ASO AUTHOR REFLECTIONS

ASO Author Reflections: The Lymph Node Ratio is an Independent Prognostic Factor in Esophageal Squamous Cell Carcinoma After Minimally Invasive Esophagectomy

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PAST

For esophageal squamous cell cancer (ESCC), minimally invasive esophagectomy (MIE) has been performed worldwide. However, local recurrence and distant metastasis still are common.¹ Thus, it is important to identify surgical prognostic factors for ESCC patients treated with MIE.

PRESENT

The study results² showed that the lymph node ratio (LNR), defined as the ratio of metastatic lymph nodes (LNs) to examined LNs, is an independent prognostic factor for ESCC patients treated with MIE. In addition, for patients with pN1 status, the LNR is superior to the number of metastatic LNs. This means that a greater number of examined LNs is significantly associated with better survival, as previously reported.³ The current study is novel and valuable because no reports have described the influence of the LNR on the prognosis of ESCC patients treated with MIE.

FUTURE

As a result of their research results, the authors believe adequate LN resection that avoids stage migration and identifies metastatic LNs in MIE for ESCC patients should be performed. Moreover, a larger, multicenter study in the future is required to confirm the results of this study.

DISCLOSURE The authors declare that they have no conflict of interest.

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