In Reply

We appreciate the interest of Huillard et al. in our study [1] and acknowledge that safety results are extremely important. It is certainly an interesting observation that toxicities in patients with differentiated thyroid cancer (DTC) treated with sorafenib differ significantly from other cancer populations. Indeed, sarcopenia has been associated with dose-limiting toxicities in renal-cell carcinoma (RCC) and hepatocellular carcinoma (HCC) patients treated with sorafenib, but this has not been reported in DTC. We agree that sarcopenia caused by hyperthyroidism from thyroid-stimulating hormone-suppressive therapy may be one possible explanation. It would be of great interest to analyze the body composition and PK data from the phase III DECISION trial [2] that was recently published. Another possible explanation for why DTC patients have greater toxicity to sorafenib is that they were treated approximately twice as long as the phase III RCC or HCC clinical trial patients. Median duration on therapy was 10.6 months in the sorafenib-treated patients on the phase III DTC trial compared with 5.7 and 5.3 months in sorafenib-treated patients on the RCC [3] and HCC [4] phase III trials, respectively.

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Disclosures

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