m天主教聖馬爾定醫院

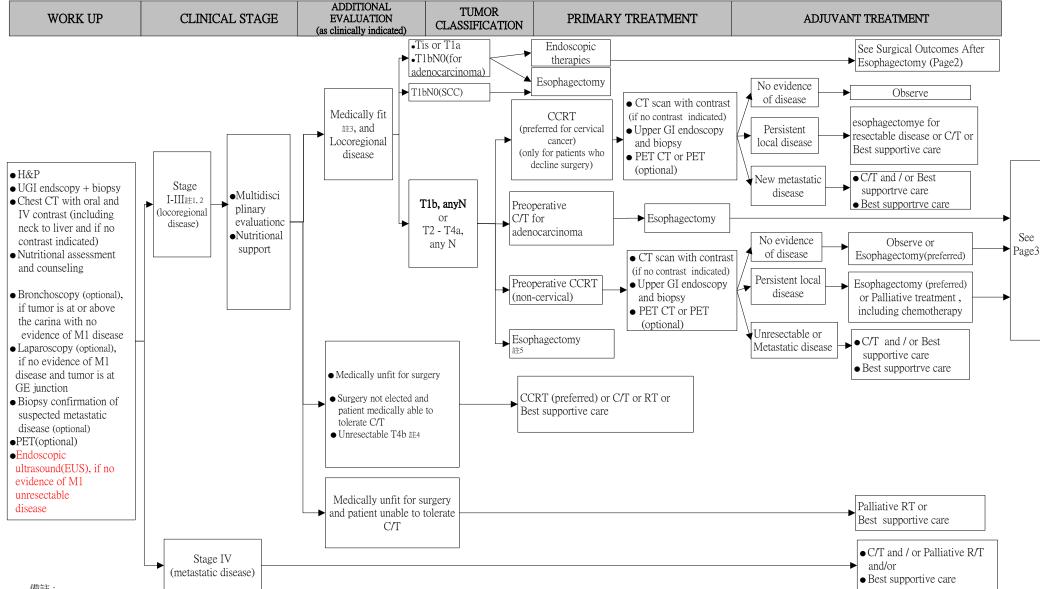
食道癌診療指引

食道癌多專科團隊擬定

97.05 初定113.07 修訂



初版日期:97.05 最後更新日:113.07



侑註:

註1.Celiac nodal involvement in cancers of the esophagogastric junction may still be considered for combined modality therapy.

註2.Resectable T4: Involvement of Pericardium, pleura or diaphragm. T1-3 tumors are resectable even with regional nodal metastases (N+).

註3.Medically able to tolerate major abdominal and/or thoracic surgery.

註4.Unresectable Stage IVA: involvement of the heart, great vessels, trachea or adjacent organs including liver, pancreas, lung, and spleen are unresectable. 註5.SCC:non-cervical esophagus, T1b-T2, low risk lesion, Length<3cm, well differentiated.

NCCN V1.2024 — March 07, 2024 Esophageal and Esophagogastric junction Cancers

參考資料來源:

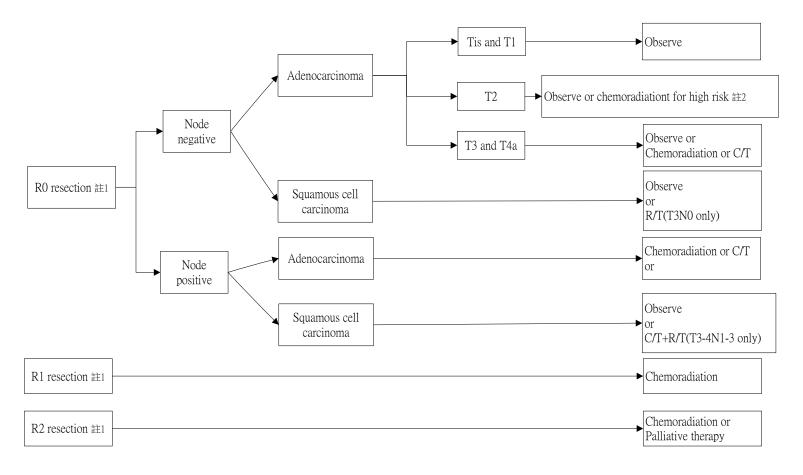


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SURGICAL OUTCOMES AFTER ESOPHAGECTOMY / CLINICAL PATHOLOGIC FINDINGS (Patients Have Not Received Preoperative Chemoradiation or Chemotherapy)

TUMOR CLASSIFICATION

POSTOPERATIVE TREATMENT



借註・

註1.R0= No cancer at resection margins, R1= Microscopic residual cancer, R2= Macroscopic residual cancer or M1B. 註2. Consider chemoradiation for patients with high risk lower esophagus or EGJ adenocarcinoma. High risk features include poorly differentiated or higher grade cancer, lymphovascular invasion, perineural invasion, or < 50 y/o.

參考資料來源: NCCN V1.2024 — March 07, 2024 Esophageal and Esophagogastric junction Cancers



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SURGICAL OUTCOMES AFTER ESOPHAGECTOMY / CLINICAL **TUMOR** PATHOLOGIC FINDINGS POSTOPERATIVE TREATMENT CLASSIFICATION (Patients Received Preoperative Chemoradiation or Chemotherapy) Adenocarcinoma ► C/T(Preferred) or Observe (ypT0N0)Node negative Squamous cell Carcinoma **▶** Observe (VpT0N0) R0 resection 註1 C/T(Preferred) Adenocarcinoma (ypT positive and/or N positive) Observe until P.D. Node positive Squamous cell Carcinoma **→**Observe (ypT positive and/or N positive) Observe or palliative therapy Squamous cell carcinoma R1 resection 註1 ► Chemoradiation註3 or Adenocarcinoma Observe until P.D. or Squamous cell Consider re-resection carcinoma R2 resection 註1 Chemoradiation註3 or Adenocarcinoma Palliative therapy

備註:

註1.R0= No cancer at resection margins, R1= Microscopic residual cancer, R2= Macroscopic residual cancer or M1B.

註3.Postoperative chemoradiation only if not received preoperatively.

er or MIB. 參考資料來源:

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FOLLOW-UP RECURRENCE PALLIATIVE/SALVAGE THERAPY Concurrent Chemoradiation (preferred) Local/regional only and / or Best supportive care • Chemotherapy and/or Best supportive care recurrence: Recurrence or Surgery Prior esophagectomy, • Best supportive care no prior chemoradiation or C/T • H&P If asymptomatic: H&P every 3-6 mo for 1-2 y, every 6-12mo for 3-5 y, then annually • Chemistry profile and CBC, Resectable and as clinically indicated Esophagectomy Recurrence Local/regional only medically operable • Imaging as clinically indicated recurrence: • Upper GI endoscopy and Chemotherapy and / or Prior chemoradiation, biopsy, as clinically indicated Best supportive care no prior esophagectomy • Dilatation for anastomotic Unresectable or stenosis Medically Nutritional counseling inoperable Chemotherapy and / or Metastatic disease Best supportive care