



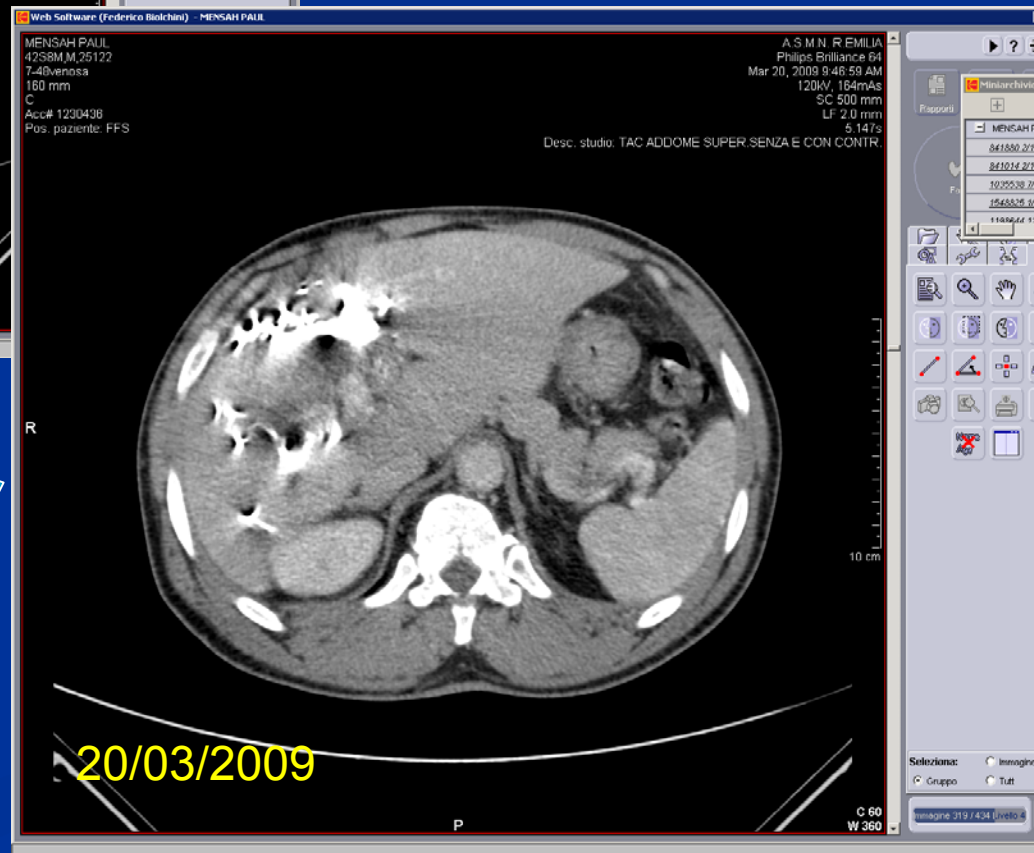
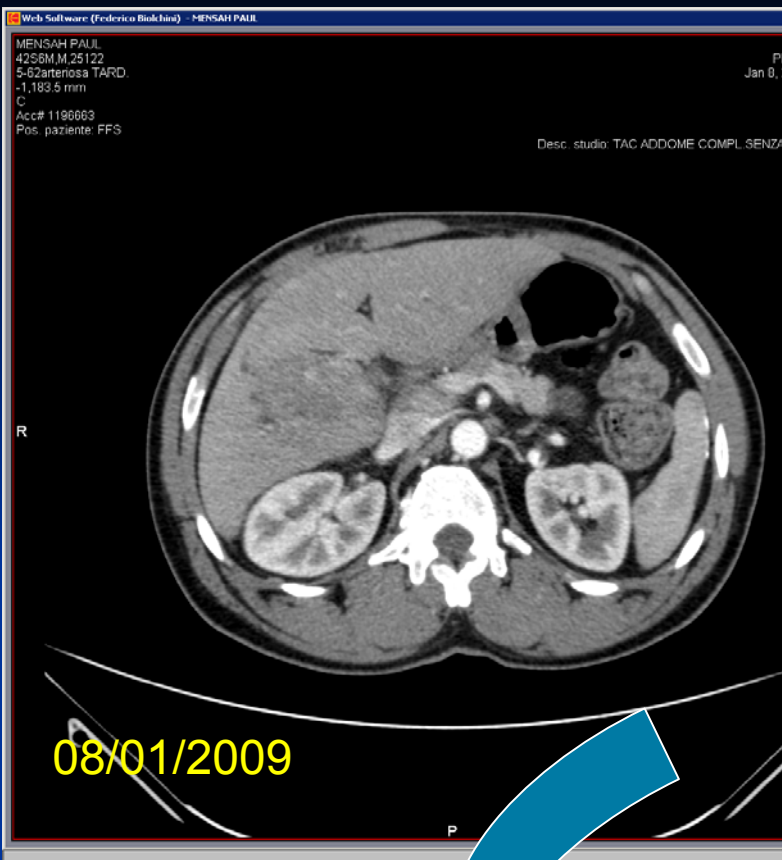
**DIPARTIMENTO CHIRURGICO I**  
*Unità Operativa di Chirurgia I Oncologica*  
**Arcispedale S. Maria Nuova - Reggio Emilia**

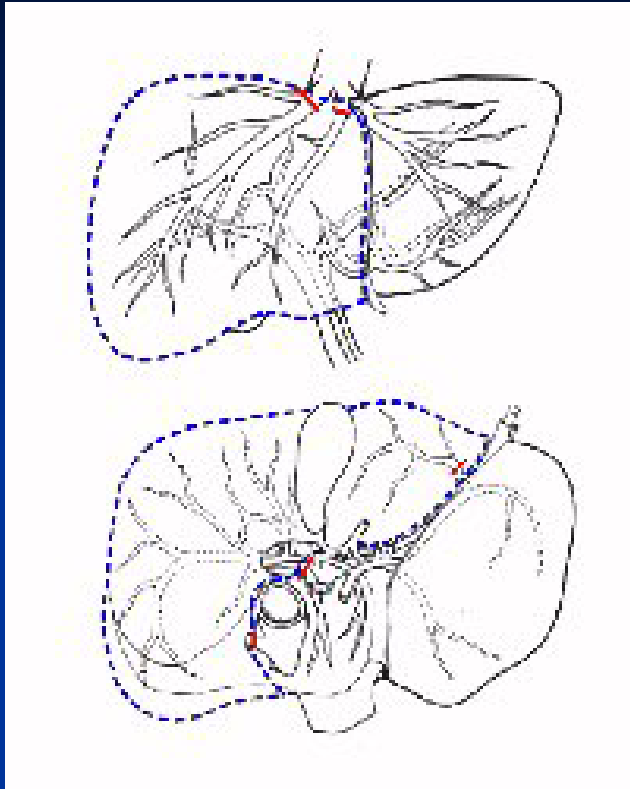
# MULTIDISCIPLINARIETA



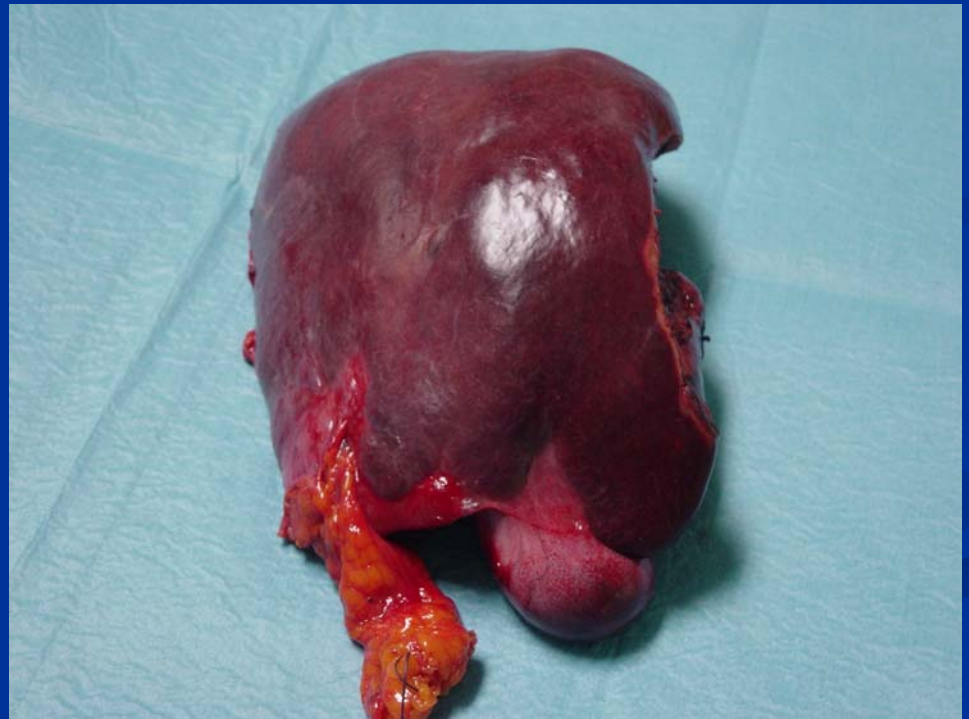
1. FEGATO
2. ESOFAGO-STOMACO
3. RETTO







## Epatectomia destra allargata





**Table 1**  
Randomized trials of surgery with or without neoadjuvant chemotherapy and radiation in esophageal cancer

Trial	Year	Number of Patients	Histology	CRT Arm	3-Year Overall Survival		Comments
					Surgery	CRT	
Le Prise	1994	86	Squamous	Sequential to 20 Gy	14	19	Sequential low RT dose (20 Gy), underpowered
Walsh	1996	113	Adenocarcinoma	CTRT to 40Gy	6	32 <sup>d</sup>	Lower than expected OS in surgery alone arm
Bosset	1997	297	Squamous	Sequential to 37 Gy	37	39	Sequential, altered RT fractionation
Urba	2001	100	75% adenocarcinoma	CTRT to 45 Gy	16	30	Underpowered
Burmeister	2005	256	62% adenocarcinoma	CTRT to 35 Gy	19.3 mo	22.2 mo <sup>a</sup>	One cycle of chemotherapy, low RT dose
Chiu	2005	81	Squamous	CTRT to 50–60Gy	54.5	58.3 <sup>b</sup>	Limited follow-up (16.9 months)
Tepper	2008	56	75% adenocarcinoma	CTRT to 50.4 Gy	16	39 <sup>c,e</sup>	Closed early due to slow accrual

Abbreviations: CRT, chemotherapy and radiation; CTRT, chemoradiation; RT, radiation therapy.

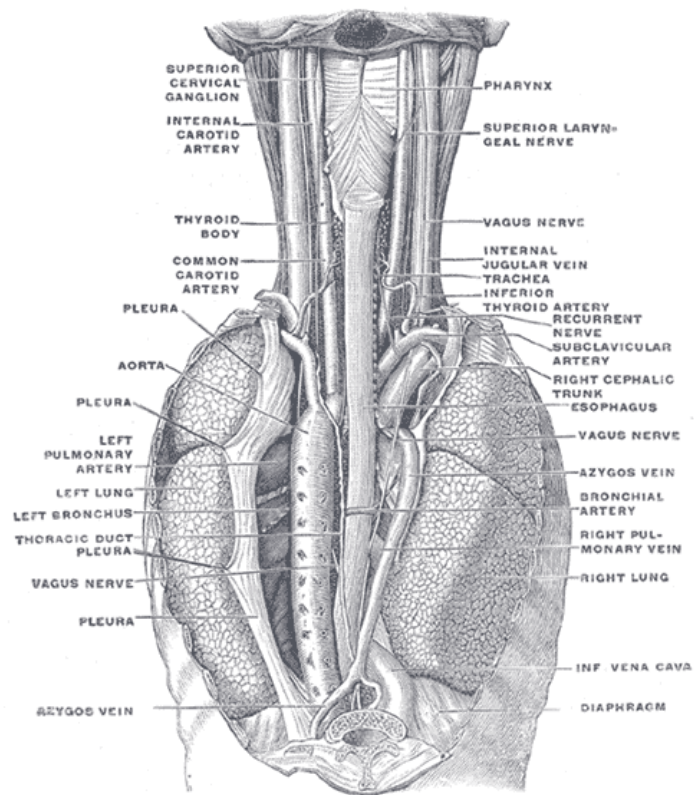
<sup>a</sup> Median survival.

<sup>b</sup> 2-year overall survival.

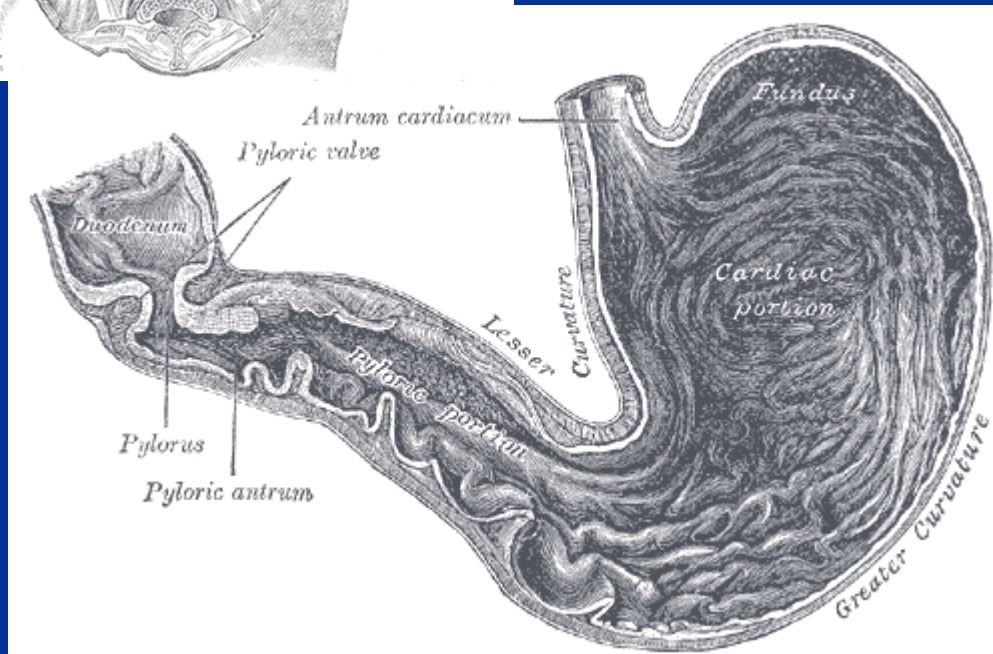
<sup>c</sup> 5-year overall survival.

<sup>d</sup> Statistically significant.

<sup>e</sup> Significance of 3-year overall survival not reported.



- Collaborazione con la U.O. Chirurgia IV- Ospedale S. Chiara di Pisa (dott. Mauro Rossi) per periodi di studio/aggiornamento tecnico
- Protocollo di studio per la terapia neoadiuvante
- Chemioipertermia nei tumori avanzati della giunzione esofago-gastrica

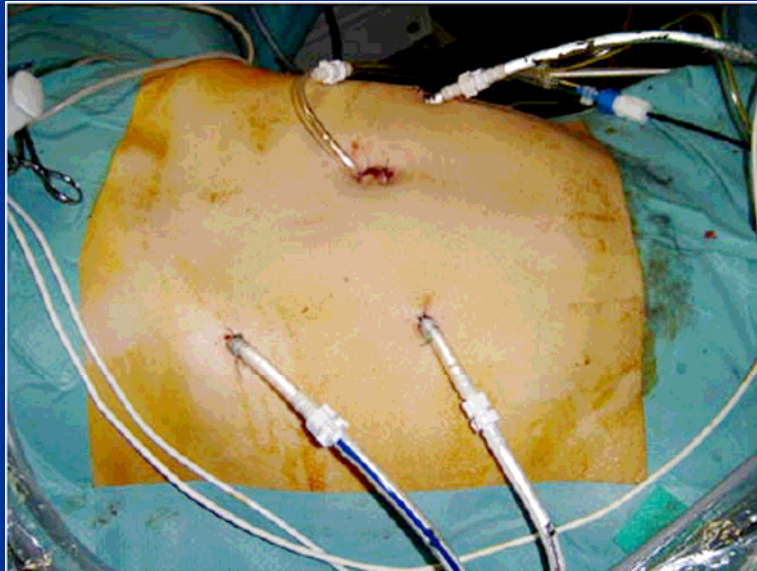


Chemioipertermia nei tumori avanzati della giunzione esofago-gastrica

## Staged laparoscopic adjuvant intraperitoneal chemohyperthermia after complete resection for locally advanced colorectal or gastric cancer: a preliminary experience

Elie Chouillard · Toufic Ata · Bernard De Jonghe · Léon Maggiori ·  
Nada Helmy · Yvan Coscas · Hervé Outin

Surg Endosc (2009) 23:363–369



**DEFINIZIONE DI UN  
PROGETTO DI  
STUDIO  
SCIENTIFICO**



REVIEW

# Surgical treatment of rectal cancer after neoadjuvant chemoradiation. Where are we going?

M. Caricato\*, F. Ausania, R. Coppola

*Department of Surgery, Campus Bio-medico University of Rome, Rome, Italy*



# Laparoscopic or open surgery for the cancer of the middle and lower rectum short-term outcomes of a comparative non-randomised study

Nikolaos Gouvas • John Tsiaoussis •  
George Pechlivanides • Nikolaos Zervakis •  
Anastasios Tzortzinis • Costas Aygerinos •  
Christos Dervenis • Evaghelos Xynos



*Discussion* Less morbidity and faster recovery is offered after laparoscopic TME. Quality of surgery assessed by histopathology is similar between the approaches. Neoadjuvant chemoradiation seems to have significant impact on blood loss but results in longer operation times of the OPEN group.

