

Gemcitabine and carboplatin treatment in advanced NSCLC: a retrospective evaluation including elderly patients

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ABSTRACT

Background. Carboplatin-containing regimens are sometimes preferred for patients with advanced non-small cell lung cancer.

Methods. Eighty-three patients with stage III-IV non-small cell lung cancer received 3 to 4 cycles of carboplatin AUC 5 on day 2 and gemcitabine 1250 mg/m² on days 1 and 8 every 21 days.

Results. The overall response rate was 43.4%. Results obtained from elderly and non-elderly groups were compared using the logrank method. Median overall survival and progression-free survival were 11 and 7 months, respectively (12 and 7 months, non-elderly group; 6.5 and 5 months, elderly group, $P = 0.28$ and 0.25 respectively). Grade 3-4 toxicity included neutropenia, thrombocytopenia, anemia, nausea/vomiting, and diarrhea. Incidences of grade 3-4 toxicity were similar for elderly and non-elderly patients.

Conclusions. Data confirm that carboplatin-gemcitabine is an active and well-tolerated regimen in advanced non-small cell lung cancer and could be investigated in elderly patients.

Key words: carboplatin, chemotherapy, elderly, gemcitabine, non-small-cell lung cancer.

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