

ASCO: VTE is risk factor for recurrence in esophageal cancer

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The median DFS was significantly shorter in the VTE versus the non-VTE group for patients with pathologically N0 or N1 (41 versus 64 months; $P = 0.04$). Compared with the non-VTE group, the VTE group had 50.9 percent increased recurrence risk ($P = 0.048$). VTE was found to be an [independent risk factor](#) in [logistic regression analysis](#) (odds ratio, 2.964; $P = 0.026$).

"Our study suggests that VTE may be [a] risk factor for recurrence in [esophageal cancer](#) patients," the authors write.

One author disclosed financial ties to pharmaceutical and medical device companies.

More information: [Abstract](#)
[More Information](#)

(HealthDay)—For patients with esophageal cancer, venous thromboembolism (VTE) is a risk factor for recurrence, according to a study presented at the American Society of Clinical Oncology's annual Gastrointestinal Cancers Symposium, held from Jan. 21 to 23 in San Francisco.

En Amada, from the Keio University School of Medicine in Tokyo, and colleagues examined the correlation between VTE and prognosis in patients with esophageal cancer. Data were reviewed for 172 patients who underwent radical esophagectomy. Using computed tomography the authors assessed VTE from the neck to the pelvis at the initial visit, after neoadjuvant chemotherapy, and at the sixth postoperative day. They compared patient and tumor characteristics for patients with and without VTE.

The researchers observed 21 VTE events among 172 patients (12 percent). There were no significant between-group differences in median disease-free survival (DFS) and overall survival.

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