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Risk factors for recurrence or metastasis following endoscopic treatment for esophageal squamous cell carcinoma invading muscularis mucosae

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Background: Although endoscopic resection is frequently indicated for patients with esophageal squamous cell carcinoma (ESCC) invading the muscularis mucosae, some experienced local recurrence or even distant metastasis. The present study aimed to elucidate the risk factors for recurrence of metastasis after endoscopic resection for ESCC invading into the muscularis mucosae.

Methods: Data from a total of 99 ESCC with muscularis mucosae invasion treated with endoscopic resection between January 2018 and October 2020 were retrospectively collected and analyzed. Information with regard to patient demographics, lymphovascular invasion, vertical margin, and additional treatments, including chemoradiation or surgeries, were also collected. The multivariable-adjusted Cox proportional hazard ratio was applied to identify independent risk factors for ESCC recurrence or metastasis.

Results: During a median of 47 (interquartile range 29-58) month follow-up, 26 patients experienced recurrence or distant metastasis. Cox regression showed that lymphovascular invasion (HR=4.32, 95% CI 2.43-7.43, P<0.001) and positive vertical margin (HR=6.01, 95% CI 3.05-13.42, P<0.001) were noted to be independent risk factors for recurrence or metastasis in ESCC with muscularis mucosae invasion. For those with recurrence or metastasis, salvage treatment resulted in a 3-year survival rate of approximately 96%.

Conclusion: Endoscopic resection without additional treatments appears to be an acceptable option for ESCC with muscularis mucosae invasion with negative lymphovascular invasion and vertical margin.

Biography

Yang Song, male, born on August 15,1988, bachelor's degree, main research interests of digestive endoscopy, pancreatitis, cirrhosis, with rich clinical experience.