



CONFERENCE ABSTRACT

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Outcome of patients with advanced gastrointestinal stromal tumour on second line sunitinib at Hospital Kuala Lumpur

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Abstract: Background: Sunitinib has been proven in randomized controlled clinical trials to be the treatment of choice in patients with advanced gastrointestinal stromal tumor (GIST) after failure of imatinib. The aim of this study was to determine the progression-free survival of patients who received sunitinib for the above indication. **Methods:** This was a retrospective study. Patients treated with sunitinib for advanced GIST after failure of imatinib from 2010 – 2016 were identified from hospital records. Results were computed using SPSS v24. **Results:** 12 patients were identified from the hospital records. Mean age was 46.6 years (range 26 – 67). Male to female ratio was 1:0.7. More than 50% were Chinese population. The progression free survival (PFS) was 14.9 months (95% CI = 11.1 – 18.6 months). The overall survival (OS) was 15.4 months (95% CI = 10.0 – 20.9 months). Mean relative dose intensity (RDI) was 89%. PFS and OS were not affected by age, gender, ECOG performance status and relative dose intensity of sunitinib. Most common side effects were anemia (66.6%), palmar plantar erythrodysesthesia (50%), lethargy (41.6%) and mucositis (33.3%). Anemia was the most common grade 3 adverse events (33.3%) followed by palmar plantar erythrodysesthesia (16.6%), thrombocytopenia (8.3%), neutropenia (8.3%), diarrhea (8.3%), nausea/vomiting (8.3%), lethargy (8.3%) and hypertension (8.3%). **Conclusion:** This study depicts real life data of patients treated with sunitinib after progression on imatinib for advanced GIST. Sunitinib appears to be an effective treatment for patients with imatinib resistant/intolerant GIST. The PFS of 14.9 months and OS of 15.4 months are comparable to published literature. NMRR ID: 33741.

Keywords: sunitinib; gastrointestinal stromal tumor; treatment

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