LETTER TO THE EDITOR

Should Chemoradiotherapy Be Used in Node-Negative Esophageal or Gastric Adenocarcinoma?

TO THE EDITORS:

We agree with Drs. Hotenrott and Ziogas that the role and timing of chemotherapy and radiation for patients with advanced disease in the esophagus and stomach needs further clarification.¹ Our retrospective study attempted to answer this question by analyzing 3378 patients treated in the state of Florida between 1998 and 2002. This data set is complete and allows for patient comorbidities.^{2,3} We demonstrated a significant benefit for neoadjuvant or adjuvant therapy for patients with regional (node positive) disease. Similar analysis of node-negative disease, however, did not reveal a benefit.

Although our data do not demonstrate a benefit for node-negative disease, such a benefit is certainly possible; however, our study was underpowered to detect this. In addition, the possibility of downstaging among node-negative patients after neoadjuvant chemotherapy may be an additional confounder.^{4,5}

We look forward to the completion and reporting of the CRITICS trial. Yet the possibility of insufficient power for detecting node-negative disease may result in this question remaining unanswered. We nonetheless agree that patients with node-positive adenocarcinoma of the esophagus or

stomach benefit from chemotherapy. We also think that the potential benefit in node-negative patients is smaller, if any. Patients should be counseled about these points in the management of these diseases.

Naveenraj L. Solomon, and Leonidas G. Koniaris

Department of Surgical Oncology, Dewitt Daughtry Family Department of Surgery, University of Miami School of Medicine, Miami, FL

e-mail: nsolomon@med.miami.edu

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