



## Letter

# The Changing Face of Chemoradiotherapy Practice for Oesophageal Cancer: Responses to a UK-wide Questionnaire



*Madam* — Oesophageal cancer is the seventh most common cause of cancer death in the UK. For patients with operable disease, neoadjuvant chemotherapy has long been considered standard of care, whereas in inoperable patients, definitive chemoradiotherapy (dCRT) with cisplatin/fluoropyrimidine (CF) is favoured. The CROSS trial showed excellent outcomes with weekly carboplatin/paclitaxel (wCP) neoadjuvant chemoradiotherapy (nCRT), particularly in squamous cell carcinoma (SCC) [1]. Retrospective studies report comparable efficacy of wCP dCRT with lower grade 3–4 toxicity to CF [2] and forms the standard arm of the ARTDECO study [3]. There are no randomised studies comparing CF versus wCP-based dCRT, although SCOPE2 is randomising day 14 positron emission tomography (PET) non-responders between wCP versus CF dCRT. Given these shifting trends, we conducted a national questionnaire to evaluate current UK practice.

The questionnaire was circulated in November 2017 and 34 upper gastrointestinal oncologists responded. The average number of patients treated with dCRT per year varied (median  $n = 6$ ; range 2–15) with an even split between adenocarcinoma and SCC pathology. In adenocarcinoma, indications for dCRT were inoperability due to medical comorbidities (67%) or advanced tumour (30%). In SCC, treatment was more complex. Seventeen reported no single standard of care and both nCRT and dCRT were presented as viable options, six offered nCRT and six offered dCRT as standard, whereas only one respondent offered preoperative chemotherapy as their standard neoadjuvant approach. Only two centres had joint oncology-surgical clinics to discuss options.

In those treated with dCRT, irrespective of histology, 88% continued to use CF as preferred chemotherapy, whereas

12% favoured wCP as first-line therapy. In patients deemed unsuitable for CF, 45% of clinicians favoured wCP over alternative regimens. Fifty per cent of clinicians felt that wCP had equivalent efficacy and more manageable toxicity compared with CF.

In conclusion, there is increasing uptake of wCP dCRT in the UK, although CF remains the dominant regimen. Interestingly, preoperative chemotherapy, which was standard of care in the UK for SCC, is being less frequently used, whereas the use of nCRT has increased.

## Conflict of interest

The authors declare no conflict of interest.

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## References

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