EFFICACY AND SAFETY OF CAMRELIZUMAB COMBINATION THERAPY IN PATIENTS WITH RECURRENT OR METASTATIC CERVICAL AND ENDOMETRIAL CARCINOMA: A RETROSPECTIVE STUDY

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Background: Recurrent or metastatic cervical and endometrial carcinoma is largely an incurable disease due to lack of effective therapies. New treatment strategies are needed to provide long-term anti-tumor responses. Blocking the interaction between PD-1 and its ligands is a promising treatment strategy, and has previously shown encouraging antitumor activity in cervical and endometrial carcinoma. Camrelizumab is a humanised anti-programmed death-1 (anti PD-1) antibody. Therefore, this study aimed to assess the efficacy and safety of camrelizumab combination therapy in patients with recurrent or metastatic cervical and endometrial carcinoma.

Methods: Patients (pts) with recurrent or metastatic cervical and endometrial carcinoma were enrolled. Eligible patients were aged 30–70 years with an Eastern Cooperative Oncology Group performance status of 0-2. Pts received camrelizumab (200mg iv d1 q2w) with concurrent chemoradiotherapy (CRT)/radiation/chemotherapy. Paclitaxel and carboplatin are delivered with 175mg/m2 and AUC=5, respectively, d1, q3w for 6-8 cycles. Pts received radiation with external-beam radiotherapy 45–50.4Gy/25–28f, lymph node 60Gy/25–30f 5 times/week, brachytherapy 28–30Gy/4-5f. The primary endpoint was objective response (ORR). The secondary endpoints included disease control rate (DCR), median progression-free survival (mPFS) and safety.

Results: 37 pts were enrolled from Sept. 2019 to Apr. 2022. 36 patients were evaluated for efficacy, the ORR and DCR was 53% (19/36) and 83% (30/36), respectively. In addition, 18 pts received camrelizumab combination CRT with the ORR of 76% (13/17) and DCR of 100% (17/17), and 8 pts received camrelizumab combination radiotherapy with the ORR of 12.5% (1/18) and DCR of 50% (4/8), and 11 pts received camrelizumab combination chemotherapy with the ORR of 45% (5/11) and DCR of 82% (9/11). 7 of 37 pts were still receiving the treatment, the mPFS was 12.5 months. Treatment-related adverse events occurred in 57% (21/37) of patients, and the most common adverse events were RCCEP (35%), Thyroid injury (14%) and diarrhea (14%). Treatment-related grade 3 adverse events occurred in 3% (1/37) of pts.

Conclusions: Our Results indicates that Camrelizumab with chemoradiotherapy exhibites efficacy rather than combination with radiation/chemotherapy for recurrent or metastatic cervical and endometrial carcinoma. Further studies are planned to explore this new treatment option in a larger study population.