ASO Author Reflections: Lymph Node Ratio After Neoadjuvant Chemotherapy in Locally Advanced Esophageal Cancer

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PAST

The lymph node (LN) ratio (LNR) has been proposed as a prognosticator in esophageal squamous cell carcinoma (ESCC) patients, especially when the number of LNs harvested is insufficient.¹ Conversely, the retrieved LN counts in ESCC patients who received neoadjuvant chemotherapy (NAC) are reportedly lower than in patients who did not receive NAC.^{2–4} However, it remains unclear whether the staging using LNR after NAC more accurately evaluates the prognosis of ESCC patients than the current Union for International Cancer Control (UICC) pathological N (pN) factor using a positive LN count and whether the LNR is a prognosticator for these patients when stratified by their response to NAC.

PRESENT

We studied the prognostic significance of the LNR in ESCC patients who received NAC and compared its prognostic accuracy with that of the UICC pN factor using a receiver operating characteristic (ROC) curve.⁵ We concluded that the LNR was a significant independent prognosticator for both recurrence-free survival (RFS) and overall survival (OS), and the ROC curve showed that the LNR had better performance as a prognosticator than the UICC pN factor in these patients. Furthermore, even when RFS and OS were stratified by histopathological response, the LNR was an independent prognosticator and the LNR had a better discrimination ability for responders than for non-responders.

FUTURE

This study demonstrated that the LNR had a significant prognostic value in ESCC patients, including in those who received NAC. However, the preoperative identification of patients with high LNRs is not currently possible. Furthermore, this study investigated patients who received cisplatin plus 5-fluorouracil therapy. It remains unclear whether the LNR can serve as a prognosticator in patients who receive chemoradiotherapy or triplet regimens, especially when RFS and OS are stratified by the histopathological response. While our results may assist in optimal management planning and personalized care, they should be validated further to address the above issue.

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