Background: The efficacy of the BETTER study in combination with chemotherapy was investigated in patients with advanced progressive digestive neuroendocrine tumors (DigNET)(#7). A significant difference between baseline and day 2 of cycle 1 was observed (p=0.078). These data suggested that an early increase in CEC levels under combined bevacizumab and chemotherapy might be correlated with an adverse outcome in DigNET patients.

Results:

- Median CEC levels were low at BL (4 CEC/mL) and similar for the 2 groups. CEC levels significantly increased from baseline to day 2 of cycle 1 in both groups (p=0.078).

- When groups were examined separately, baseline CEC did not seem to be different in patients with or without progression during the first 2 years.

- A trend towards an association between early increases in CEC levels and treatment outcomes was observed.

- Similarly, no correlation was found between baseline CEC levels or changes in CEC levels and progression or death in the 2 pooled Groups.

- A significant increase in CEC levels between baseline and the second day of cycle 1 was observed in patients with metastatic hepatic carcinomas treated with bevacizumab in single-agent phase II6.

- Such an increase in CEC levels was also observed in hepatocarcinoma patients treated with bevacizumab and chemotherapy in most DigNET patients.

- CEC decreases from baseline to day 2 of cycle 1 were associated with a reduced risk of progression in DigNET patients.

- The study was conducted and funded by Roche.

- Medical writing/editing support was provided by Eltium - France.


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