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Summary

Colorectal cancer metastasis: What did we learn from TransMet?

UEG Week Barcelona 2026 | Presentation

Surgery | Hepatobiliary | Digestive Oncology | Colorectal

October 19, 2026

Liver transplantation for permanently unresectable colorectal liver metastases shows striking survival benefit in highly selected patients, with the TRANSMET trial reporting 73% survival in protocol-selected patients versus 9.3% with chemotherapy alone, though patient selection remains the critical determinant of success.

KEY POINTS

- The speaker reported that the TRANSMET study randomised 94 patients across 20 centres in 3 European countries to chemotherapy plus liver transplantation versus chemotherapy alone, with intention-to-treat survival of 56% and protocol survival of 73% versus 9.3% in carefully selected patients.
- Selection criteria the speaker emphasized include no BRAF mutation, no nodal disease, negative PET scan, less than 3 prior chemotherapy lines, and metabolic response on PET, with progressive disease being a contraindication.
- The speaker stated that only 1 to 3% of patients with colorectal metastases qualify for transplantation, requiring dedicated intersectional work and a grey zone remains between technically resectable disease that should be resected versus transplanted.
- Tumour recurrence is common after transplantation, particularly in the lung, but the speaker characterized this as transforming the disease into a chronic but more liveable condition with better quality of life than ongoing chemotherapy.
- The speaker's centre uses exclusively live donors for this indication, which the speaker described as perfect for transplant oncology because it allows optimal timing and flexibility, though the speaker acknowledged this approach requires expertise and may not be realistic for smaller centres.

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