HIGH AMOUNTS OF STROMAL COLLAGEN IN PANCREATIC CANCER CORRELATE WITH FAVORABLE PROGNOSIS, ENHANCED CHEMOTHERAPEUTIC RESPONSES, AND DISTINCTIVE GENE EXPRESSION PROFILES

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In resected pancreatic ductal adenocarcinoma, lower tumor stromal collagen levels are associated with worse tumor differentiation, CDKN2A/p16 alteration, shorter overall survival, poorer chemotherapy response, and reduced immune cell infiltration.

KEY POINTS

- Among 169 resected PDAC patients, low stromal collagen was an independent poor prognostic factor with median overall survival of 22.1 months versus 38.0 months for high collagen (P=0.001).
- Multivariate analysis linked low stromal collagen to poor differentiation (P=0.008) and CDKN2A/p16 alteration (P=0.03).
- Low stromal collagen associated with worse prognosis in both S-1 (P=0.005) and gemcitabine (P=0.007) chemotherapy groups.
- Low stromal collagen correlated with reduced CD4+ TILs (P=0.046), CD8+ TILs (P=0.09), and tertiary lymphoid structures (P=0.001).
- Spatial transcriptome analysis revealed that high collagen tumors expressed genes activating the TGFβ pathway; this work may inform understanding of fibrosis mechanisms in pancreatic cancer.

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