

Initial experience of DEB-TACE with CalliSpheres® microspheres in treating secondary liver cancer patients

- **Background:** To evaluate the treatment efficacy, survival, safety profiles and factors affecting the clinical outcomes of drug-eluting bead transarterial chemoembolization (DEB-TACE) in liver metastases patients.
- **Methods:** A total of 39 liver metastases patients underwent DEB-TACE treatment with the novel CalliSpheres® microspheres were retrospectively enrolled. Patients' demographic information, tumor characteristics, history of treatment, laboratory indexes, and treatment procedures were recorded, meanwhile, patients' treatment response survival and adverse events were also evaluated.
- **Results:** The rate of complete response, partial response, stable disease and progressive disease of total treated cycles were 1.6%, 34.4%, 54.7% and 9.4%, respectively, and 5.0%, 26.7%, 57.8% and 10.6% of total treated nodules, respectively. Regarding survival, the median progression-free survival (PFS) was 15.3 months (95% CI: 9.7–20.8 months) and the median overall survival was 28.7 months (95% CI: 20.3–37.0 months). Cox's proportional hazard model regression analyses disclosed that previous liver resection was correlated with worse PFS, while combined targeted therapy and disease control rate after the first DEB-TACE were correlated with longer PFS. For safety profiles, biochemical indexes showed that patients' liver function was deteriorated at 1 week after DEB-TACE, but was mainly recovered at 1 month after DEB-TACE.
- **Conclusions:** DEB-TACE is an efficient and safe treatment choice for liver metastases, moreover, strict screening of indications for resection and combined therapy with targeted therapy might improve the efficacy of DEB-TACE.

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