

Esophageal Surgery

Introduction

The Esophageal Surgery Division deals with neoplasms arising from the esophagus excluded cervical esophagus. The surgical management as well as its research for esophageal cancer has been a main clinical activity,. Especially surgery for it, transthoracic esophagectomy with 3-field lymphadenectomy became safe, reliable and radical. We are striving to improve surgical procedure not to happen the high incidence of mortality and morbidity followed by surgery. We study to define the role of surgery in the multimodality treatment.

Routine Activities

The Esophageal Surgery Division consists of two staff surgeons and one resident. The Esophageal Conference is held on every Tuesday evening to discuss the diagnosis, staging and treatment strategy for each patient in which surgeons, medical oncologists, endoscopists, radiologists, radiation oncologists and head & neck surgeons. One patient is operated on every week. Esophagectomy was performed for 46 patients in 2004. Transthoracic esophagectomy with extended lymph node dissection was performed for 36 non-treated cases before operation and modified transthoracic esophagectomy as salvage operation was done for 10 patients after the failure of other modalities. Recently esophagectomy for non-treated cases has been safe and reliable operation procedure , the operation -related mortality rate was 0% in 2004. But 2 patients were died after salvage operation.

Research Activities and Clinical trial

The prognosis for patients with intramural metastasis (IMM) or number of lymph node involvement more than 4 is very poor than without these factors. We study the role of pre- or post-operative chemotherapy with these patients. They receive two cycle of pre- or post- operative chemotherapy consisting of, 5- fluorouracil and cisplatin.

From the 2000, we started salvage operation for the patients after the failure of definitive chemoradiotherapy. The operative procedures and management after operation were refined gradually, and recently only venous superdrainage was add to the reconstruction after esophagectomy in the neck. We study the role and efficacy of salvage surgery in the multimodality treatment.

JCOG trials 9907 : A prospective randomized study comparing the efficacy of preoperative neoadjuvant chemotherapy with that of postoperative adjuvant chemotherapy is on going.

● H. Nishimura, H.Daiko ●

Number of Operations

p-Stage	I	6
	IIA	10
	IIB	3
	III	16
	IV	1
Salvage operation		13
Esophagectomy		10
Others		3

Number of non-treated cases

Histology		
	Squamous cell carcinoma	31
	Adenocarcinoma	3
	Others	2
Tumor location		
	Upper thoracic	2
	Middle thoracic	16
	Lower Thoracic	18
Operative procedure		
	Right thoracotomy	34
	Left thoracotomy	2