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**Weekly cabazitaxel in elderly patients (EP) with metastatic castration resistant prostate cancer (mCRPC) progressing after docetaxel treatment: WeCabE, a phase II study**

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**Background:** Cabazitaxel (Cab) every 3 weeks with daily prednisone is considered a possible option as second line chemotherapy in mCRPC. According to SIOG guidelines the G8 Screening Tool might be useful to detect unfit EP.

**Methods:** EP with mCRPC,  $\geq 70$  and  $< 85$  years, G8 Score 8-14 which identify unfit patients (i.e. no frail, no fit), PS 0-2 were enrolled.

Cab was administered at a dose of  $8\text{mg}/\text{m}^2$  for 4 out 5 weeks. Primary end point was PFS. Secondary endpoints were: PSA Response, ORR, OS, Safety, impact on Geriatric assessment according with Elderly Task Force EORTC.

**Results:** At time of this analysis 14 EP were analysed. Median age was 78 years, 35.7% of pts were 80-85 years. Median number of cycles received, in pts who ended treatment was

4. Overall 55.6% of pts reached a PSA response while 33.3% achieved a stability. 42.8% of pts ended therapy without a worsening/rising of symptoms.

G8 best score improvement during treatment was 1.28 (median). The most common AE G 3-4 was fatigue (20%) while G1-2 toxicities were diarrhea (40%) and fatigue (60%). Only one pt experienced neutropenia and anemia G3-4.

**Conclusions:** These preliminary results confirm the usefulness of G8 tool to identify elderly mCRPC pts suitable to receive chemotherapy. It suggests that weekly cab in mCRPC EP (including very old pts  $> 80$ ), is effective, with a manageable safety profile.

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