery after radiation therapy was similar in the groups. The experimental group had significantly lower rates of acute toxicity (74 versus 83 percent; $P = 0.007$). Disease-free survival at three years did not differ significantly between the groups (53 percent in the experimental group versus 52 percent in the chemoradiation group; $P = 0.74$). Overall survival was improved in the experimental versus the chemoradiation group (73 versus 64.5 percent; $P = 0.055$).

"The new regimen has similar efficacy but causes fewer side effects and is more convenient for patients," a coauthor said in a statement. "It is also less costly compared to standard chemoradiation."

More information: [Press Release](#)
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(HealthDay)—For patients with rectal cancer, short-course radiation followed by chemotherapy appears similar in effectiveness to a five-week chemoradiation regimen, according to a study presented at the American Society of Clinical Oncology's annual Gastrointestinal Cancers Symposium, held from Jan. 21 to 23 in San Francisco.

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Krzysztof Bujko, M.D., Ph.D., from the Maria Sklodowska Curie Memorial Cancer Center in Warsaw, Poland, and colleagues enrolled 515 patients with locally advanced [rectal cancer](#) (cT3 or cT4) and assigned them to chemoradiation (fluorouracil, leucovorin, and oxaliplatin chemotherapy with radiation) or a short-course radiation regimen (five days of [radiation therapy](#)) followed by the same [chemotherapy regimen](#) (experimental group). Patients from both groups underwent surgery about 12 weeks after starting radiation therapy.

The researchers found that the proportion of

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