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De novo metastatic colorectal cancer
DISCLOSURE OF INTEREST

- No disclosures
Patient History

- 58-year-old female. South Asian origin
- Dec 2017 - Presented to emergency department with weight loss and fatigue. Anaemic.
- PMH – Type 2 diabetes, hypertension, hypothyroidism
- PS 0. Lifelong non-smoker. No alcohol. Varied diet.
- CT scan – mass lesion within the ascending colon. Hepatic lesions. At least seven small nodules within both lungs
- Colonoscopy - Moderately differentiated colon adenocarcinoma. RAS and BRAF wild-type.
Initial treatment

- Jan 2018 - Commenced FOLFOX and cetuximab
- Partial response on CT assessment at 6 and 12 cycles
- Well tolerated. Rash treated with topicals. Mucositis
- Aug 2018 - After 12 cycles - Offered to stop treatment and monitor with scans, or maintenance cetuximab and 5-FU
- Sept-Dec 2018 - Maintenance Cetuximab and 5-FU until progression in liver metastases
Second line treatment

- Jan 2019 - Commenced FOLFIRI chemotherapy.
- Baseline CT - Increase in liver metastases and new large right adnexal cystic mass lesion
- CEA 70, CA125 11. Impression: Krukenberg tumour

Baseline CT
Second line treatment

- April 2019 - CT after 4 cycles –
  - Response in liver metastases and lymph nodes
  - Significant increase in size of right adnexal mass from 7 to 11cm.
  - CEA 40, CA125 10.

- Discussed at gynaecology and colorectal MDT—cannot rule out ovarian primary
February 2019
Baseline

April 2019
After 4 cycles
Further management

- May 2019 – Laparoscopic BSO after 8 cycles of FOLFIRI
- June 2019 - Discharge complicated by infections. 2 week hospital stay.
- Unable to resume FOLFIRI due to ongoing post-op recovery and awaiting improvement in Performance Status.
- July 2019 Progressive disease in liver. CEA 150. Commenced FOLFOX and bevacizumab
February 2019
Baseline

April 2019
After 4 cycles

July 2019
After surgery & 8 cycles

ESMO PRECEPTORSHIP PROGRAMME
Discussion

- Did intervention for adnexal mass compromise outcome?
- What is the optimal management of oligoproggressive disease?
- Rechallenge with FOLFOX or consider different chemotherapy, such as tipiracil/trifluridine?