AUTHOR: **Mariana Paula Cunha Gonçalves -** **Young physician (Clinical Oncology) from Mário Penna Institute / Belo Horizonte - Brasil**

TITLE: **Intensive second line palliative treatment in patients with colon adenocarcinoma - a case report.**

ABSTRACT: ***Introduction:*** Despite of the evolution of the treatments and the better knowledge of tumor behavior in patients with metastatic colorectal adenocarcinomas, it is well known the poor prognosis associated in those patients who presented with disease progression after the first line treatment. Long-term relapse-free survival with second-line palliative treatment can be achieved in only a limited number of individual cases. ***Case Report***: A 48-year-old male patient presented with a sigmoid colon adenocarcinoma, with unresectable bilobar liver metastases. Molecular evaluation with BRAF and All - RAS wild type. Without microsatellite instability. We Started treatment based on chemotherapy with FOLFIRI plus cetuximab. The pacient evolved with progression of liver disease after 6 cycles of first-line therapy. On this occasion second-line chemotherapy with mFOLFOX6 plus bevacizumab was started. Reassessment tests after 3 treatment cycles showed a significant reduction of hepatic target lesions (3 in total), with no signs of active diseases in other sites. Indicated surgical approach of these lesions with proportional hepatic segmentectomies aiming at complete resections. The histopathological findings of the analyzed pieces confirmed that free margins were reached in all of them. As a complementary therapy, three additional cycles of mFOLFOX6 plus bevacizumab were given postoperatively. The treatment was, in general, well tolerated, and no grade III or IV toxicity was observed. In the extended follow-up, the patient presents with a interval of 30-month free of disease recurrence, and in excellent clinical conditions. ***Conclusion.*** In this case, it was possible to observe the importance of intensive chemotherapy treatment, even in the second-line palliative scenario, associated with an adequate surgical approach to achieve more efficient conversion rates and long-term recurrence-free survival results and, in individual cases, increase in overall survival.