

Adjuvant therapy shows promise in biliary tract cancer

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(HealthDay) -- For patients with biliary tract cancers, postresection adjuvant therapy with chemotherapy or chemoradiotherapy appears to be beneficial in treating patients with biliary tract cancers, with significant improvement seen for patients with node or margin positivity, according to research published online April 23 in the *Journal of Clinical Oncology*.

Anne M. Horgan, M.D., of the Princess Margaret Hospital in Toronto, and colleagues conducted a systematic review and meta-analysis of 20 studies involving 6,712 patients to study the impact of adjuvant therapy on the survival of patients with biliary tract cancer.

Compared with surgery alone, the researchers found that adjuvant therapy was associated with a nonsignificant improvement in overall

survival (pooled odds ratio [OR], 0.74; $P = 0.06$). No survival difference was observed for patients with bile duct tumors or [gallbladder cancer](#) ($P = 0.68$). Adjuvant chemotherapy or chemotherapy plus [radiation therapy](#) offered significantly improved survival compared with radiation therapy alone (OR, 0.39, 0.61, 0.98, respectively; $P = 0.02$). Adjuvant therapy was most effective in patients with lymph-node positive disease (OR, 0.49; $P = 0.004$) or resection margin positivity (OR, 0.36; $P = 0.002$).

"The pooled analysis indicated nonsignificant benefit for adjuvant therapy in unselected patients," the authors write. "However, in subgroups with high-risk patients, such as those with node or margin positivity, postresection adjuvant therapy seems beneficial."

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