

AB055. P-23. The impact of perioperative CA19-9 change on the survival and recurrence patterns after adjuvant chemoradiotherapy in extrahepatic cholangiocarcinoma

Byoung Hyuck Kim¹, Eunji Kim¹, Kyubo Kim², Jin-Young Jang³, Sun Whe Kim³, Do-Youn Oh⁴, Eui Kyu Chie^{1,5}

¹Department of Radiation Oncology, Seoul National University College of Medicine, Seoul, Republic of Korea; ²Department of Radiation Oncology, Ewha Womans University College of Medicine, Seoul, Republic of Korea; ³Department of Surgery, ⁴Department of Internal Medicine, Seoul National University College of Medicine, Seoul, Republic of Korea; ⁵Institute of Radiation Medicine, Medical Research Center, Seoul National University, Seoul, Republic of Korea
Correspondence to: Eui Kyu Chie. Department of Radiation Oncology, Seoul National University College of Medicine, Seoul, Republic of Korea. Email: ekchie93@snu.ac.kr.

Background: Perioperative CA19-9 value in pancreato-biliary cancers has been recognized as a prognostic factor. Herein, we investigated survival differences and recurrence patterns after

adjuvant chemoradiotherapy by perioperative CA19-9 change in surgically resected extrahepatic cholangiocarcinoma.

Methods: Patients were divided into those with preoperative normal CA19-9 (group 1, n=52), those with high preoperative and normalized postoperative CA19-9 (group 2, n=80), and those with both high pre- and postoperative CA19-9 (group 3, n=21).

Results: Depending on the group defined above, the 5-year overall survival (OS) (59.6%, 38.7%, and 9.5%, $P<0.001$) and disease-free survival (55.8%, 31.2%, and 9.5%, $P<0.001$) between the three groups differed. On multivariable analysis in patients other than group 1, poor prognosticators for OS were high postoperative CA19-9 (HR 2.26, $P=0.008$) and N1 disease (HR 2.33, $P=0.001$). Group 3, compared with group 2, showed higher distant metastasis rate, shorter disease-free interval, and higher CA19-9 at the time of recurrence.

Conclusions: Survival and recurrence patterns after adjuvant chemoradiotherapy are significantly affected by perioperative CA19-9 change. This may have important implications in patient selection for adjuvant chemoradiotherapy and clinical trial design.

Keywords: Adjuvant chemoradiotherapy; CA19-9; extrahepatic cholangiocarcinoma

Cite this abstract as: Kim BH, Kim E, Kim K, Jang JY, Kim SW, Oh DY, Chie EK. The impact of perioperative CA19-9 change on the survival and recurrence patterns after adjuvant chemoradiotherapy in extrahepatic cholangiocarcinoma. *HepatoBiliary Surg Nutr* 2019;8(Suppl 1):AB055. doi: 10.21037/hbsn.2019.AB055