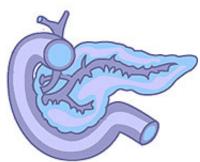


Vessel boost tied to improved surgical resection rate

14 June 2015



improvement was not statistically significant," the authors write.

One author disclosed financial ties to Pfizer.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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Illustration: U.S. Department of Health and Human Services

(HealthDay)—For patients with borderline resectable pancreatic adenocarcinoma (BRPAC) and locally-advanced PAC (LAPAC) treated with neoadjuvant chemoradiation (NACRT), dose escalation with a vessel boost (VB) correlates with a trend toward improvement in the surgical resection rate. These findings were published online June 12 in *Practical Radiation Oncology*.

Lora Wang, M.D., from the Fox Chase Cancer Center in Philadelphia, and colleagues conducted a retrospective review of cases with BRPAC and LAPAC treated with NACRT from 2006 through 2013. Data were included for 104 patients, of whom 22 percent received a VB and 78 percent received no boost. The rate of R0/R1 potentially curative surgical resection and acute toxicity were the primary end points.

The researchers found that more patients in the VB group were treated with intensity modulated radiation therapy (P = 0.002) and were treated from 2010 to 2013 (P

"Dose escalation was associated with an improved surgical resection rate in BRPAC and LAPAC patients treated with NACRT, although this



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