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AB081. P053. Survival of unresectable pancreatic cancer patients after artery divestment combined pancreatectomy: a retrospective and propensity score-matched analysis

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Background: For non-metastatic pancreatic patients, artery involvement is the major obstacle of curative operation. Here we present the oncologic effect of artery divestment in unresectable pancreatic cancer patients.

Methods: Twenty-four artery-involved unresectable nonmetastatic pancreatic patients were identified with contrastenhanced CT received curative pancreatectomy with artery divestment (UR group). A total of 247 contemporary $pT1-{}^{3}N_{x}M^{0}$ pancreatic cancer patients receiving therapeutic surgery were enrolled as control. Univariate analysis of demographic and clinical data was performed to reveal risk factors of prognosis. Propensity scored matching (PSM) analysis was performed for independent risk factors to assess the median overall survival (MOS) of two groups of patients.

Results: For the primary survival analysis, the MOS of all 271 patients was 17.8 months (95% CI: 16.0 to 19.6 months). MOS of UR group and control group were 16.7 and 17.8 months respectively (P=0.481). Pre-operative CA19-9, pancreatectomy category, tumor grading, tumor size, lymph node metastasis, and post-operative chemotherapy were independent risk factors and introduced into PSM analysis. A 24 versus 24 PSM analysis revealed no statistical MOS difference between UR group and control group [MOS 16.7 months (95% CI: 5.7 to 27.7 months) for UR group, 17.3 months (8.2 to 26.4 months) for control group].

Conclusions: For UR pancreatic cancer patients, artery divestment combined pancreatectomy could offer similar prognosis comparing to earlier T staging patients.

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