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Neoadjuvant therapy for resectable PDAC

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Lecture : Pancreatic ductal adenocarcinoma (PDAC) portends a dismal prognosis—the worst among major malignancies. The majority of patients present with metastatic disease and ultimately expire within months of the time of diagnosis. Moreover, even patients who are fortunate enough to present with resectable PDAC are often plagued by high recurrence rates. While modern adjuvant chemotherapy has been shown to decrease the risk of recurrence after surgery, postoperative complications and poor performance status after surgery prevent up to 50% of patients from receiving it. Given the benefits of neoadjuvant therapy (NAT) in patients with borderline resectable disease, it is understandable that NAT has been steadily increasing in patients with resectable cancers as well. In this lecture, I will highlight the rational and existing evidence of NAT in patients with resectable PDAC. Also, I will present the necessity for selection of NAT regimen by predicting the treatment response in advance.