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## Current Epidemiology and Management of Bile Duct Cancer

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**Lecture :** Biliary tract cancer (BTC), including intrahepatic cholangiocarcinoma (IHCC), extrahepatic cholangiocarcinoma (EHCC), ampulla of Vater cancer (AVC) and gallbladder cancer (GBC), accounts for 3% of all gastrointestinal malignancies. The incidence of BTC is increasing globally and is generally higher in Asian countries than in Western countries, especially IHCC in Thailand, China and South Korea. In general, incidence of IHCC is higher than that of EHCC in Asian countries, while the opposite occurs in Western countries. In Taiwan, the incidence of GB cancer and EHCC was stable at 3/100000, but the incidence of IHCC was increasing, esp in male.

Surgery is still the main stream for the treatment of BTC, however, the recurrence rate is still high. The gold standard therapy is chemotherapy with gemcitabine and cisplatin, but there is no consensus for standard second-line treatment. Recent progress in comprehensive genomic profiling for advanced BTC has helped to clarify tumorigenesis and facilitate the coming era of precision medicine. Fibroblast growth factor receptor 2 (FGFR2) fusion and isocitrate dehydrogenase (IDH)- and BRAF mutation-enriched populations have survival benefits from the corresponding inhibitors. Several interesting targeted agents for monotherapies or combination therapies with other compounds are currently ongoing or recruiting.