

要望演題

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[R19] 要望演題 19 stage4

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[R19-3] 腹膜播種を有する大腸癌に対する包括的治療の成績

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Background: Comprehensive treatment (COMPT) consisting of cytoreductive surgery (CRS) with perioperative chemotherapy (POC) was performed for CRC-patients as a curative treatment for peritoneal metastasis (PM) from colorectal cancer (CRC). Clinical factors contributing cure of CRC patients with PM will be presented.

Methods: between 2006 and 2024, 501 patients were treated with COMPT among 990 CRC-patients with PM. .

Results:

Multi-variate analysis revealed that CCR score, SB-PCI score, LLM (liver/lung metastasis), and HIPEC were independent prognostic factors.

One hundred and seventy patients fulfilled the following factors; PCI less than 13, SB-PCI less than 3, No. of involved peritoneal sectors (NIPS) less than 7, no LLM (liver/lung mets), differentiated histologic type, and CCR-0. The median survival time of these patients was 5.5 years, and five and ten- year survival rates were 58% and 25%. Postoperative grade 3,4,5 complication occurred in 9 (5.3%), 15 (8.8%) and 1 (0.6%), respectively.

Cured patients were defined as those alive without recurrence more than 5 years after CRS. All of the cured patients (N=25) underwent CCR-0 resection. The PCI and SB-PCI of these 25 patients were ≤ 12 and ≤ 2 , respectively.

Conclusions: Among CRC-patients with PM, COMPT with CCR-0 resection should be indicated for PCI less than 13, SB-PCI less than 3, number of involved peritoneal segment less than 7, no LLM, and differentiated histologic type.