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Statistical Cure Fraction In Patients With Borderline Resectable Pancreatic Cancer Undergoing Neoadjuvant Chemoradiotherapy Followed By Radical Resection.

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Background : Although neoadjuvant chemoradiotherapy (NCR) has been selectively applied in patients with borderline resectable pancreatic cancer (BRPC), little data of long-term outcomes are available for supporting its role as a potentially curable therapeutic option. This study assessed the probability of being statistically cured among these patients.

Methods : The literature search was conducted focusing on previous studies that investigated the long-term recurrence-free survival rates of patients with BRPC after radical resection following NCR. The reference cohort was extracted from studies including patients undergoing upfront radical resection for resectable pancreatic cancer. Pseudo-individual patient data were reconstructed for the original papers. A non-mixture cure model was adopted to estimate the statistical cure fraction.

Results : Nine prospective or retrospective studies were secondarily analyzed. The probability of being statistically cured after radical resection following NCR for BRPC was 5.8% (95% confidence interval, 2.7%–10.5%), lower than that of the reference cohort (14.7%, 95% confidence interval of 13.2%–16.4%). However, there was no significant difference between two groups (hazard ratio, 0.96; 95% confidence interval, 0.87–1.09).

Conclusions : From this study, we concluded that a cure can be expected in around six percent of patients with BRPC after radical resection following NCR, which would be helpful in counseling patients and even in deciding to perform NCR.

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