women in relation to breast self-examination and risk factors for breast cancer. A cluster sampling technique was used. Thirty clusters were selected.

Findings: Our target population contained 3000 women, with mean age 36.4 ± 10.9 years. 39.4% were single and 74.5% had university and higher education. Only 51.3% of women had any knowledge of breast self-examination, and 12% performed such examinations regularly. 43% agreed that high fatty diet and 42% only agreed that physical inactivity are risk factors for breast cancer.

Interpretation: We found poor knowledge and an unsatisfactory attitude toward breast self-examination and risk factors for breast cancer even among educated women. We recommend more concentration on primary prevention and early detection modules for prevention of breast cancer.

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P0179
SEVERE HYPERSENSITIVITY REACTIONS WITH ORIGINAL AND GENERIC TAXANES: A PROSPECTIVE STUDY AT A MEDICAL ONCOLOGY UNIT IN THAILAND
T. Ratanajarusiri *, V. Sriuranpong, S. Tanasanvimon. Medical Oncology Unit, Department of Medicine, Chulalongkorn University, Bangkok, Thailand

Background: Taxanes, including docetaxel and paclitaxel, are commonly used in various types of malignancies. A well-known adverse event of taxanes is hypersensitivity reaction during administration. Solvents and other inactive ingredients were thought to be the cause of this reaction. Given minor differences between original and generic parenteral drugs, we compared the incidences of grade 3 and 4 hypersensitivity reactions between original and generic taxanes.

Methods: In this prospective study, all patients receiving taxanes between January 1 and December 31, 2013 at King Chulalongkorn Memorial Hospital were enrolled. Using the taxane hypersensitivity reaction case record form, we recorded the product, event, symptom, and treatment for each event. Hypersensitivity reactions and grading were defined by Common Terminology Criteria for Adverse Events (CTCAE) Version 3.01. The study primarily compared the grade 3 and 4 hypersensitivity reaction incidences between original and generic taxanes.

Findings: Among the total 258 patients, 130 patients received docetaxel (66 in its original formulation and 64 in generic form) and 128 patients received paclitaxel (65 in its original formulation and 63 in generic form). All patients received premedication including antihistamine and dexamethasone 30 min before taxane infusion and surveillance for hypersensitivity reactions. There were 26 (10.0%) grade 3 hypersensitivity reaction events reported, but no grade 4 hypersensitivity reactions. With docetaxel, there were nine grade 3 reactions to the original formulation and one grade 3 to the generic form (p = 0.017). With paclitaxel, there were nine grade 3 reactions with the original formulation and seven grade 3 reactions with the generic form (p = 0.791). The most common symptoms of hypersensitivity were flushing and chest discomfort. Twenty (77%) of all reactions received rescue medication, including antihistamine and corticosteroid intravenously. No life-threatening symptom or permanent discontinuation of taxanes had occurred. Unexpectedly, only 23% of the reactions were observed in first cycle.

Interpretation: In this prospective study, hypersensitivity reactions to taxanes were more common than in previous retrospective reports. In our cohort, the incidences of grade 3 or 4 hypersensitivity reaction were not different between original and generic paclitaxel but higher with original docetaxel than with generic docetaxel. First hypersensitivity reactions in later cycles of treatment were not uncommon.

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P0180
STAGE-SPECIFIC PROTEOMIC PROFILES OF PRIMARY COLORECTAL ADENOCARCINOMAS IN MALAYSIAN PATIENTS
T.P. Lau *, A.C. Roslani, K.H. Chua. Department of Biomedical Science, Faculty of Medicine, University of Malaya, Kuala Lumpur, Malaysia, Department of Surgery, University of Malaya Medical Centre, Kuala Lumpur, Malaysia

Background: We aimed to characterise stage-specific colorectal carcinoma tumour-specific proteomic profiles in Malaysian patients with colorectal carcinoma as a starting point for the development of local screening, diagnostic, or treatment scheme.

Methods: Stringent criteria were applied for patients’ selection—i.e., newly-diagnosed cases without personal history of cancer or family history of colorectal carcinoma, with no known hereditary colorectal carcinoma syndrome, and not receiving any neoadjuvant chemo- or radiotherapy. Ten stage II, five stage III, and five stage IV colorectal carcinoma patients were recruited for our comparative protein expression analysis via a combination of 2-D DIGE and LC-MS/MS.

Findings: Twenty protein spots of interest were reported in the stage II colorectal carcinoma group (p < 0.01; average volume ratio ≤2 or ≥2). Hsp60, RPLP0, PPas, NCC27, TCTP, nucleasephisin, SGN8, NM23, stathmin, S100A9, keratin (type I cytoskeletal 20), ACTC1, ACTSA, HSP27, LC20, and LC17 were aberrantly regulated. There were no statistically significant changes in global protein abundance between the advanced stage colorectal carcinomas (stages III and IV) and distally located ostensibly normal colonic mucosa (p > 0.05).

Interpretation: Our failure to identify aberrantly regulated proteins in advanced stage colorectal adenocarcinomas warrants further investigation. One of the possibilities is that, the adjacent histologically normal colonic mucosa might experience certain molecular changes to create a permissive microenvironment for tumour invasion and metastasis. If this is confirmed, the use of adjacent macroscopically normal colonic mucosa as a normal control in pairwise analyses of colorectal carcinomas need to be re-evaluated.

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P0181
MIR-200C EXPRESSION IN THAI PATIENTS WITH CHOLANGIOCARCINOMA
W. Loywirat *, V. Sriuranpong, S. Tanasanvimon. Medical Oncology Unit, Department of Medicine, Chulalongkorn University and King Chulalongkorn Memorial Hospital, Bangkok, Thailand

Introduction: Cholangiocarcinoma is common in Thailand, where it was uniquely associated with Opisthorchis viverrini infection. MiR-200c is involved in carcinogenesis, especially the epithelial–mesenchymal transition. Its prognostic value has been demonstrated in several cancers. Previous studies have reported the aberration of miR-200c...