The presence of BRAF mutations at codon 600 was determined using a mutation-specific quantitative polymerase chain reaction. BRAF mutation status was available for approximately 44% of the patients in the primary population: multivariate analysis. There were some imbalances in baseline characteristics between patients with wild-type and mutant tumors compared with patients with wild-type tumors. The low incidence of tumor mutation status was exclusive. The proportion of subpopulation (%)

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<tr>
<th>Subpopulation</th>
<th>KRAS wt</th>
<th>BRAF wt</th>
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Conclusions

- The clinical benefits of adding cetuximab to standard chemotherapy were greater in patients with wild-type disease than in the primary analysis population.
- The HR [95% CI]: 0.84 [0.64–1.11] p=0.22 Cetuximab + FOLFIRI (n=156): median 26.4 months FOLFIRI (n=17): median 10.3 months.
- There was no statistically significant difference between the treatment arms in OS in any of the subgroups.
- There were some imbalances in baseline characteristics between patients with wild-type and mutant tumors compared with patients with wild-type tumors.

References