

## 化疗后完全缓解对晚期结直肠癌总生存的影响 ——来自组间研究N9741的结果

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**目的：**分析并评估经过单用全身化疗或全身化疗联合综合治疗后达到完全缓解(CR)的局部晚期或转移性结直肠癌患者的临床特征及生存预后。

**患者与方法：**回顾性收集进入III期临床研究N9741(该研究为美国国立癌症研究所基金项目,由胃肠癌协作组发起,并由北部中心癌症治疗组协调)的患者资料。患者随机接受奥沙利铂、氟尿嘧啶(FU)/亚叶酸钙(LV)及伊立替康组成的联合治疗。具体的3个治疗组分别为:IFL方案(伊立替康+FU/LV);FOLFOX方案(奥沙利铂+FU/LV);IROX方案(伊立替康+奥沙利铂)。中位随访期为42.6个月。

**结果：**1 508例单用全身化疗的患者中有62例(4%)达CR,经过综合治疗后,另有32例(2%)获得CR。单用全身化疗后达CR的相关因素包括:使用FOLFOX方案、病灶可评价,以及远处转移为单发。证实CR后继续使用超过2个周期的原方案化疗没有改善生存。接受含奥沙利铂方案的患者根治性肿瘤切除率显著提高( $P=0.02$ )。单用化疗后达CR的患者与联合综合治疗后达CR的患者中位生存期相似(44.3个月 vs 47.4个月;  $P=0.81$ )。

**结论：**与IFL或IROX方案相比,FOLFOX方案更可能获得CR。含奥沙利铂方案更有望提高肿瘤切除率。值得注意的是,单用化疗后达CR的患者与联合综合治疗后达CR的患者生存预后相似。

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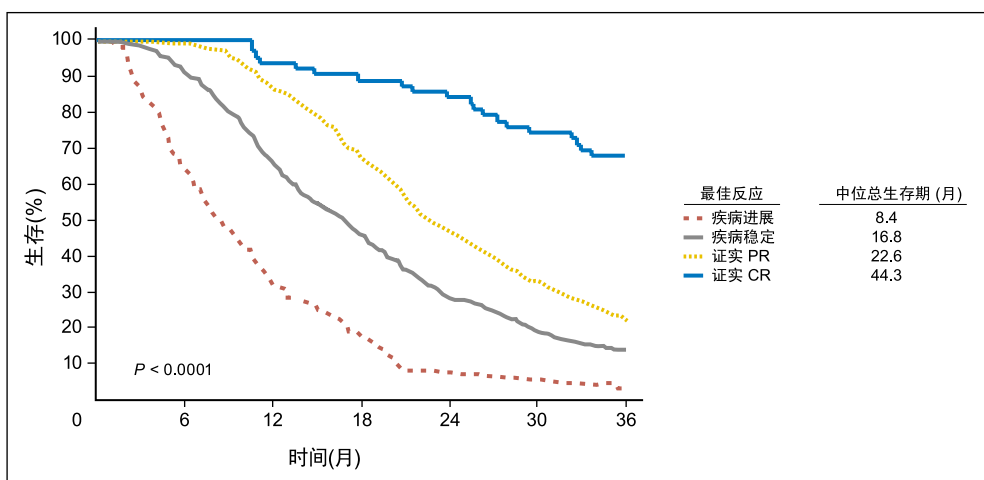


图2. 根据化疗的最佳反应比较总生存(非界标分析)。

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## ERRATA

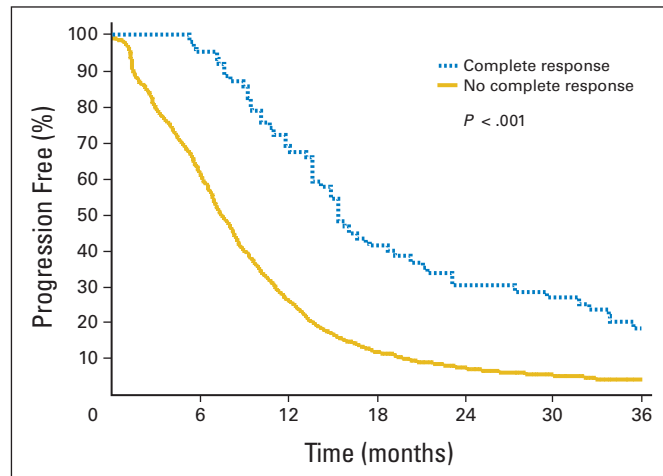
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The August 10, 2007 article by Vansteenkiste et al entitled, “Phase II Clinical Trial of the Etoposide Analog, Ixabepilone, in Patients With Non–Small-Cell Lung Cancer Whose Tumors Have Failed First-Line Platinum-Based Chemotherapy” (J Clin Oncol 25:3448-3455, 2007) contained an error in the spelling of Martin J. Edelman. It was originally published as Mark Edelman and should have been Martin J. Edelman.

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The August 10, 2007, article by Dy et al entitled, “Impact of Complete Response to Chemotherapy on Overall Survival in Advanced Colorectal Cancer: Results From Inter-group N9741” (J Clin Oncol 25:3469-3474, 2007) contained an error. In Figure 1, the labels “Complete response” and “No complete response” were inadvertently switched. Corrected Figure 1 is reprinted below in its entirety.



**Fig 1.** Comparison of time to disease progression between patients with or without complete response to systemic chemotherapy.

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