

New test could help select the best treatment for bowel cancer patients

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A new test could help patients with advanced bowel cancer get the best treatment for their disease, according to a Cancer Research UK clinical trial published today in *JAMA Oncology*.

The trial - which was run from St. James's University Hospital and University of Leeds - studied almost 1,200 [patients](#) at hospitals all over the UK with advanced [bowel cancer](#) whose first [chemotherapy treatment](#) had stopped working and who were starting a second chemotherapy treatment called irinotecan.

In the trial, each patient had their cancer tested for a gene called RAS. If there were no faults in the gene, they went on to receive irinotecan either alone or together with a new targeted cancer drug called panitumumab. The research showed that some patients benefited from adding the new drug but others did not and further studies were carried out to find out why.

Tumour samples from 323 of the trial patients were tested for levels of two proteins - called AREG and EREG - which are produced by some [cancer cells](#) to help them grow. Panitumumab blocks these proteins, stopping tumours developing.

The team showed that for patients with high levels of the proteins, the drug combination stopped cancer growth for nearly twice as long as irinotecan alone - an average of eight months compared with four and a half months. But the drug did not work for patients with low levels of the

proteins.

Study author Dr Jenny Seligmann, Cancer Research UK clinical trial fellow from the University of Leeds, said: "These results are very promising. Our task now is to develop a fast and reliable test for the two proteins that can be offered to patients before they start treatment, to help select the right drugs to use.

"Thanks to research we now have new cancer drugs that work in very specific ways, targeting individual rogue molecules in cancer cells. These drugs can be of enormous help to some patients, but not others - so as well as developing new treatments it is vital that we find the right way to select the best treatment for each individual patient. This will help patients to have more time with their loved ones, and to avoid the distress of going through ineffective treatment."

Around 41,000 people are diagnosed with bowel cancer and around 16,000 people die from the disease in the UK every year.

Nell Barrie, Cancer Research UK's senior science information manager, said: "Bowel cancer is the second biggest cancer killer so it's vital that we find better ways to tackle this disease once it's spread. One of the most important ways Cancer Research UK helps to improve treatments and make them kinder is by investigating exactly who will or won't benefit. This research may lead to new options for patients with advanced bowel cancer, which can be hard to treat - the next step is to find out if this can be used by doctors in the clinic."

More information: Seligmann et al. Combined epiregulin and amphiregulin expression levels as a predictive biomarker for panitumumab in RAS-wt advanced colorectal cancer. *JAMA Oncology*.

Provided by Cancer Research UK

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