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Efficacy and safety of 5-fluorouracil-oxaliplatin with ramucirumab in patients with advanced hepatocellular carcinoma: a case series

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Background

- In 2020, combination atezolizumab-bevacizumab (AB) established itself as the standard first-line systemic therapy for eligible patients with advanced HCC (aHCC)¹
- Many second-line options however were approved before the advent of AB²
- Hence post-progression on AB, the optimal sequence and use of subsequently treatment lines is less well-studied
- The use of single-agent ramucirumab (Ram) post-AB is of unclear benefit^{3,4,5}

Background

- Ram is often safely combined with 5-fluorouracil-oxaliplatin (5FU-Ox) chemotherapy for other treatment cancers; and 5FU-Ox also has evidence of activity in HCC
- This combination of 5FU-Ox-Ram has been used in nth line aHCC patients in our centre

Methods

- We performed a retrospective review to describe the preliminary efficacy and safety of 5F—Ox-Ram in aHCC patients treated at our centre between June 2020 and Feb 2023

Results

- We identified 5 patients with aHCC who received at least one dose of combination 5FU-Ox-Ram
- Of these 5 patients, 3 received the combination after prior AB
- Median lines of prior lines of treatment was 5 (2 – 6)
- 3 patients had were chronic hepatitis B carriers, while 2 pts had non-viral disease
- All pts had BCLC C disease, had AFP > 400 ng/mL and were Child-Pugh A on treatment initiation

Results

- Both patients who were AB naïve had best response of PD while the 3 patients who had prior AB had best response of disease control (1 PR, 2 SD)
- 1 patient was still on treatment at time of data cutoff
- For the other patients, median TTP was 85 days (44 – 146)
- 2 patients had \geq G2 cytopenias (G2 thrombocytopenia, G3 neutropenia) lasting more than 7 days, but no episodes of febrile neutropenia

References

1. Finn RS, Qin S, Ikeda M, Galle PR, Ducreux M, Kim TY, et al. Atezolizumab plus Bevacizumab in Unresectable Hepatocellular Carcinoma. *N Engl J Med*. 2020 14;382(20):1894–905.
2. Zhu AX, Kang YK, Yen CJ, Finn RS, Galle PR, Llovet JM, et al. Ramucirumab after sorafenib in patients with advanced hepatocellular carcinoma and increased α -fetoprotein concentrations (REACH-2): a randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet Oncol*. 2019 Feb;20(2):282–96.
3. Kuzuya T, Kawabe N, Hashimoto S, Funasaka K, Nagasaka M, Nakagawa Y, et al. Clinical Outcomes of Ramucirumab as Post-treatment Following Atezolizumab/Bevacizumab Combination Therapy in Advanced Hepatocellular Carcinoma. *Anticancer Res*. 2022 Apr;42(4):1905–10.
4. Shimose S, Sugimoto R, Hiraoka A, Tanaka M, Iwamoto H, Tanaka Y, et al. Significance of ramucirumab following atezolizumab plus bevacizumab therapy for hepatocellular carcinoma using real-world data. *Hepatol Res Off J Jpn Soc Hepatol*. 2023 Feb;53(2):116–26.
5. Meyer T. ILCA Systemic Therapy Guidance. 2020 Nov 13.



Thank you!

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