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Vol 23, No 16S (June 1 Supplement), 2005: 5173

© 2005 [American Society of Clinical Oncology](#)**Abstract**

Oxaliplatin and cyclophosphamide as neoadjuvant chemotherapy (NACT) followed by surgery for patients with locally advanced cervical cancer (LACC). A preliminary report

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Background: Cisplatin is the most active drug in cervical cancer, however, its toxicity remains a main issue. NACT followed by surgery significantly reduced the risk of death in patients with LACC (EJC 39:2419). Response rates for NACT regimens have ranged between 20 and 30%. In an attempt to identify new active drugs, and new NACT regimens, we evaluated the toxicity and efficacy of the oxaliplatin (Eloxatin) and cyclophosphamide regimen. **Methods:** Eligibility included proven histologically diagnosis of squamous cervical carcinoma, stage IIB-IIIIB disease (FIGO), measurable disease, ECOG performance status 0–2, and no prior therapy. Four to six cycles of chemotherapy with Oxaliplatin 130 mg/m² and Cyclophosphamide 1000 mg/m² every 3 weeks (Misset, *Ann Oncol*; 12: 1411) were scheduled. Clinical evaluation 4–6 weeks after the last cycle was planned followed by surgery. Radiation therapy was indicated if patients had positive surgical margins, metastatic lymph nodes, incomplete response or unresectable disease. The primary endpoint was toxicity and efficacy of oxaliplatin and cyclophosphamide regimen. The study was planned to include 30 patients and powered to demonstrate a 20% increase in clinical response compared to NACT regimens. **Results:** Between 7/03 and 4/04, eight patients, median age 48 years (range 38–61) with stage IIB disease were enrolled. Twenty-eight cycles, (median 4; range 2–4) of chemotherapy were given. The main toxicity was reversible neuropathy grade I (75%). Other grade II-III toxicities were gastrointestinal (37%), hematological (25%) and urinary (12%). Clinical partial response occurred in 5 (62.5%) patients who following NACT were treated with surgery (n=3) and consolidation radiation therapy (n=5). Disease progression occurred in 3 (37.5%) patients. As of 11/04 five (62.5%) patients are alive with no evidence of disease 13, 11, 11, 11, 8 months after NACT. **Conclusions:** Preliminary results show that oxaliplatin and cyclophosphamide combination is well tolerated and with efficacy comparable to other NACT regimens. Oxaliplatin is an active drug in LACC.

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