

## **Primary fallopian tube carcinoma: results of a retrospective analysis of 64 patients.**

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### **Source**

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### **Abstract**

#### **OBJECTIVE:**

The objective of this retrospective study was to determine the clinical outcomes of patients with primary fallopian tube carcinoma (PFTC) treated with paclitaxel and platinum analogue-based combination chemotherapy following primary cytoreductive surgery.

#### **METHODS:**

Sixty-four patients with the diagnosis of PFTC were identified through the gynecology service database and the tumor registry of 4 different institutions. The majority of patients (48/64, 75%) were treated with carboplatin AUC (area under curve) 6 and paclitaxel 175 mg/m<sup>2</sup> as a 3 h infusion.

#### **RESULTS:**

Among 28 patients with measurable disease, we observed 19 (68%) complete clinical and 7 (25%) partial responses for an overall response rate of 93%. After a median follow-up of 40 months (3+–134+ months), the 5-year survival rate of the entire population was 70% (median overall survival [mOS] not reached) and the median time to tumor progression (mTTP) was 81 months (95% CI: 53–109). Stage and residual disease were of prognostic significance. The mTTP was not reached in patients with stage I/II and was 38 months for patients with stage III/IV ( $p=0.004$ ). The mOS for patients with stage I/II was not reached, whereas it was 62 months for those with stage III/IV ( $p=0.057$ ). The mTTP was 86 and 23 months for patients with residual disease <2 cm and >2 cm, respectively ( $p<0.001$ ). The mOS was not reached for patients with residual disease <2 cm, while it was 36 months for residual disease >2 cm ( $p<0.001$ ).

#### **CONCLUSION:**

Optimally cytoreduced patients with PFTC treated with platinum and paclitaxel-based chemotherapy regimen have an excellent possibility of survival.