# Preoperative chemoradiotherapy and surgery for oesophageal cancer

**Descriptor:**

Review of short term safety and efficacy results.

**Background:**

The optimal neoadjuvant (NA) regime for cancers of the oesophagus and OGJ remains controversial. In the UK preoperative chemotherapy is the standard of care and we have been slow to adopt chemoradiotherapy (CRT) fearing increased surgical morbidity and under-treatment of systemic disease. The CROSS trial showed improved survival for patients treated with chemoradiotherapy (CRT) and surgery compared to surgery alone and has led to a renewed interest in the use of CRT in the UK.

## The Cycle

**The standard:**

The CROSS trial showed a satisfactory safety profile for neoadjuvant chemoradiotherapy followed by surgery, a 29% complete pathological response rate, 92% R0 resection rate and improved 3 year survival rates.

**Target:**

To compare local safety and efficacy results with the results of the CROSS trial.

## Assess local practice

**Indicators:**

1. Percentage >=G3 chemoradiotherapy toxicities

2. Percentage surgical morbidity and mortality

3. Percentage pathological response rate

4. Percentage R0 resection rate

**Data items to be collected:**

1. Grade 3-5 chemoradiotherapy toxicities

2. Perioperative complications and postoperative mortality

3. Pathological response rate and resection margins

**Suggested number:**

At least 25 consecutive patients treated with preoperative chemoradiation for oesophageal cancer.

**Suggestions for change if target not met:**

1. To discuss the results of the audit at the upper GI MDT meeting

2. To develop local practice protocols for the use of neoadjuvant chemoradiation

3. To continue a prospective audit of neoadjuvant chemoradiation and surgery and a long term follow up data analysis

**Resources:**

- Electronic patient records

- Radiology imaging (EUS, CT, PET) reports

- Histopathology reports

**References:**

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4. Sjoquist et al. Survival after neoadjuvant chemotherapy or chemoradiotherapy for resectable oesophageal carcinoma: an updated meta-analysis. Lancet Oncol 2011; 12:681-692
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