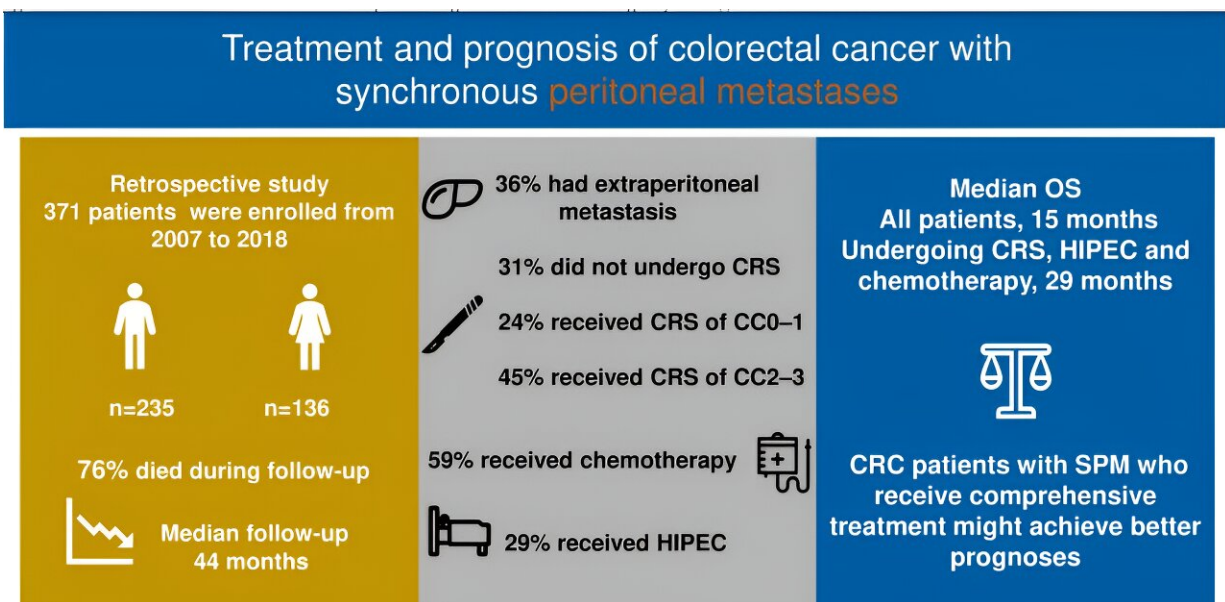


Comprehensive treatment strategy could change prognoses for colorectal cancer patients with metastases

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Treatment and prognosis of colorectal cancer with synchronous peritoneal metastases. Credit: Xiusen Qin, Zifeng Yang, Yang Li, Jian Luo, Hui Wang, Huaiming Wang

Colorectal cancer (CRC) with synchronous peritoneal metastases (SPM) is a challenging disease to treat with a relatively poor prognosis. However, recent advances in treatment strategies have led to improved outcomes for patients with SPM.

The optimal treatment approach for CRC with SPM remains controversial. A growing body of evidence suggests that comprehensive treatment, including cytoreductive surgery (CRS), chemotherapy, and hyperthermic intraperitoneal chemotherapy (HIPEC), may improve [patient outcomes](#).

A recent study from China, published in the journal *eGastroenterology*, evaluated the [treatment strategies](#) and clinical outcomes of [patients](#) with CRC with SPM. The study included a large sample of patients and the findings suggest that comprehensive treatment was associated with a significantly improved prognosis.

Specifically, patients who underwent CRS, chemotherapy, and HIPEC had a [median overall survival](#) of 29 months, compared to 14 months for patients who received less aggressive treatment. The study also found that complete cytoreductive surgery (CC-0), in which all visible cancer is removed during CRS, was an independent predictor of improved survival.

The findings of this study are significant because they provide further evidence to support the use of comprehensive treatment for patients with CRC with SPM. The study also highlights the importance of CC-0 in achieving long-term survival benefits.

However, it is important to note that this study was observational and cannot establish a causal relationship between treatment and outcome. More refined stratification and randomized [clinical trials](#) are needed to address potential confounding factors and bias.

The study also noted that current knowledge on the treatment and prognosis of CRC with SPM is inconclusive, and a study with a large sample size from China is still lacking.

This is supported by the fact that most studies on the treatment and prognosis of patients with colorectal SPM have been conducted in Europe and North America, with limited data available from China. Additionally, the optimal treatment approach for CRC with SPM remains controversial.

The researchers also highlighted that the National Comprehensive Cancer Network (NCCN) guideline is conservative regarding CRS plus HIPEC, and clinicians still tend to favor palliative care for patients with CRC with peritoneal metastases.

Overall, the findings of this study suggest that patients with CRC with SPM who receive integrated treatment have better prognoses. Specifically, CC-0 should be considered to achieve long-term survival benefits. However, more research is needed to refine treatment strategies and identify the optimal treatment approach for all patients with CRC with SPM.

More information: Xiusen Qin et al, Treatment and prognosis of colorectal cancer with synchronous peritoneal metastases: 11-year single institute experience, *eGastroenterology* (2023). [DOI: 10.1136/egastro-2023-100016](https://doi.org/10.1136/egastro-2023-100016)

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