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Summary

CLINICAL SIGNIFICANCE OF EGFR, ERBB2-4 AND PHOSPHORYLATED EGFR IN SMALL BOWEL ADENOCARCINOMA

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Study of small bowel adenocarcinoma found EGFR family expression correlates with advanced disease and poor prognosis, suggesting potential for anti-EGFR therapy in KRAS wild-type cases.

KEY POINTS

- EGFR expression (34% of cases) correlated with lymph node metastasis, distant metastasis, advancing stage, and worse cancer-specific survival on both univariate and multivariate analysis.
- Phosphorylated EGFR (22% of cases) was observed exclusively in stage IV disease and correlated with worse survival.
- Among stage IV cases examined, 5 out of 7 were KRAS wild type and all 5 expressed EGFR, suggesting these patients may be candidates for EGFR inhibitor therapy.
- The most common genomic alterations were TP53 (56.7%), KRAS (33.3%), APC (16.7%), and PIK3CA (16.7%), with deficient MMR observed in 12% of patients.
- No association was found between EGFR family expression and MMR status or individual gene mutations, highlighting the need for SBA-specific treatment strategies distinct from colorectal cancer.

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