

Clinical case discussion

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- ✓ **NCO, 51 y/o. Male. Without co-morbidities**

- ✓ **Hematochezia (no signals of intestinal obstruction)**

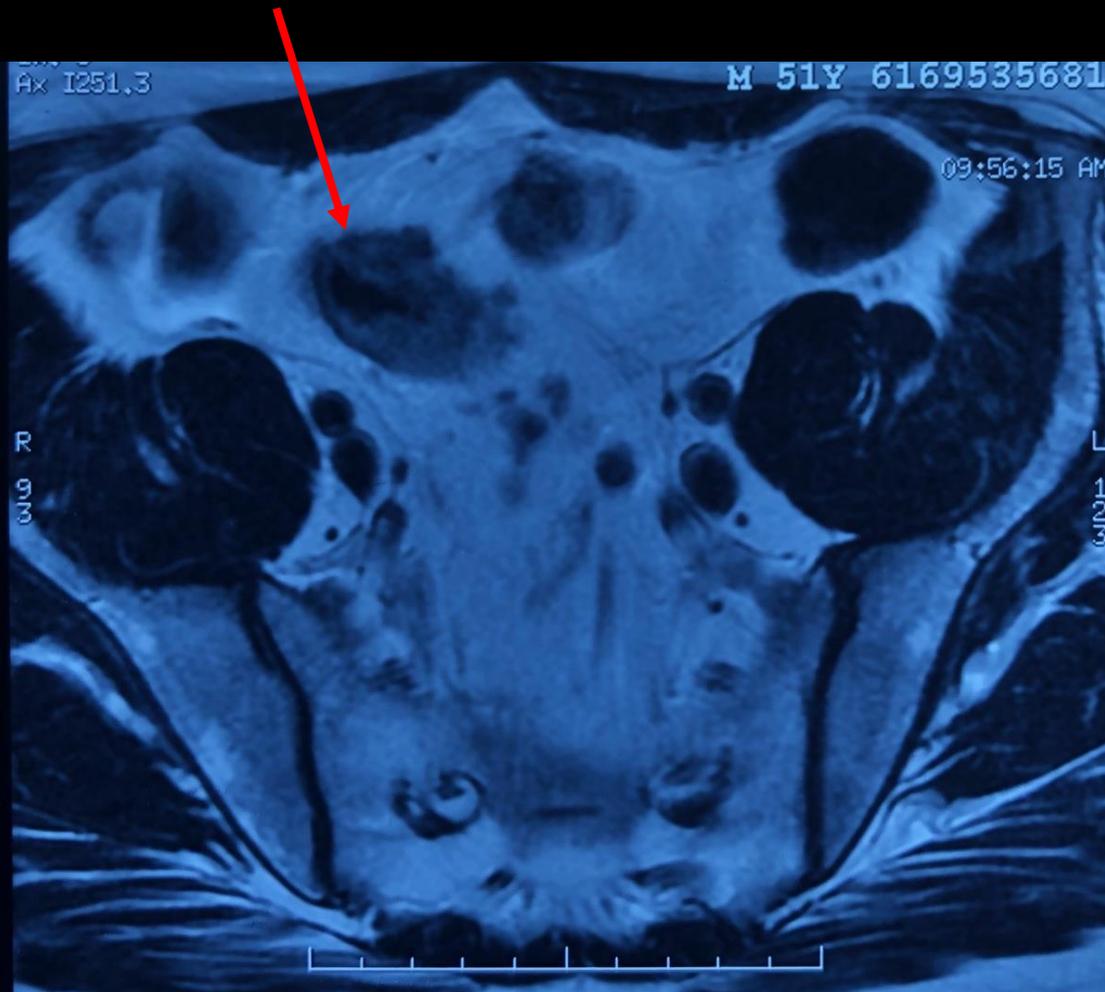
- ✓ **12/Dec/18 Colonoscopy:** infiltrative lesion in the retosigmoid occupying 30% of organ lumen. No difficulty to overpass the lesion with the device

- **AP:** Adenocarcinoma (tubular) grade 2.

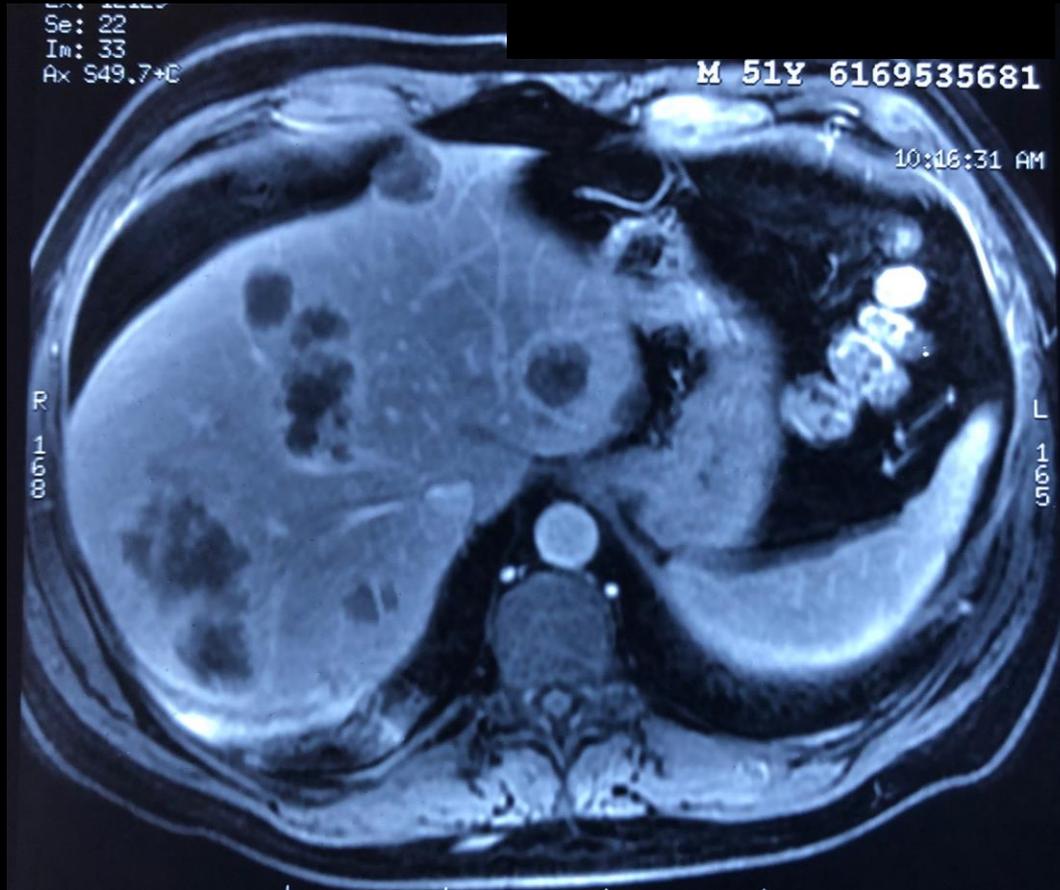
- ✓ **RAS status unknow**

- ✓ **22/Dec/18 CEA 413**

✓ 22/Dec/18 Abdome MRI:



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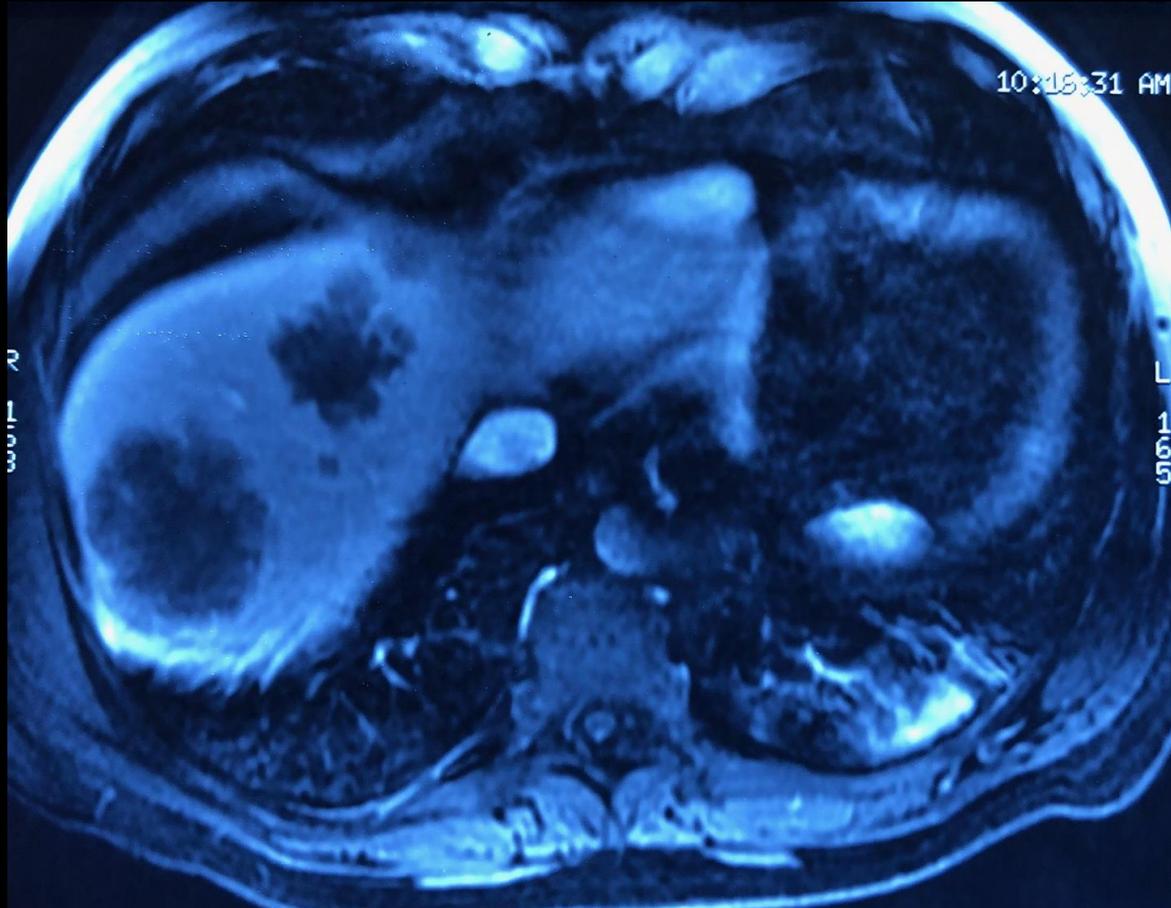
✓ 22/Dec/18 Abdome MRI:



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✓ **22/Dec/18 Abdome MRI:**

- infiltrative lesion in the retosigmoid, above the peritoneal reflection, with extramural extension.
- **lymph nodes enlargement** (~15 mm).
- **multiple bilateral hepatic lesions:**
 - segment VII/VIII (68 mm)
 - segment IVa/VIII (62 mm)
 - segment V (46 mm e 42 mm)
 - segment VI (32 mm)

✓ **Would you approach the primary tumor at this time?**

1. Yes

2. No

✓ **How would you rate this liver colorectal metastatic disease?**

1. Unresectable

2. Borderline resectable

✓ **What would be your choice?**

1. Doublet
2. Doublet + Bevacizumab
3. Triplet
4. Triplet + Bevacizumab

✓ **12/Jan/19 Started FOLFOXIRI + Bevacizumab q2w 1 cycle**

✓ Pain resolution

✓ **all-RAS and BRAF wt**



✓ **What would be your choice at this time?**

1. Maintain FOLFOXIRI + Bevacizumab
2. FOLFIRI + Cetuximab
3. FOLFOX + Cetuximab
4. FOLFOX + Panitumumab

✓ **What would be your choice at this time?**

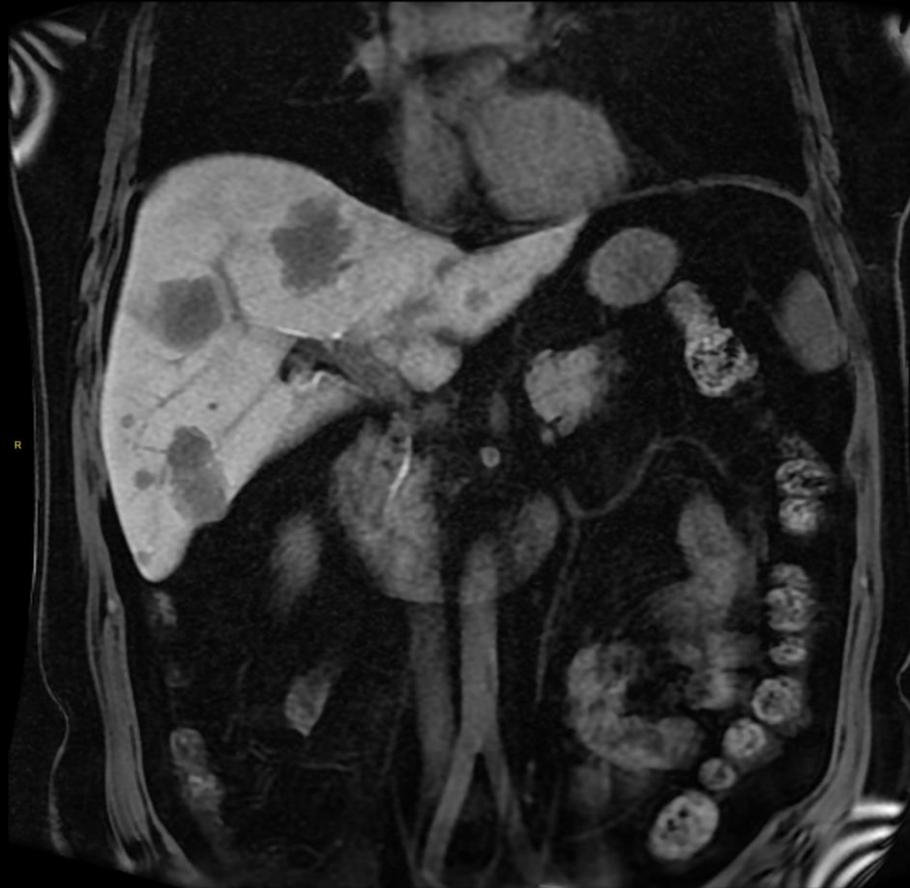
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3. FOLFOX + Cetuximab
4. FOLFOX + Panitumumab

- ✓ **12/Jan/19 to 05/Jun/19 FOLFOXIRI + Bevacizumab q2w 7 cycles**
- ✓ **05/Jun/19 FOLFOXIRI (without bevacizumab)**

- ✓ **CEA 48 (before 413)**

✓ 20/Jun/19 Abdomine MRI:

< 3402 - 5 (Chave) >



✓ 20/Jun/19 Abdomine MRI:

< 3402 - 6 (Chave) >



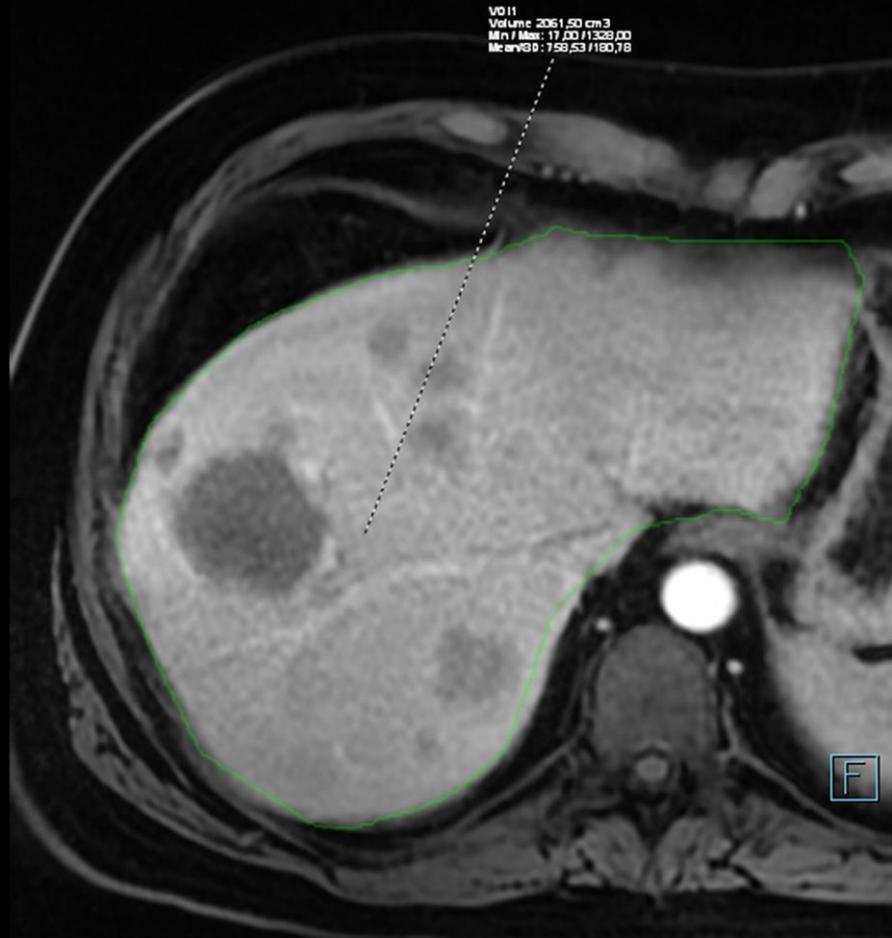
✓ 20/Jun/19 Abdomine MRI:

< 3402 - 7 (Chave) >



✓ 20/Jun/19 Abdomine MRI:

<3403-3>



✓ 20/Jun/19 Abdomen MRI:



✓ **What would be your choice?**

1. Resection of the hepatic lesions and the primary tumor at the same time
2. Resection of the hepatic lesions at the same time
3. Resection of the hepatic lesions (in two different times)
4. Primary tumor surgery → hepatic lesions
5. Maintain palliative chemotherapy

✓ **What would be your choice?**

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4. Primary tumor surgery → hepatic lesions
5. Maintain palliative chemotherapy

- ✓ **17/Jul/19** Resection of the hepatic lesions in the segments II and III and of the isolated nodule (10mm) in the segment I
- ✓ **02/Aug/19** Embolization of the right portal vein and of the segments IVA e IVB
- ✓ Next step: right hepatectomy