

Advances in liver surgery enable the prospect of curative treatment for more patients

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Although many prognostic factors predicting survival and cancer recurrence in patients undergoing surgery for colorectal liver metastases are already identified, the effects of newly introduced technologies and new drugs in the treatment of these patients are still poorly studied because of the presence of many involved factors.

A research article to be published on June 7, 2009 in the *World Journal* of Gastroenterology addresses this question. The research team led by Professor Josep Fuster and Dr. Josep Marti from Hospital Clinic in Barcelona (Spain) reviewed their patients undergoing surgery for colorectal liver metastases from 1994 to 2006 to study the changes during two different time periods. As various studies have shown better operative outcomes and advances in patient selection and treatments in recent times, the article further investigated the results of all these changes on patient survival and cancer recurrence.

The study analyzed prognostic factors and found that patients with extrahepatic disease, high levels of carcinoembriogenic antigen (a commonly used tumor marker for colorectal cancer patients' surveillance) or more than 4 nodules were at risk of a poorer survival. Patient survival at 5-years after surgery was 47%. It was seen that patients in the second time period had more adverse prognostic factors and a shorter hospital stay than in the first period but no differences in overall survival and recurrence were observed between the two periods.

Although prognostic factors for survival and cancer recurrence of



patients undergoing surgery for colorectal liver metastases are important for the selection of the best treatment options, improvements in surgical technique and better complementary treatments in recent times allow for the increase in the number of patients benefiting from surgical curative treatment. However, a careful patient selection and the judicious use of other available treatments prior to and after surgery are crucial to improve prognosis in these patients.

Professor Josep Fuster and Dr. Josep Marti are currently working at the Liver Surgery and Transplantation Unit at Hospital Clinic in Barcelona (Spain), a well known Institution for its leading advances and publications in liver and gastrointestinal diseases.

Source: World Journal of Gastroenterology (<u>news</u>: <u>web</u>)

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