

Διοργάνωση:



ΙΝΣΤΙΤΟΥΤΟ ΜΟΡΙΑΚΗΣ
ΙΑΤΡΙΚΗΣ & ΒΙΟΙΑΤΡΙΚΗΣ
ΕΡΕΥΝΑΣ (ΙΜΒΕ)

Σε συνεργασία:

Α' Τμήμα Χημειοθεραπείας,
Α.Ν.Θ. «ΘΕΑΓΕΝΕΙΟ»

ΠΑΝΕΛΛΗΝΙΟ ΣΥΝΕΔΡΙΟ ΜΕ ΘΕΜΑ

Η ΜΟΡΙΑΚΗ ΙΑΤΡΙΚΗ ΑΠΟ
ΤΟ ΕΡΓΑΣΤΗΡΙΟ ΣΤΗΝ ΠΡΑΞΗ

ΠΡΟΚΛΗΣΕΙΣ ΚΑΙ ΕΡΩΤΗΜΑΤΑ VI

30 ΙΟΥΝΙΟΥ - 02 ΙΟΥΛΙΟΥ 2022
CROWNE PLAZA | ΑΘΗΝΑ

Υπό την αιγίδα:



Εθνικών και Καποδιστριακών
Πανεπιστημίων Αθηνών
ΙΑΤΡΙΚΗ ΣΧΟΛΗ

θα χορηγηθούν 24 Μόρια Συνεχιζόμενης
Ιατρικής Εκπαίδευσης (CME-CPD)

ΕΠΙΣΤΗΜΟΝΙΚΟ
ΠΡΟΓΡΑΜΜΑ

preoperative chemo-radiotherapy in upper gastrointestinal malignancies

Ιωάννης Ξ. Γεωργακόπουλος
Επίκουρος Καθηγητής Ακτινοθεραπευτικής Ογκολογίας ΕΚΠΑ
Αρεταίειο Νοσοκομείο

outline

- esophageal & GEJ cancer
- gastric cancer
- pancreatic adenocarcinoma

general facts

advantages of neoadjuvant therapy

- assess response to primary tumor
- improve local control
- early treatment micrometastases
- sterilization of LNs
- intact blood supply; improved delivery of ChT & RT
- facilitate R0 & pCR resection

general facts

disadvantages of neoadjuvant therapy

- staging
- toxicity
- increase in postoperative complications

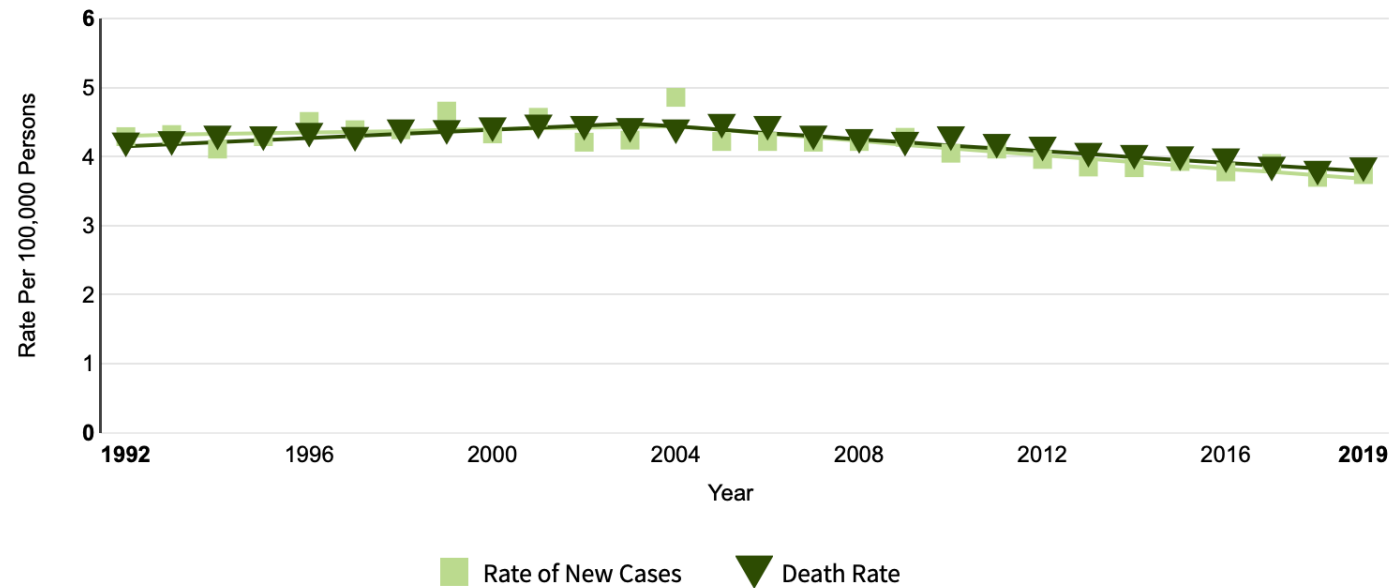
esophageal & gastroesophageal junction cancer

epidemiology

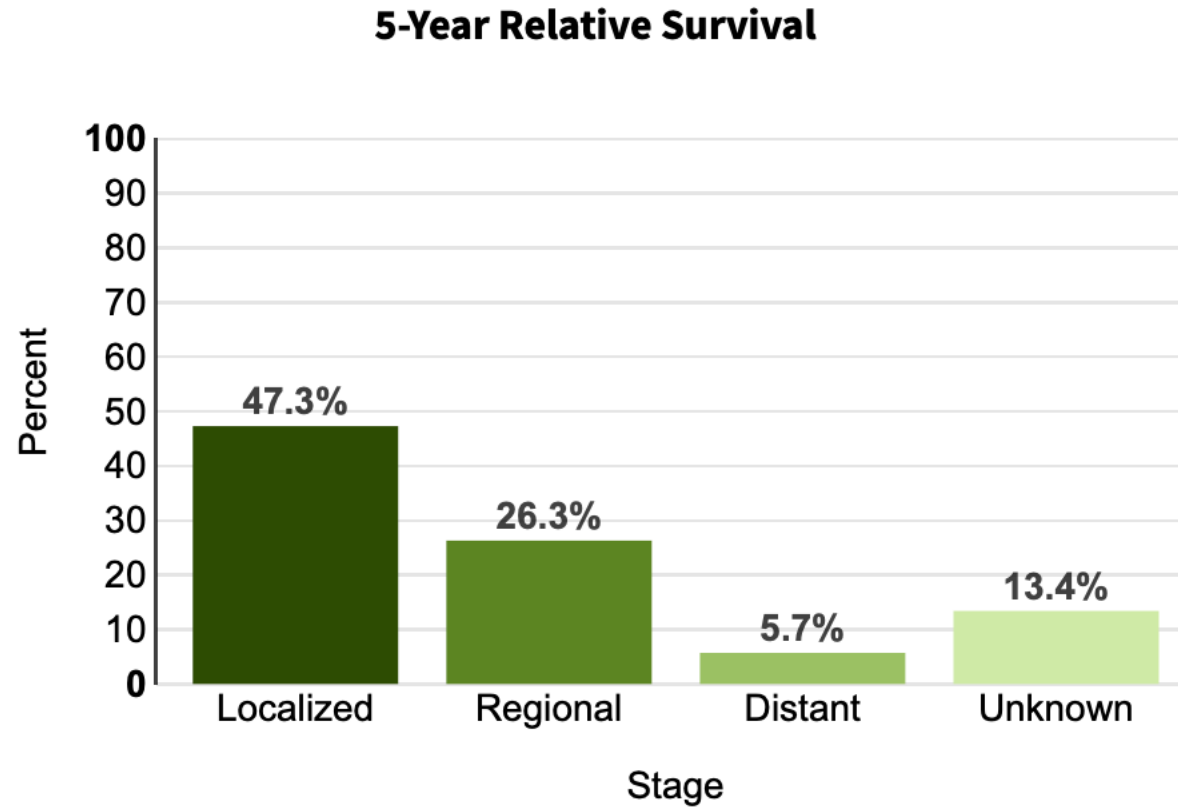
Estimated New Cases in 2022	20,640
% of All New Cancer Cases	1.1%

Estimated Deaths in 2022	16,410
% of All Cancer Deaths	2.7%

5-Year Relative Survival
20.6%
2012–2018



epidemiology



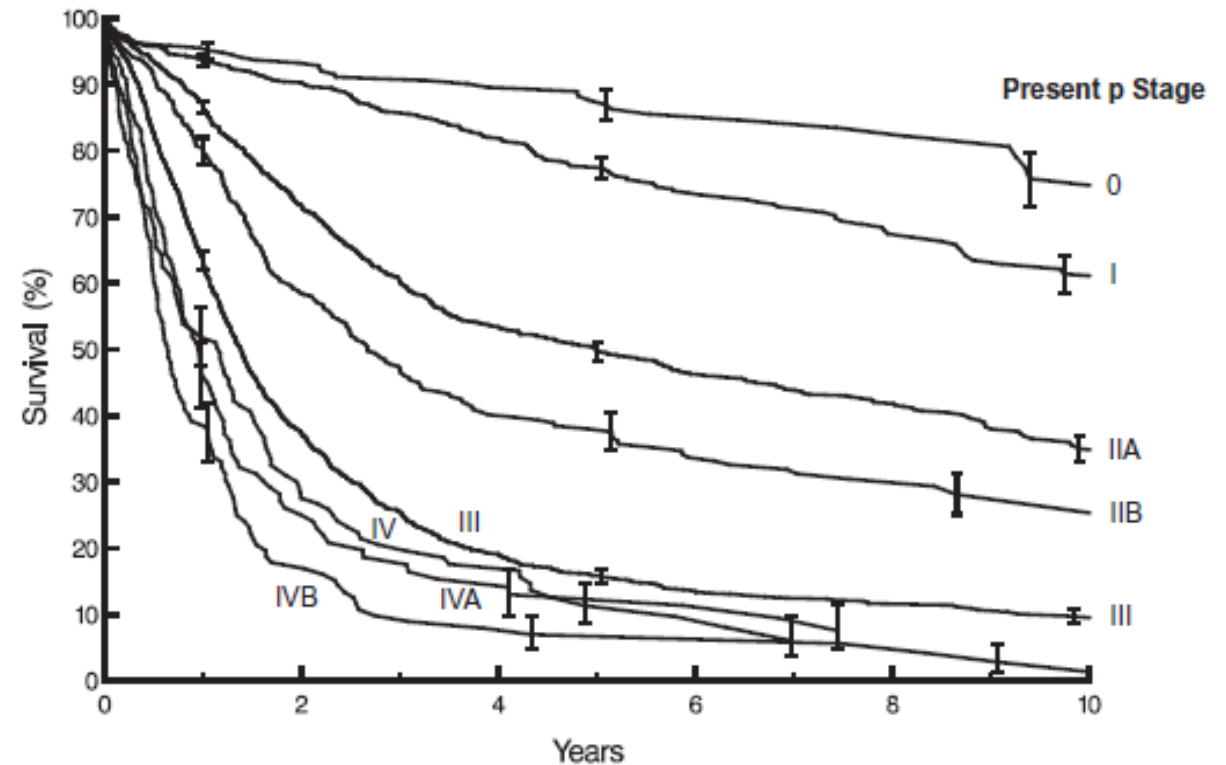
general facts

- aggressive disease
- poor 5y OS; rarely exceeds 40%
- 17th in incidence
- 6th in overall mortality
- surgery: mainstay of management
- shift to multimodality regimens

thoracic esophagus tumors

surgery alone

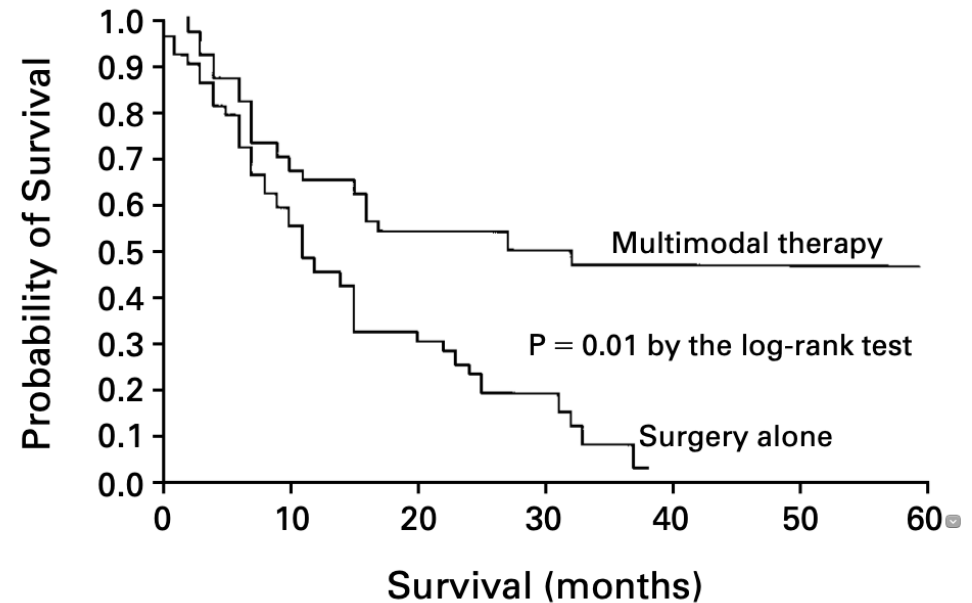
analysis of 4627 patients with esophageal cancer who were treated with surgery alone, without adjuvant or neoadjuvant therapy, five-year survival rates were 42 percent, but they were <50 percent for all disease stages except T1N0 cases, and they were 15 percent for any patient with node-positive disease



NACRT vs. surgery alone (ADC) Irish trial

- ADC
- 58 pts NACRT vs. 55 surgery
- 14% upper 1/3; 51% medial 1/3; 35% GEJ
- endpoints: 3y OS 36 vs. 6%

pCR 25%



“multimodal treatment is superior to surgery alone for patients with resectable adenocarcinoma of the esophagus”