



ASO Author Reflections: Treatment Strategies for Locally Advanced Borderline Resectable Esophageal Squamous Cell Carcinoma

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PAST

The standard treatment of borderline resectable esophageal squamous cell carcinoma (BR-ESCC) patients is controversial. Recently, the results of the COSMOS trial^{1,2} showed that induction chemotherapy followed by surgery was promising for patients with BR-ESCC. Patients who underwent R0 resection surgery showed a better prognosis than those who did not. We conducted the NEOCRTEC-1601 clinical trial^{3,4} to assess the safety and efficacy of induction chemotherapy followed by surgery for BR-ESCC.

PRESENT

Our results⁴ showed that R0 resection was achieved in 53.2% of patients, among whom 8.5% achieved pCR. Patients who received surgery and achieved R0 resection had significantly improved overall survival (OS) and progression-free survival. The 3-year OS rate of patients who underwent R0 resection was 65.4%.

FUTURE

In our view, R0 resection may be the independent prognosis factor of BR-ESCC. However, randomized controlled studies are needed to confirm our views. We plan to conduct subsequent studies in our center that will be

aimed at exploring new regimens (study currently underway: NEOCRTEC-2001, ClinicalTrials.gov identifier NCT04548440) to improve the R0 resection rate and compare the prognostic efficacy of different treatment strategies.

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