

Improvement of the xerosis and the quality of life in patients undergoing anti-tumoral therapy with a specific dermo-cosmetic product

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INTRODUCTION & OBJECTIVES

Anti-tumoral therapies are often accompanied by cutaneous side effects including xerosis, the second most reported one, observed in 15% to 100% of these patients. Xerosis can impact patients' quality of life and consequently compromise the compliance to anti-tumoral therapy. Few studies investigated the effect of a skin care in this context. Therefore, the efficacy and tolerance of a specific and suitable dermo-cosmetic product were evaluated on the xerosis and the quality of life in patients undergoing anti-tumoral therapy known to induce this skin toxicity.

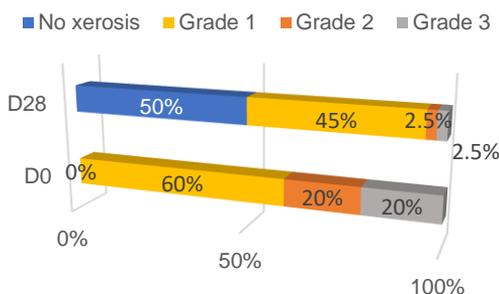
MATERIAL & METHODS

A multicentric observational clinical study was performed with the collaboration of nine oncologists. Patients presenting anti-tumoral therapy-induced xerosis applied the study product at least once a day on a previously clean skin (face and body) for 28 days. The efficacy both clinically, according to the Common Terminology Criteria for Adverse Events (CTCAE) v5.0 and the Scaling Roughness Redness and Cracks (SRRC) score, and subjectively, the Dermatological Life Quality Index (DLQI) and the tolerance were evaluated at Day (D) 0 and D28.

RESULTS

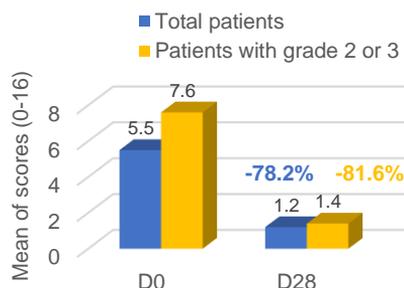
40 patients from 28 to 83 years old (mean 59.5) were included, with breast cancer (27.5%), lung cancer (10%), prostate cancer (7.5%), endometrial cancer (7.5%) or other cancers (47.5%). They received chemo- (85%) or hormonal (15%) therapies, whereas two of them underwent a concomitant radiotherapy. For 60% of the patients this was their first line therapy.

After 28 days, the CTCAE v5.0 grade improved significantly (**Graph 1**, $p < 0.0001$) and 95% of the patients presented less than 10% of xerosis, including 50% that completely recovered from this skin disorder ($p < 0.0001$).

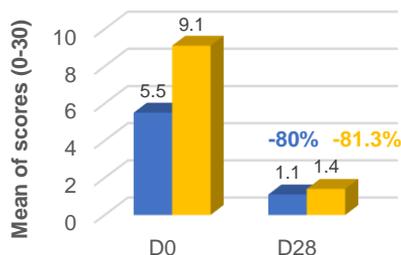


Graph 1. CTCAE v5.0 grades (patients %)

The SRRC score decreased significantly for both the total patients and those presenting grade 2 or 3 at inclusion (**Graph 2**). In parallel the quality of life was significantly improved (**Graph 3**).



Graph 2. Total SRRC score



Graph 3. DLQI score

The product was very appreciated by the patients with 78.6% to 100% of positive answers regarding the protecting, soothing, hydrating and repairing effects on the face and the body. Moreover, 87.5% of total patients and 93.8% of those presenting grade 2 or 3 considered that the product relieved the xerosis-associated itching. Finally, the product was very well tolerated with no adverse events reported.

CONCLUSION

This clinical study demonstrates that this dermo-cosmetic product improves significantly the xerosis and the patients' quality of life receiving chemo- or hormonal therapies. Therefore, these data justify its use along with anti-tumoral regimens and suggest that, by reducing cutaneous side effects, this product may improve patients' compliance to anti-tumoral therapy.