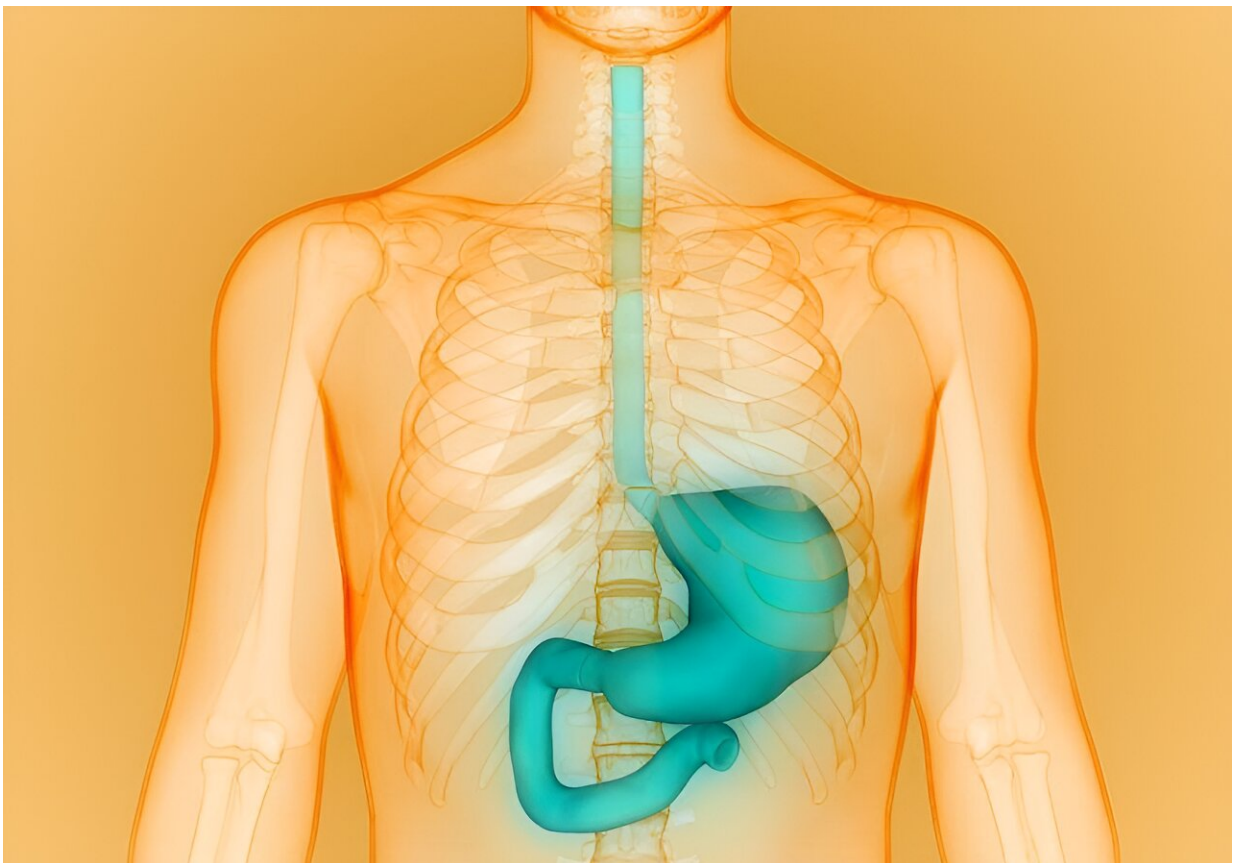


# Trial suggests chemo before, after surgery could help those battling esophageal cancer

June 4 2024, by Ernie Mundell

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People battling advanced esophageal cancers should get doses of [chemotherapy](#) both before and after tumor-removing surgeries, a new study suggests.

"There is considerable disagreement as to whether giving all adjuvant [chemo] therapy upfront versus 'sandwich' adjuvant therapy before and after surgery is the better standard of care" for people whose tumors can be removed with surgery, explained researcher Dr. Jennifer Tseng, of Boston Medical Center.

She wasn't involved in the new trial, but said that "this [randomized clinical trial](#) from Europe answers that question for patients similar to those in enrolled in the trial: preoperative plus postoperative chemotherapy provides better outcomes."

The findings were presented at the annual meeting of the [American Society of Clinical Oncology](#) (ASCO), in Chicago.

According to the [American Cancer Society](#), more than 22,000 Americans will be diagnosed with esophageal cancer this year and over 16,000 will die of the illness. Esophageal cancer is much more common among men than women.

The question of when to administer chemotherapy for [esophageal cancer](#) has been a matter of debate.

The new trial was led by Dr. Jens Hoepfner of the University of Bielefeld, in Detmold, Germany. His team focused on 371 people with esophageal cancers that hadn't spread beyond the esophagus but had tumor sizes large enough to be considered advanced. All of patients underwent surgery to help remove the tumor.

About half of the patients received [chemotherapy](#) only before their surgery, while the other half got chemo before and after their surgery.

Tracked for an average of more than four-and-a-half years following their surgery, the trial found that fewer patients died in the "before-and-after" arm of the trial versus the "before-only" arm—3.2% versus 5.6%, respectively.

At the three-year mark, patients who'd gotten chemo before and after surgery had a 30% lower risk of dying than those who only got chemo before, the researchers said. Complete regression of the original esophageal tumor was also more likely in the before-and-after group.

Patients who got the chemo twice lived an average of 66 months, versus just 37 months for those who only got chemo prior to surgery.

According to Hoepfner, the study shows that chemo before and after [surgery](#) should be recommended, "in order to optimize the chance of curing their tumors in the long term."

Because these findings were presented at a medical meeting, they should be considered preliminary until published in a peer-reviewed journal.

**More information:** Find out more about esophageal cancer at the [Mayo Clinic](#).

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Citation: Trial suggests chemo before, after surgery could help those battling esophageal cancer (2024, June 4) retrieved 20 June 2024 from <https://medicalxpress.com/news/2024-06-trial-chemo-surgery-esophageal-cancer.html>

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