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Prognostic Factors And Recurrence Pattern For Long Term Survivors In Patients With Pancreatic Cancer

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Background: Although the number of long-term survivors have increased due to improved systemic chemotherapy for pancreatic ductal adenocarcinoma (PDAC), prognostic factors and recurrence patterns for long-term survivors more than 5 years are rarely reported.

Methods: We found patients who underwent curative intent surgery for PDAC with follow-up more than 5 years in a tertiary referral center between January 2000 and December 2015. Long term survivors were defined as patients who survived 5 years or more, and the characteristics of long-term survivors and recurrence patterns were investigated according to the each stage using 8th edition of American Joint on Cancer Committee staging system.

Results: Of 1837 patients, 253 (13.7 %) patients survived more than 5 years, and 175 (9.5%) patients did not relapse for more than 5 years. Long term survivors showed old age (75.6 vs 58.5, p $\langle 0.001 \rangle$), and higher preoperative albumin levels (3.9g/dL vs 3.6g/dL, p $\langle 0.001 \rangle$) compared with patients who expired within 5 years in stage I. Old age (75.4 vs 58.5, p $\langle 0.001 \rangle$), less frequent PNI (72.1% vs 83.0%, p=0.004), and adjuvant chemotherapy (100% vs 81.6%, p $\langle 0.001 \rangle$) were factors in long term survivors with stage II. In stage 3, Old age (75.7 vs 59.5, p $\langle 0.001 \rangle$), and adjuvant chemotherapy (100% vs 85.4%) were related with long term survival. Even in patients who did not recurrence for more than 5 years, recurrence occurred over 96.9 months, and the most common sites of recurrence were liver (25.2%), peritoneum (17.6%), and lung (9.2%).

Conclusions: Old age and adjuvant chemotherapy were related with long term survival. Follow-up more than 5 years is necessary even for long term survivors because of frequent recurrence after 5 years.

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