




PARTIAL ACCESS ORIGINAL REPORTS February 08, 2010 Latest version



Skin Toxicity Evaluation Protocol With Panitumumab (STEPP), a Phase II, Open-Label, Randomized Trial Evaluating the Impact of a Pre-Emptive Skin Treatment Regimen on Skin Toxicities and Quality of Life in Patients With Metastatic Colorectal Cancer

Authors: [Mario E. Lacouture](#) , [Edith P. Mitchell](#), [Bilal Piperdi](#), [Madhavan V. Pillai](#), [Heather Shearer](#), [Nicholas Iannotti](#), [Feng Xu](#), and [Mohamed Yassine](#) | [AUTHORS INFO & AFFILIATIONS](#)

J Clin Oncol 28, 1351-1357(2010) Volume 28, Number 8 DOI: 10.1200/JCO.2008.21.7828

 22,400 / 376  23



Abstract

Purpose

Panitumumab, a fully human monoclonal antibody targeting the epidermal growth factor receptor (EGFR), is approved in the United States and Europe for the treatment of refractory metastatic colorectal cancer (mCRC). Skin toxicities are the most common adverse events with EGFR inhibitors. This is the first study designed to examine differences between pre-emptive and reactive skin treatment for specific skin toxicities in patients with mCRC for any EGFR inhibitor.

Patients and Methods

Patients receiving panitumumab-containing therapy were randomly assigned 1:1 to pre-emptive or reactive treatment (after skin toxicity developed). Pre-emptive treatment included use of skin moisturizers, sunscreen, topical steroid, and doxycycline. The primary end point of the study was the incidence of protocol-specified \geq grade 2 skin toxicities during the 6-week skin treatment period. Quality of life (QOL) was assessed with the Dermatology Life Quality Index (DLQI).

Results

Of 95 enrolled patients, 48 received pre-emptive treatment, and 47 received reactive treatment. The incidence of protocol-specified \geq grade 2 skin toxicities during the 6-week skin treatment period was 29% and 62% for the pre-emptive and reactive groups, respectively. Mean DLQI score change from baseline to week 3 was 1.3 points and 4.2 points in the pre-emptive and reactive groups, respectively.

Conclusion

The pre-emptive skin treatment regimen was well tolerated. The incidence of specific \geq grade 2 skin toxicities during the 6-week skin treatment period was reduced by more than 50% in the pre-emptive group compared with the reactive group. Patients in the pre-emptive group reported less QOL impairment than patients in the reactive group.

Get access to a PDF of this article

View all available purchase options and get access to a PDF of this article.

 GET PDF ACCESS

Authors' Disclosures of Potential Conflicts of Interest

Although all authors completed the disclosure declaration, the following author(s) indicated a financial or other interest that is relevant to the subject matter under consideration in this article. Certain relationships marked with a "U" are those for which no compensation was received; those relationships marked with a "C" were compensated. For a detailed description of the disclosure categories, or for more information about ASCO's conflict of interest policy, please refer to the Author Disclosure Declaration and the Disclosures of Potential Conflicts of Interest section in Information for Contributors.

Employment or Leadership Position: Feng Xu, Amgen (C); Mohamed Yassine, Amgen (C) **Consultant or Advisory Role:** Mario E. Lacouture, Amgen (C), ImClone Systems (C), Bristol-Myers Squibb (C), OSI Pharmaceuticals (C), Bayer Pharmaceutucials (C), Onyx (C); Edith P. Mitchell, Amgen (C) **Stock Ownership:** Bilal Piperdi, Amgen; Feng Xu, Amgen; Mohamed Yassine, Amgen **Honoraria:** Mario E. Lacouture, Amgen, ImClone Systems, Bristol-Myers Squibb, OSI Pharmaceuticals, Bayer Pharmaceuticals, Onyx; Edith P. Mitchell, Amgen; Bilal Piperdi, Amgen, ImClone Systems, Onyx **Research Funding:** Mario E. Lacouture, OSI Pharmaceuticals, Bayer Pharmaceuticals, Onyx, Amgen, Hana; Edith P. Mitchell, Amgen **Expert Testimony:** None **Other Remuneration:** None

Recommended Articles

CANCERS OF THE COLON AND RECTUM | JANUARY 2014

Randomized controlled trial on the skin toxicity of panitumumab in third-line treatment of KRAS wild-type metastatic colorectal cancer: HGCSG1001 (Japanese Skin Toxicity Evaluation Protocol with Panitumumab; J-STEPP).

GASTROINTESTINAL (COLORECTAL) CANCER | MAY 2014

Randomized controlled trial on the skin toxicity of panitumumab in third-line treatment of KRAS wild-type metastatic colorectal cancer: HGSG1001 (Japanese Skin Toxicity Evaluation Protocol with Panitumumab: J-STEPP)—Additional analysis of antitumor efficacy.

CORRESPONDENCE | JUNE 2010

Impact of a Pre-Emptive Skin Treatment Regimen on Skin Toxicities of Anti-Epidermal Growth Factor Receptor Monoclonal Antibodies: More Questions Than Answers

CANCERS OF THE COLON AND RECTUM | FEBRUARY 2011

A novel approach to manage skin toxicity caused by cetuximab and panitumumab.

COLORECTAL CANCER | JANUARY 2022

Pre-emptive oral clarithromycin to reduce the skin toxicity of panitumumab treatment for metastatic colorectal cancer.

JOURNALS

Journal of Clinical Oncology
JCO Oncology Practice
JCO Global Oncology
JCO Clinical Cancer Informatics
JCO Precision Oncology
JCO Oncology Advances

PUBLICATIONS

ASCO Educational Book
ASCO Daily News
ASCO Connection
The ASCO Post
ASCO Podcasts

CONTENT

Journal Podcasts
Topics
Meeting Abstracts
ASCO Guidelines

INFORMATION

Author Center
Subscriber Center
Permissions
Reprints
Advertise
E-Alerts
View My Profile
About ASCO Journals

FOLLOW US

JCO_ASCO
JCOOP_ASCO
JCOGO_ASCO
JCOPO_ASCO
JCOCCI_ASCO
JCOOA_ASCO

ASCO

About ASCO
Press Center
Meetings & Education
Contact Us

ASCO WEBSITES

asco.org
ASCO Career Center
Conquer Cancer

American Society of Clinical Oncology
2318 Mill Road, Suite 800, Alexandria, VA 22314
© 2026 American Society of Clinical Oncology

[Site Map](#) | [Terms of Use](#) | [Privacy Policy](#) | [Cookies](#)