

高雄榮民總醫院

胃癌診療指引

2019年8月20日 第三版

胃癌醫療團隊擬訂

注意事項：這個診療原則主要作為醫師和其他保健專家診療癌症病人參考之用。假如你是一個癌症病人，直接引用這個診療原則並不恰當，只有你的醫師才能決定給你最恰當的治療。

修訂指引

- 本共識參考國家衛生研究院於2012年1月出版之胃癌臨床指引及其他參考文獻，於2019.08.20由胃癌團隊相關人員陳以書、蔡忠育、康朥翔、洪肇謙、鄧惠中、陳文誌、蔡駢圳、孫煒智、李恆昇、葉昶宏、張國楨等人討論後共同修訂。

會議討論

上次會議：2019/05/21

本共識與上一版的差異

上一版	新版
1. 原輔助化療處方有:TS-1、UFUR、XO、EOX、SOX、DOX、FLOT、FOLFOX。	1. 新增輔助化療處方:TS-1 + docetaxel (Page 11)

胃腺癌

高雄榮民總醫院 臨床診療指引

2019年第三版

評估

診斷

治療

追蹤

- 病史、理學檢查
- 營養及日常體能狀態
- 胸部X光
- 血液常規
- 電解質及肝腎功能
- 腫瘤指標 (CEA, Ca19-9)
- * 腹部(胃)電腦斷層攝影
- 上消化道內視鏡及生檢 (Biopsy)

- 必要時評估→
- * 正子攝影
- 內視鏡超音波
- 腹腔鏡
- 上消化道攝影

*與期別相關之主要檢查

臨床分期

身體狀況適合手術且
腫瘤是有機會切除的

手術(± IIHC)

依術後病理結果後續治療與追蹤
(見-p5手術結果)

身體狀況適合手術但
腫瘤是無法切除的

化學治療
(± 放射治療)

姑息性手術
+化學治療
(± 放射治療)

化學治療
(± 放射治療)

身體狀況不適合手術
且腫瘤是無法切除的

支持性療法

重新評估分期

完全反應
或
局部反應

追蹤
或
考慮開刀把
殘餘腫瘤切除

疾病惡化
殘餘腫瘤
無法開刀
或
腫瘤已遠
端轉移

見-p6
轉移或復發胃癌

追蹤(p5-6 Table-1)
手術(p7-8 Table-2)
IIHC(p9 Table-3)
化學治療(p10-16 table-4.1,4.2,4.3,4.4)
標靶治療(p17 table-5)
免疫治療(p18 table-6)
放射治療(p19 table-7)
癌症藥物停藥準則(p20 table-8)

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

評估	診斷	治療	追蹤
----	----	----	----

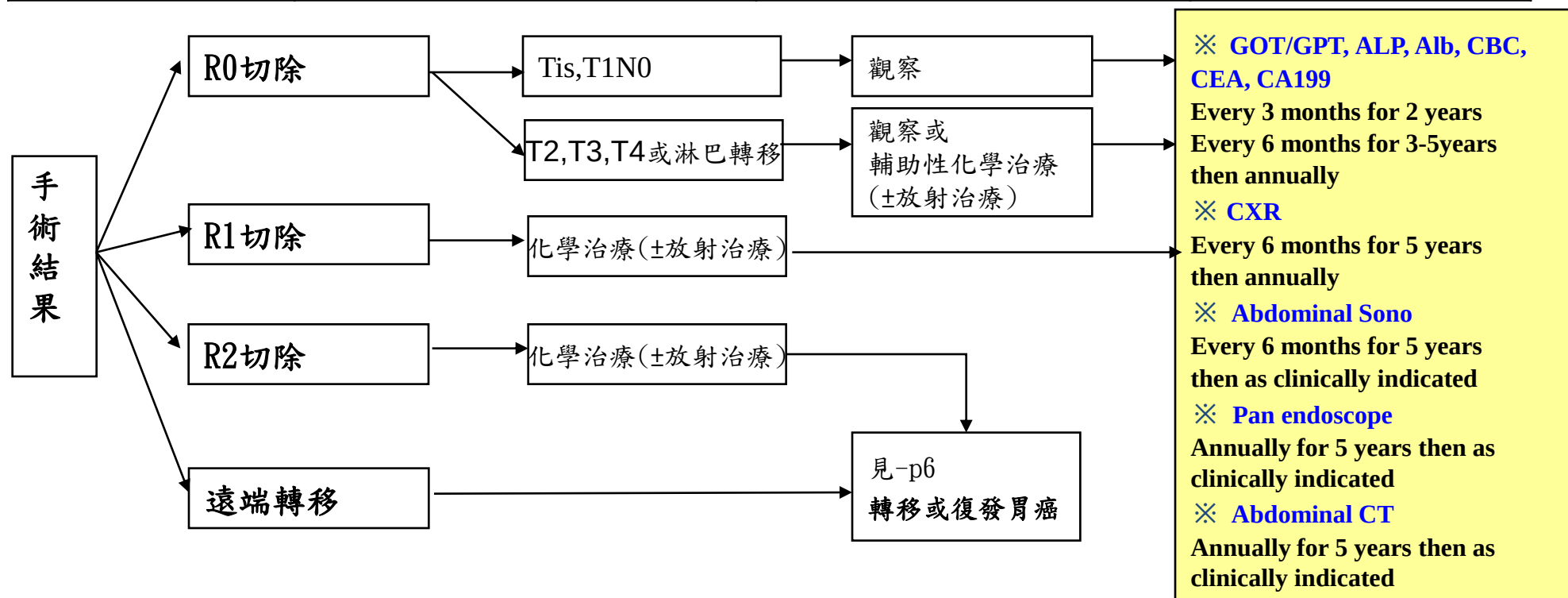


Table-1 術後追蹤建議表

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

評估	診斷	治療	追蹤
----	----	----	----

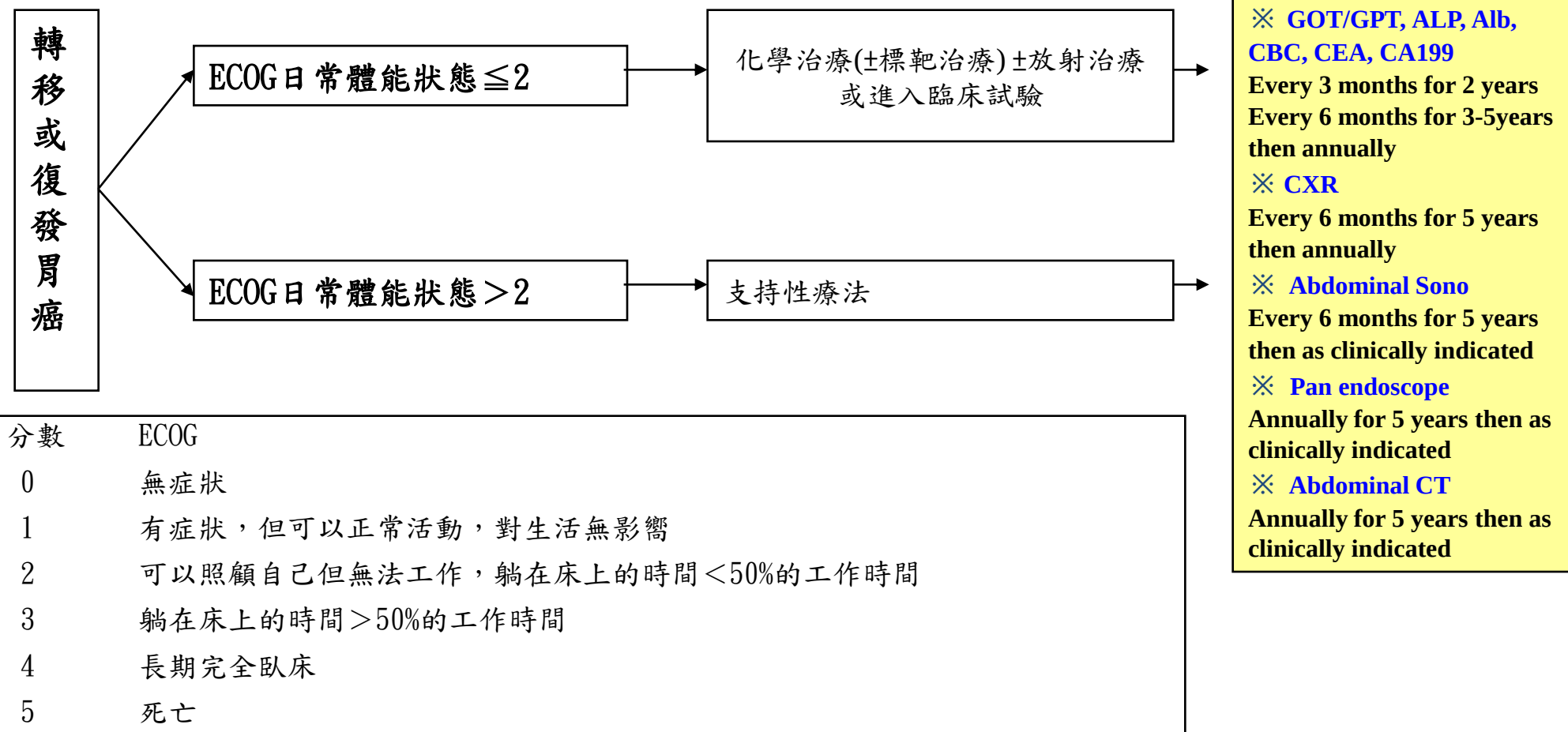


Table-2手術建議表(1)

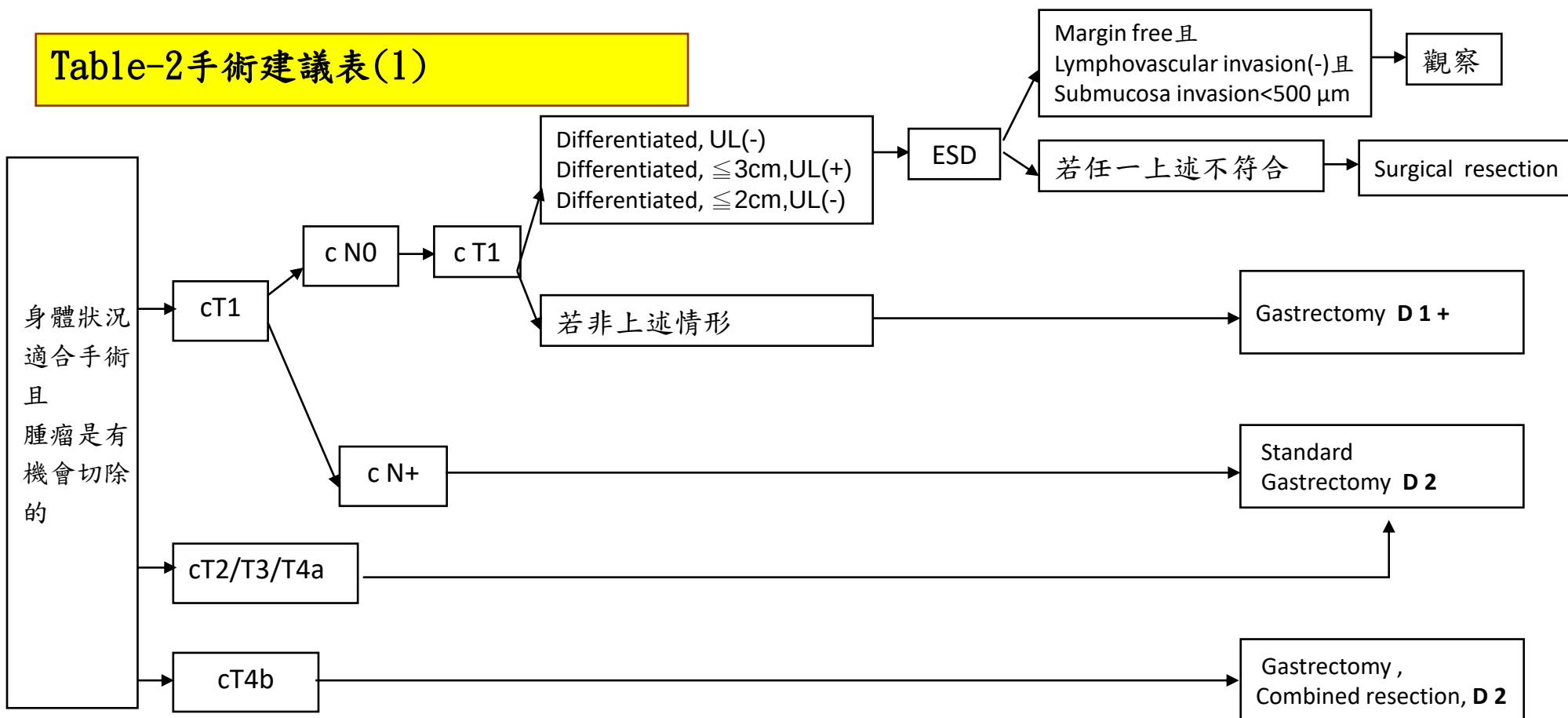


Table-2手術建議表(2)

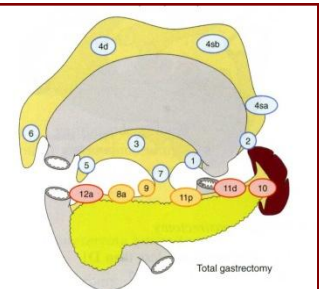
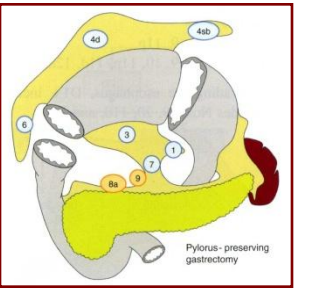
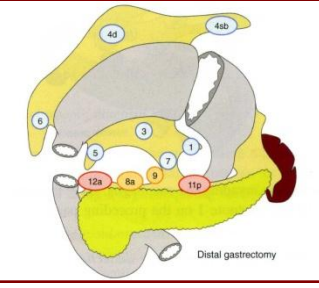
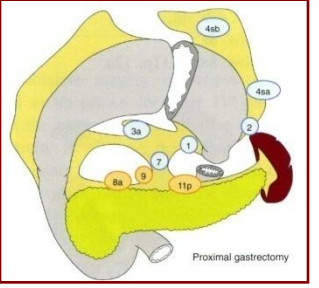
Type of Gastrectomy with lymph node dissection		
Gastrectomy	Extent of LN dissection	圖表
Total gastrectomy	D1 :Nos 1-7 D1+:D1+Nos 8a,9,11p D2 :D1+Nos 8a,9,10,11p,11d,12a For tumor invading the esophagus D1+Includes No,110 ¹ . D2 includes Nos.19,20,110,and 111	 
Distal gastrectomy	D1 :Nos 1,3,4sb,4d,5,6,7 D1+:D1+Nos 8a, 9 D2 :D1+Nos 8a,9,11p,12a	 
Pylorus-preserving gastrectomy	D1 :Nos 1,3,4sb,4d,6,7 D1+:D1+Nos 8a, 9	
Proximal gastrectomy	D1 :Nos 1,2,3a,4sa,4sb,7 D1+:D1+Nos 8a, 9,11p	

Table-3 IIHC 適應症建議表

Hyperthermic IntraPeritoneal Chemotherapy (HIPEC)

※Indication : $\geq$ T4a

※Regimen 1: (41-42°C for 20-60 minutes)

Cisplatin 90 mg 【IP-1】

Etoposide 90 mg

Mitomycin C 30 mg

Reference :No 4-7/strength of Evidence :Level I

※Regimen 2: (41-42°C for 20-60 minutes)

Paclitaxel 80mg/m² 【IP Paclitaxel, high dose】

※Regimen 3:

Paclitaxel 20mg/m²/week 【IP Paclitaxel, low dose】

Reference : No 27/strength of Evidence :Level IIA

No 28/strength of Evidence :Level IIB

Table-4.1 化學治療處方建議表：輔助化療

Adjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
TS-1 40-60mg bid (ACTS-GC trial) (po 4 weeks on, 2 weeks off/or po 2 weeks on, 1 weeks off) BSA >1.5m ² : 60mg bid; 1.25m ² - 1.5m ² : 50mg bid; <1.25m ² : 40mg bid	Q42 d /cycle For 12 months	No.8 / Level I
UFUR 2# po bid (NSAS-GC trial)	For 16 months	No.9 / Level I
Oxaliplatin 130 mg/m ² , IV, D1 【 XO 】 (CLASSIC trial) Xeloda 2#po QAM(Day1-14) ,3# PM (Day1-14) (825-1000mg/m ²)	Q21 d x 8-12cycles	No.10 / Level I
Oxaliplatin 130mg/m ² , IV, D1 【 EOX】 Epirubicin 50mg/m ² , IV, D1 Xeloda 625mg/m ² bid X 3 weeks	Q21 d x 8 cycles	No.11 / Level I
Oxaliplatin 100mg/m ² , IV, D1 【SOX】 TS-1 40-60mg bid ,PO, D1~14 BSA >1.5m ² : 60mg/day ; 1.25-1.5m ² : 50mg/day ; <1.25m ² : 40mg/day	TS-1(2 weeks on, 1 weeks off) →SOX Q21 d x 8 cycles	No.31/ Level II
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, D1-14	Q21d x 8 cycles	No.34 / Level IB

Table-4.1 化學治療處方建議表：輔助化療

Adjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
Taxotere 50mg/M2, IV, D1 Oxaliplatin 85mg/M2, IV, D1 Leucovorin 200mg/M2, IV, D1 5-FU 2600mg/M2, IV, D1 【FLOT】	Q14d x 4-8 cycles 術前4cycles 術後4cycles	No.35 / Level I
Oxaliplatin 85mg/M2, IV, D1 Leucovorin 400mg/M2, IV, D1 5-FU 400mg/M2, IV, D1 , 5-FU 2400-3000mg/M2, IV, D1-2 【FOLFOX】	Q14d x 8-12cycles	No.36 / Level I
TS-1 + docetaxel *stage III Docetaxel 40mg/m2,IV,D1 TS-1 40-60mg/day,PO bid ,D1~14 BSA >1.5m ² : 120mg/day ; 1.25- 1.5m ² : 100mg/day ; <1.25m ² : 80mg/day	Q21d x 8cycles 1 st cycle TS-1 2 nd ~7 th TS-1 + docetaxel 8 th 起TS-1 up to 1year	No.37 / Level I

Table-4.2 化學治療處方建議表：新輔助化療

Neoadjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
Oxaliplatin 130 mg/m ² , IV,D1 【 XO 】 (CLASSIC trial) Xeloda 2#po QAM(Day1-14) ,3# PM (Day1-14) (825-1000mg/m ²)	Q21 d	No.26 /Level IIB
Oxaliplatin 130mg/m ² , IV, D1 【 EOX】 Epirubicin 50mg/m ² , IV, D1 Xeloda 625mg/m ² bid X 3 weeks	Q21 d	No.11 / Level I
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, D1-14	Q21d x 2-4 cycles	No.34 /Level IB
Taxotere 50mg/M ² , IV, D1 【FLOT】 Oxaliplatin 85mg/M ² , IV, D1 Leucovorin 200mg/M ² , IV, D1 5-FU 2600mg/M ² , IV, D1	Q14d x 4-8 cycles 術前4cycles 術後4cycles	No.35 / Level I
Oxaliplatin 85mg/M ² , IV, D1 【FOLFOX】 Leucovorin 400mg/M ² , IV, D1 5-FU 400mg/M ² , IV, D1 , 5-FU 2400-3000mg/M ² , IV, D1-2	Q14d /cycle	No.36 / Level I

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

Table-4.3 化學治療處方建議表：轉移癌

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
TS-1 40-60mg bid (po 4 weeks on, 2 weeks off/or po 2 weeks on, 1 weeks off) BSA $\geq 1.5\text{m}^2$: 60mg bid, 1.25m^2 – 1.5m^2 : 50mg bid, < 1.25m^2 : 40mg bid	Q42 d /cycle For 12 months	No.8 /Level I
UFUR 2# po bid	For 16 months	No.13 /Level I
Oxaliplatin 130mg/m ² , IV, D1 【EOX】 Epirubicin 50mg/m ² , IV, D1 Xeloda 625mg/m ² bid X 3 weeks	Q21 d x 8 cycles	No.11 / Level I
Oxaliplatin 130 mg/m ² , IV,D1 【XO】 Xeloda 2#po QAM(Day1-14) ,3# PM (Day1-14) (825-1000mg/m ²)	Q21 d x 8-12cycles	No.1, 14 /Level II
Cisplatin 60-80 mg/m ² , IV, D1 【FP】 【FP-1】 5-FU 800-1000mg/m ² , IV, D1-5	Q21 d x 8-12cycles	No.15 /Level II

胃腺癌

高雄榮民總醫院

臨床診療指引

2019年第三版

Table-4.3 化學治療處方建議表：轉移癌

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Docetaxel 40mg/m ² , IV, D1 【mDCF】 CDDP 40mg/m ² , IV, D3 5-FU 2000mg/m ² , IV, D1-2	Q14d x 6-8 cycles /Until progression	No.29 /Level II
Docetaxel 50mg/m ² , IV, D1 【D-FOX】 Oxaliplatin 85mg/m ² , IV, D1 5-FU 1100mg/m ² , IV, D1-2	Q14d x 6-8 cycles /Until progression	No.30 /Level II
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, D1-14	Q21d x 6-8 cycles /Until progression	No.34 /Level IB

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

Table-4.4 化學治療（二線）處方建議表

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Irinotecan 150 mg/m ² , IV, D1	Q14d /cycle Until progression	No.20, 21 /Level I
Docetaxel 60 – 75 mg/m ² , IV, D1	Q21d /cycle Until progression	No.21, 22 /Level I
Paclitaxel 80 mg/m ² , IV, D1, D8, D15	Q28d/cycle Until progression	No.23 /Level I
Ramucirumab 8 mg/kg, IV, D1	Q14d/cycle Until progression	No. 24 /Level I
Ramucirumab (8 mg/kg, IV, D1, D15) + Paclitaxel (80 mg/m ² , IV, D1, D8, D15)	Q28d/cycle Until progression	No. 25 /Level I
Docetaxel 40mg/m ² ,IV ,D1 【mDCF】 CDDP 40mg/m ² ,IV ,D3 5-FU 2000mg/m ² ,IV ,D1-2	Q14d /cycle Until progression	No.29 /Level II
Docetaxel 50mg/m ² , IV ,D1 【D-FOX】 Oxaliplatin 85mg/m ² ,IV,D1 5-FU 1100mg/m ² ,IV ,D1	Q14d /cycle Until progression	No.30 /Level II

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

Table-4.4 化學治療（二線）處方建議表

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, D1-14	Q21d x 6-8 cycles /Until progression	No.34 /Level IB

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

Table-5 標靶治療處方建議表

Trastuzumab 6-8mg/kg(D1)+CDDP 80mg/m²(D1)+Xeloda 1000mg/m² BID(D1-14)

Trastuzumab 6-8mg/kg(D1)+CDDP 80mg/m²(D1)+5-FU 800mg/m² BID(D1-5)

Trastuzumab 6-8mg/kg(D1)+Carboplatin AUC4-6(D1)+Xeloda 1000mg/m² BID(D1-14)

Trastuzumab 6-8mg/kg(D1)+Carboplatin AUC4-6(D1)+5-FU 800mg/m² BID(D1-5)

Until progression

(Ref. No 16/Level I)

1.使用條件：Her-2/neu免疫染色3+, 或2+且FISH positive for amplification

2.使用劑量：8 mg/kg IV loading dose, 6 mg/kg IV every 3 weeks

3.若病患於治療中發生疾病復發、惡化或產生無法忍受之毒性，則停用藥物。

胃腺癌

高雄榮民總醫院
臨床診療指引

2019年第三版

Table-6 免疫治療處方建議表

Nivolumab	3mg/kg	D1	Q2W	Until progression
-----------	--------	----	-----	-------------------

(Ref. No 32/ Level II)

Pembrolizumab	200mg	D1	Q3W	Until progression
---------------	-------	----	-----	-------------------

(Ref. No 33/ Level II)

Table-7 放射治療處方建議表

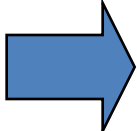
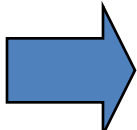
※ Protocol of adjuvant chemoradiotherapy	※.For R0 resection $\geq$ stage IIA ※ For R1 resection and R2 resection
 Radiation therapy: Target volume: tumor/ gastric bed and pertinent nodal group Dose: 45-50.4 Gy /(1.8 Gy/day) Chemotherapy regimen: 5-FU (400 mg/m² per day) and leucovorin (20 mg/m² per day) on the first four and the last three days of RT. Reference :No 17/strength of Evidence :level 1	
※ Protocol of chemoradiation as the primary treatment	※ For medically fit patients but unresectable cancer without distant metastasis ※ For medically unfit patients without distant metastasis
 Radiation therapy: Target volume: tumor/ gastric bed and pertinent nodal group Dose: 45-50.4 Gy /(1.8 Gy/day) Chemotherapy regimen: 5-FU (400 mg/m² per day) and leucovorin (20 mg/m² per day) on the first four and the last three days of RT. Reference :No 17/strength of Evidence :level 1	

Table-8 癌症藥物停藥準則

影像學檢查，腫瘤有變大或轉移變多，應停止或改變治療方式。

Reference

1. NCCN Clinical Practice Guideline in Oncology, Gastric cancer , V.1.2016
2. 國家衛生研究院 胃癌臨床診療指引2012年第1版
3. 日本胃癌診療指引2010年第3版
4. Yan TD, Black D, Sugarbaker PH, et al. A systematic review and meta-analysis of the randomized controlled trials on adjuvant intraperitoneal chemotherapy for resectable gastric cancer. *Ann Surg Oncol* 2007;14:2702-2713.
5. Yonemura Y, de Aretxabala X, Fujimura T, et al. Intraoperative chemohyperthermic peritoneal perfusion as an adjuvant to gastric cancer: final results of a randomised controlled study. *Hepatogastroenterol* 2001; 48:1776–82.
6. Deng-Hai Mi , Zheng Li , Ke-Hu Yang et al. Surgery combined with intraoperative hyperthermic intraperitoneal chemotherapy (IHIC) for gastric cancer: a systematic review and meta-analysis of randomised controlled trials. *Int J Hyperthermia*. 2013;29(2):156-67
7. Kang LY et al. Intraoperative hyperthermic intraperitoneal chemotherapy as adjuvant chemotherapy for advanced gastric cancer patients with serosal invasion. *J Chin Med Assoc*. 2013 Aug;76(8):425-31.
8. Sakuramoto S, Sasako M, Yamaguchi T, et al. Adjuvant chemotherapy for gastric cancer with S-1, an oral fluoropyrimidine. *N Engl J Med*. 2007;357:1810–20.
9. T.Nakajima,T.Kinoshita,A.Nashimoto et al:Randomized controlled trail of adjuvant uracil –tegafur versus surgery alone for serosa –negative ,locally advanced gastric cancer .*British Journal of Surgery* 2007, vol. 94:1468-1476.
10. Sung Hoon Noh, Sook Ryun Park, Han-Kwang Yang et al: Adjuvant capecitabine plus oxaliplatin for gastric cancer after D2 gastrectomy (CLASSIC): 5-year follow-up of an open-label, randomised phase 3 trial. *Lancet Oncol* 2014 Nov;15(12):1389-96
11. K Sumpter,C Harper-Wynne,D cunningham et al:Report of two protocol planned interim analyses in a randomised multicentre phase III study comparing capecitabine with fluorouracil and oxaliplatin with cisplatin in patients with advanced oesophagogastric cancer receiving ECF.*British journal of Cancer*2005, vol.92:1976-1983.

12. Wasaburo Koizumi, Hiroyuki Narahara, Takuo Hara et al: S-1 plus cisplatin versus S-1 alone for first-line treatment of advanced gastric cancer (SPIRITS trial): a phase III trial. *Lancet oncology*. 2008 vol.3.215-221.
13. N.F. Aykan & E. Idlevich: The role of UFT in advanced gastric cancer. *Annals of Oncology* 2008, vol.19.1045-1052.
14. Kim GM, Jeung HC, Rha SY et al. A randomized phase II trial of S-1 oxaliplatin versus capecitabine-oxaliplatin in advanced gastric cancer. *Eu J Cancer* 2012;48:518-526.
15. Park SC and Chun HJ. Chemotherapy for advanced gastric cancer: Review and update of current practices. *Gut and Liver* 2013, vol 7. 385-393.
16. Yung-Jue Bang, Eric Van Cutsem, Andrea Feyereislova et al: Trastuzumab in combination with chemotherapy versus chemotherapy alone for treatment of HER2-positive advanced gastric or gastro-oesophageal junction cancer (ToGA): a phase 3, open-label, randomised controlled trial. *Lancet*. 2012. vol.376.687-697.
17. Macdonald JS; Smalley SR; Benedetti J; Hundahl SA; Estes NC; Stemmermann GN; Haller DG; Ajani JA; Gunderson LL; Jessup JM; Martenson JA: Chemoradiotherapy after surgery compared with surgery alone for adenocarcinoma of the stomach or gastroesophageal junction [Intergroup trial 0016]. *N Engl J Med* 2001 Sep 6;345(10):725-30.
18. Chikara Kunisaki, MD, PhD, Hirochika Makino, MD, PhD, Jun Kimura, MD et al. Impact of lymphovascular invasion in patients with stage I gastric cancer. *Surgery* 2010;147:204-11.
19. Chunyan Du . Ye Zhou . Kai Huang . Guangfa Zhao . Hong Fu . Yingqiang Shi. Defining a high-risk subgroup of pathological T2N0 gastric cancer by prognostic risk stratification for adjuvant therapy. *J Gastrointest Surg* (2011) 15:2153-2158.
20. Peter C. Thuss-Patience et al. Survival advantage for irinotecan versus best supportive care as second-line chemotherapy in gastric cancer – A randomised phase III study of the Arbeitsgemeinschaft Internistische Onkologie (AIO) *Eur J Cancer*. 2011 Oct;47(15):2306-14

21. Jung Hun Kang et al. Salvage Chemotherapy for Pretreated Gastric Cancer: A Randomized Phase III Trial Comparing Chemotherapy Plus Best Supportive Care With Best Supportive Care Alone. *J Clin Oncol* 30:1513-1518; 2012
22. Hugo E R Ford et al. Docetaxel versus active symptom control for refractory oesophagogastric adenocarcinoma (COUGAR-02): an open-label, phase 3 randomised controlled trial. *Lancet Oncol* 2014; 15: 78–86.
23. Shuichi Hironaka et al. Randomized, Open-Label, Phase III Study Comparing Irinotecan With Paclitaxel in Patients With Advanced Gastric Cancer Without Severe Peritoneal Metastasis After Failure of Prior Combination Chemotherapy Using Fluoropyrimidine Plus Platinum: WJOG 4007 Trial. *J Clin Oncol* 31:4438-4444; 2013.
24. Charles S Fuchs et al. Ramucirumab monotherapy for previously treated advanced gastric or gastro-oesophageal junction adenocarcinoma (REGARD): an international, randomised, multicentre, placebo-controlled, phase 3 trial. *Lancet* 2014; 383: 31–39
25. Hansjochen Wilke et al. Ramucirumab plus paclitaxel versus placebo plus paclitaxel in patients with previously treated advanced gastric or gastro-oesophageal junction adenocarcinoma (RAINBOW): a double-blind, randomised phase 3 trial. *Lancet Oncol* 2014; 15: 1224–35.
26. Kim GM, Jeung HC, Rha SY, et al. A randomized phase II trial of S-1-oxaliplatin versus capecitabine-oxaliplatin in advanced gastric cancer. *Eur J Cancer* 2012;48:518-526.
27. Hironori Yamaguchi et al. Breakthrough therapy for peritoneal carcinomatosis of gastric cancer: Intraperitoneal chemotherapy with taxanes. *World Journal of Gastrointestinal Oncology* 2015;7(11):285-291.
28. Motohiro Imano et al, Phase II Study of Single Intraperitoneal Chemotherapy Followed by Systemic Chemotherapy FOR Gastric Cancer with Peritoneal Metastasis. *J Gasyrointest Surg* 2012;16:2190-2196.
29. Manish A. Shah et al, Randomized Multicenter Phase II Study of Modified Docetaxel, Cisplatin, and Fluorouracil (DCF) Versus DCF Plus Growth Factor Support in Patients With Metastatic Gastric Adenocarcinoma: A Study of the US Gastric Cancer Consortium. *Journal of clinical oncology* 2015;33:3874-3879.
30. Mariela A. Blum Murphy, MD et al, A Phase I/II Study of Docetaxel, Oxaliplatin, and Fluorouracil (D-FOX) Chemotherapy in Patients With Untreated Locally Unresectable or Metastatic Adenocarcinoma of the Stomach and Gastroesophageal Junction. *American Journal of Clinical Oncology* 2018 ;41:321-325.

31. Kohei Shitara et al,Phase II study of adjuvant chemotherapy of S-1 plus oxaliplatin for patients with stage III gastric cancer after D2 gastrectomy.Gastric Cancer.2015 Dec 20(1)DOI:10.1007/s10120-015-0581-1
32. Yoon-Koo Kang et al, Nivolumab in patients with advanced gastric or gastro-oesophageal junction cancer refractory to, or intolerant of, at least two previous chemotherapy regimens (ONO-4538-12, ATTRACTION-2): a randomised,double-blind, placebo-controlled,phase 3 trial.The Lancet .2017 Dec 2;390(10111):2461-2471
33. Lola Fashoyin-Aje et al,FDA Approval Summary: Pembrolizumab for Recurrent Locally Advanced or Metastatic Gastric or Gastroesophageal Junction Adenocarcinoma Expressing PD-L1. Oncologist.2018 Aug 17 ; 2018-0221
34. E.Van Cutsem et al, Docetaxel plus oxaliplatin with or without fluorouracil or capecitabine in metastatic or locally recurrent gastric cancer: a randomized phase II study. Annals of Oncology 26: 149–156, 2015.
35. Al-Batran SE et al, Histopathological regression after neoadjuvant docetaxel,oxaliplatin, fl uorouracil, and leucovorin versus epirubicin,cisplatin, and fl uorouracil or capecitabine in patients with resectable gastric or gastro-oesophageal junction adenocarcinoma (FLOT4-AIO): results from the phase 2 part of a multicentre, open-label, randomised phase 2/3 trial. Lancet Oncol.2016 Dec;17(12):1697-1708.
36. Liu M,Hu G,Wang Y,Guo J,Liu L,Han X,Wang Z, Comparison of FOLFOX and DOF regimens as first-line treatment in East Asian patients with advanced gastric cancer. OncoTargets and Therapy.2018;11 Pages 375-381.
37. Kazuhiro Yoshida.et al, Addition of Docetaxel to Oral Fluoropyrimidine Improves Efficacy in Patients With Stage III Gastric Cancer: Interim Analysis of JACCRO GC-07, a Randomized Controlled Trial . Journal of Clinical Oncology 2019;37(15):1296-1304.