THE INCIDENCE OF LYMPH NODE METASTASIS AND RECURRENCE IN PEDUNCULATED PT1 COLORECTAL CANCER BASED ON HEAD OR STALK INVASION ACCORDING TO HAGGITT LEVEL 2

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Retrospective study of 66 pedunculated pT1 colorectal cancers found synchronous lymph node metastasis and recurrence in both head invasion and stalk invasion groups, with no significant difference between groups.

KEY POINTS

- Synchronous lymph node metastasis occurred in 5.0% of head invasion lesions (2/40) and 3.8% of stalk invasion lesions (1/26), with no significant difference between groups (P = 1).
- Recurrence occurred in 2.5% of head invasion cases (1/40) and 3.8% of stalk invasion cases (1/26), both as distant metastasis, with no significant difference (P = 1).
- Among patients without lymphovascular involvement, poorly differentiated components, or tumor budding, no lymph node metastasis occurred in either group, but recurrence was observed in 3.1% of head invasion cases (1/32) and 6.3% of stalk invasion cases (1/16).
- One patient with head invasion and no adverse histologic features developed multiple liver metastases one year after endoscopic resection and died of colon cancer one and a half years after recurrence despite chemotherapy.
- The authors conclude that head invasion was not completely lymph node metastasis or recurrence-free, contrary to previous reports, and that endoscopic resection alone cannot be considered curative.

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