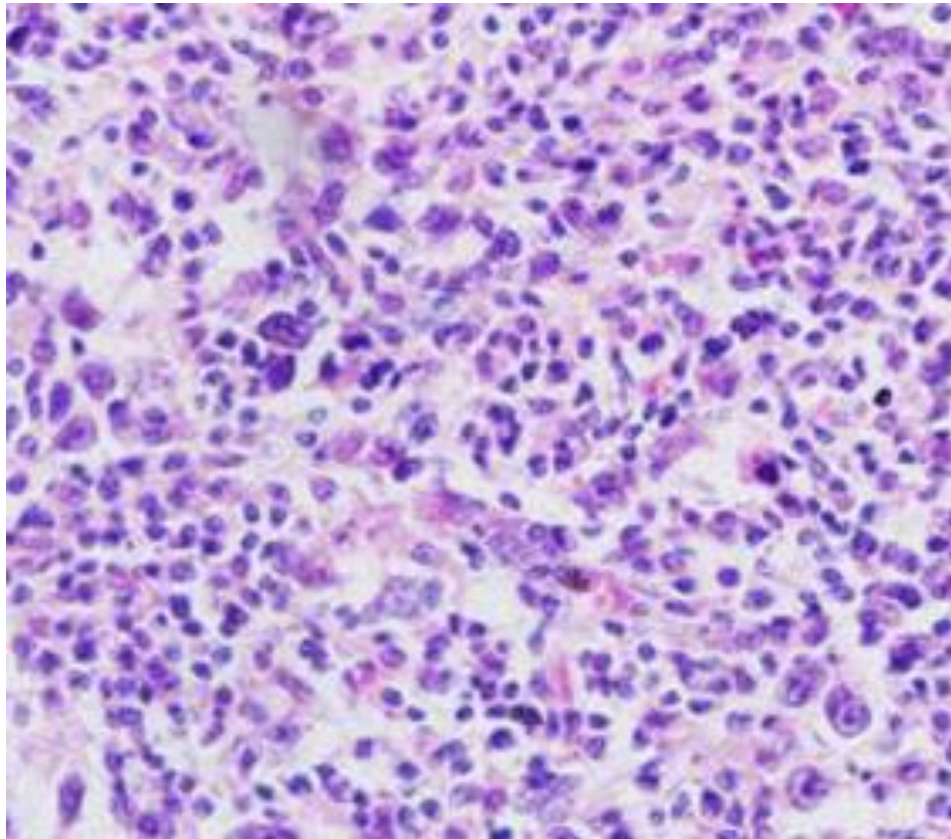


Small cell oesophageal cancer

– a single centre experience



D Perren, R Jones, SM Griffin

Small cell cancer

- Aggressive solid organ malignancy arising from primitive neuroendocrine cells
- ~15% of lung cancers
- 1-2.5% of oesophageal cancers
 - Small series from large centres

Massachusetts General	Huncharek et al	n=13	1995
Cardiff	Hudson et al	n=16	2007
Memorial Sloan-Kettering	Ku et al	n=25	2008
Beijing	Tao et al	n=39	2015

Small cell lung cancer

- Staging (Zelen, 1973)
 - Limited (LD) - within a tolerable radiotherapy field
 - Extensive (ED)
- Treatment (NICE CG 121, 2012)
 - LD
 - 4-6 cycles platinum-based combination chemotherapy and radiotherapy
 - ED
 - platinum-based chemotherapy
 - radiotherapy if complete response at distant sites and good partial response in chest

Aims

- To review our experience of oesophageal small cell cancer within a high-volume MDT

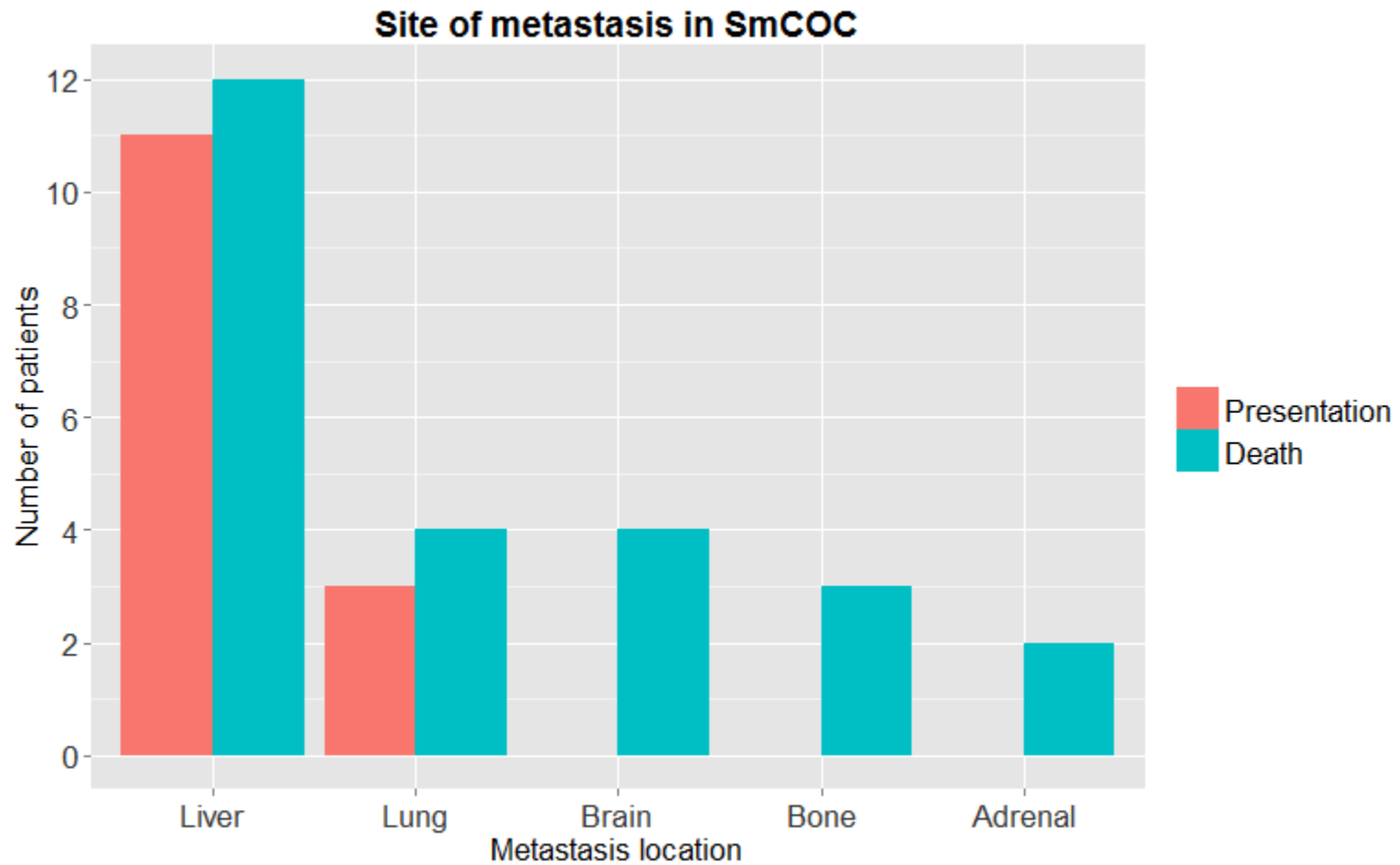
Methods

- All prospective cases of oesophageal small cell cancer identified from 1993-2014
- LD and ED staging definitions adopted from lung cancer literature
- Cases identified using departmental and regional (NYCRIS) databases
- Cases of dual histopathology included

Results

- **43** cases of oesophageal small cell carcinoma
- **21** male, **22** female; median age at presentation 69.0 years
- **70%** smokers
- Metastases at presentation in **43.9%**
- Account for **0.65%** of all oesophageal cancers

Metastasis

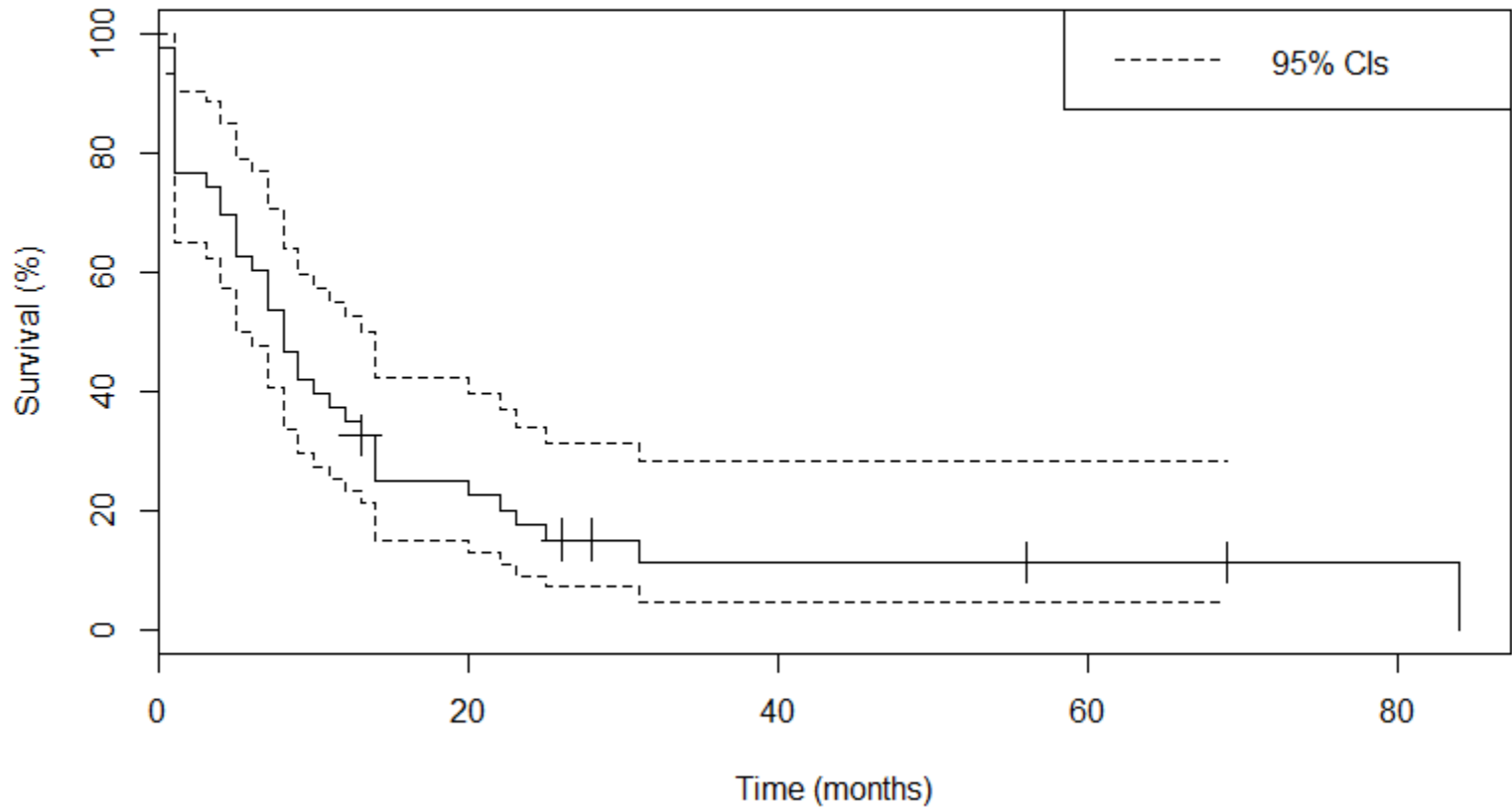


Treatment received

Treatment	n	Median survival
Chemotherapy + radiotherapy	16	13.5 months
Chemotherapy alone	6	6.5 months
Radical radiotherapy	2	14 months
Oesophagectomy	3	12 months
Best supportive care	13	1 month

Survival

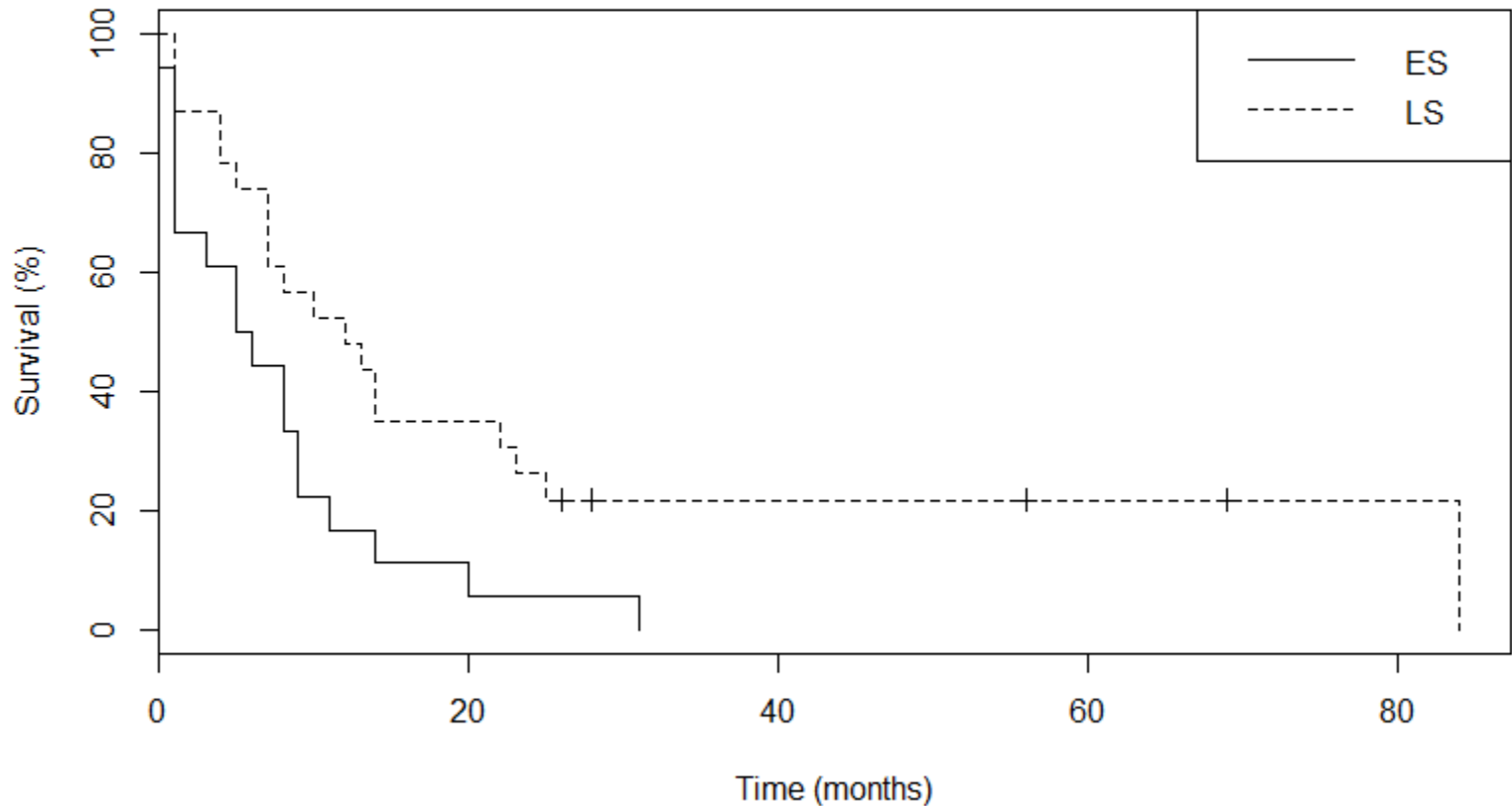
Survival from presentation with SmCOC



Median survival: **8 months**

Survival by stage

Survival from presentation with SmCOC by ES and LS

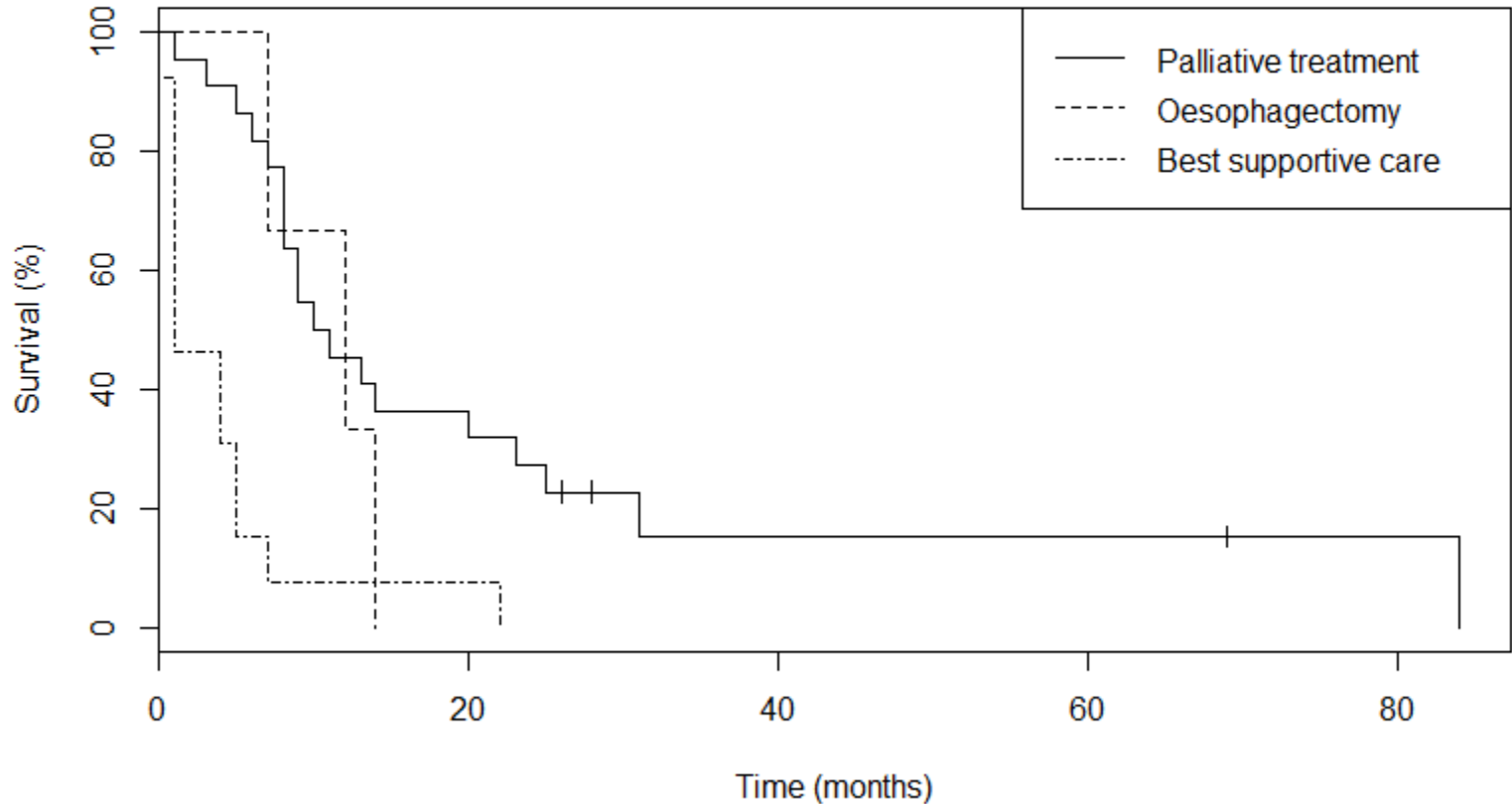


Median survival: **5.5 months ES, 12 months LS**

Difference in survival statistically significant: $p=0.014$

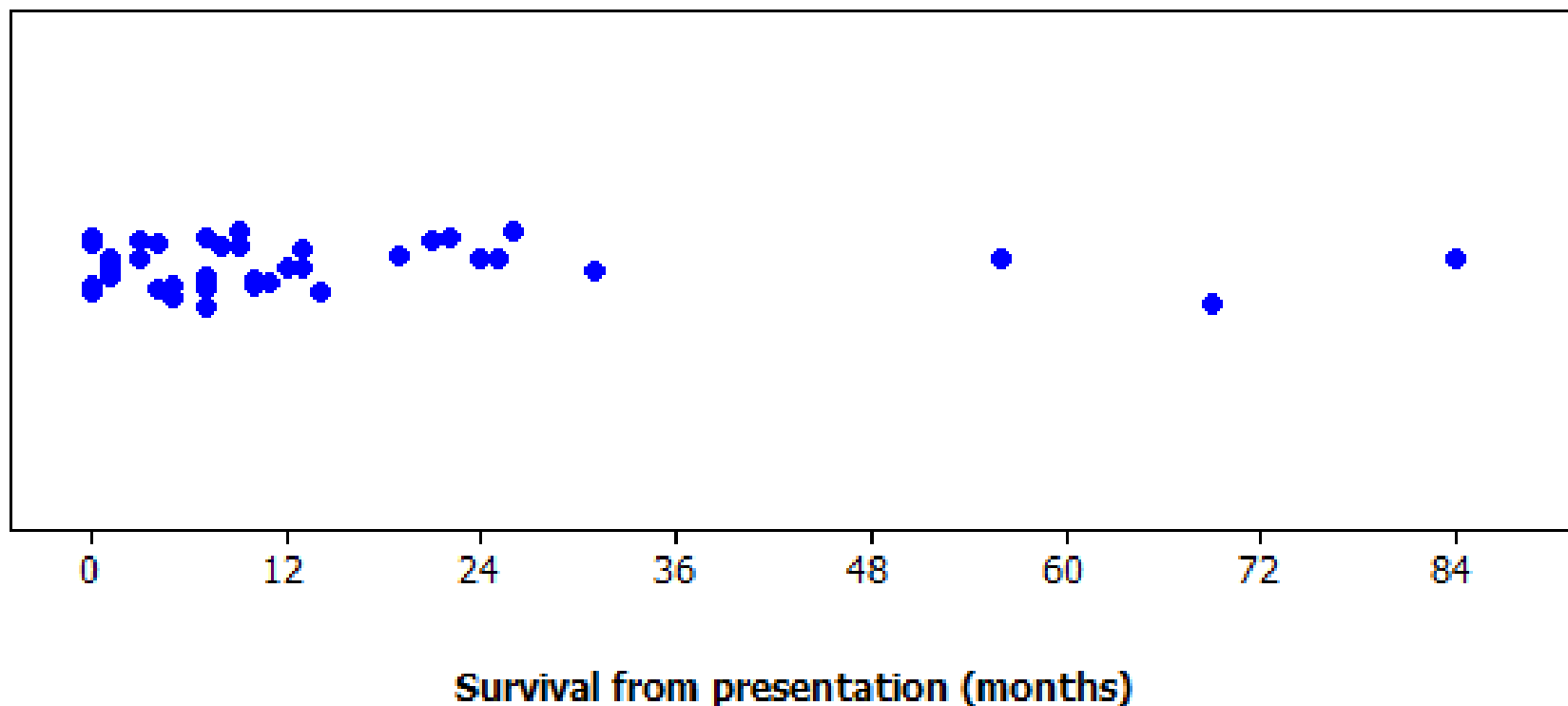
Survival by treatment

Survival from presentation with SmCOC by broad treatment modality



Difference in survival statistically significant: $p < 0.001$

Survival – individual value plot



Case studies

Three patients have survived longer than 3 years. None had metastasis at presentation.

1. Treated with palliative chemotherapy with excellent response. Consolidation radiotherapy. Died disease free, of unrelated causes after 84 months.
2. Treated with palliative chemotherapy and consolidation radiotherapy. Following recurrence re-challenged with epirubicin, oxaliplatin, capecitabine. Still alive and disease free at 69 months.
3. Palliative chemotherapy. Excellent response, so given radical radiotherapy and prophylactic whole cranial irradiation. Alive and disease free at 56 months.

Summary

- Largest single institution series of oesophageal small cell cancer
- No evidence of a role for resection
- With chemoradiotherapy, a small minority will survive for 2-3 years

