EP-152

The role of adjuvant chemotherapy in resected pancreatic cancer

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Introduction: Pancreatic cancer has an extremely poor prognosis. Adjuvant chemotherapy is recommended for patients with resected pancreatic cancer. However, optimal adjuvant therapy for resected pancreatic cancer remains controversial. This study aimed to evaluate the efficacy of adjuvant chemotherapy according to the cancer status.

Methods: We assessed a 253 patients with pancreatic ductal adenocarcinoma who underwent surgery in between January, 2011 and August, 2019 at Kyungpook National University Chilgok Hospital. Among 253 patients, 132 patients with R0 resection and no prior radiation or chemotherapy were retrospectively analyzed.

Results: Of the 132 patients analyzed, 67 (50.8%) were men and 65 (49.2%) were women and the median age was 67 (42–85). Overall median survival was 21.8 months. Fifty-seven patients (43.2%) received adjuvant chemotherapy, whereas 75 (56.8%) did not receive adjuvant chemotherapy after surgery. Although not statistically significant, patients who received chemotherapy seemed to be improved median OS compared with surgery alone (25.6 versus 17.4 months, $p = 0.077$). Stratified by different lymph node status, the benefit of adjuvant chemotherapy was only seen among the patients with nodal metastasis (HR = 1.78, 95% CI, 1.11–2.87; $p = 0.018$).

Conclusions: This study suggests adjuvant chemotherapy for resected pancreatic cancer is associated with improved survival in selected patients. Adjuvant chemotherapy seems to favorably impact on overall survival for resected pancreatic cancer with nodal metastasis.

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