UTILITY OF CONTRAST-ENHANCED HARMONIC ENDOSCOPIC ULTRASONOGRAPHY FOR PREDICTION OF PATHOLOGICAL RESPONSE AFTER NEOADJUVANT CHEMOTHERAPY IN PATIENTS WITH PANCREATIC CANCER

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A study evaluated whether contrast-enhanced harmonic endoscopic ultrasonography can predict pathological response to neoadjuvant chemotherapy in pancreatic cancer patients undergoing surgical resection.

KEY POINTS

- Early-phase CH-EUS classified 94 patients into rich vascularity (n=44) or poor vascularity (n=50) groups, with significantly more patients showing good pathological response (>50% tumor cell destruction) in the rich vascularity group (19 versus 4, P=0.0015).
- Multivariate analysis identified rich vascularity on early-phase CH-EUS as the strongest independent factor associated with chemosensitivity (P=0.006, HR=5.66, 95% CI: 1.17–19.27).
- In resectable patients specifically, the enhancement pattern was the only independent factor associated with chemosensitivity (P=0.003, HR=14.59, 95% CI: 1.38–154.38).
- Late-phase CH-EUS did not show significant differences between vascular groups in predicting treatment response.
- The authors conclude that vascular pattern evaluation on CH-EUS could be useful for predicting NAC efficacy and determining NAC indications in resectable pancreatic cancer.

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