

Hepatic Resection for Colorectal Metastases to the Liver: The National Cancer Centre/Singapore General Hospital Experience

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Abstract

Objective: To review and evaluate trends for short and long-term outcomes of patients who have undergone liver resection for colorectal metastases in a single institution over a period of 7 years. **Materials and Methods:** A retrospective review and analysis of clinicopathologic data and outcome of potentially curative liver resection for colorectal metastases in a series of 96 patients from January 1994 to December 2001 was done. Data were statistically analysed. Perioperative mortality, morbidity, overall survival and disease-free survival rates were reported. **Results:** A total of 96 patients underwent potentially curative liver resection for colorectal metastases. There were 64 males (66.7%) and 32 females (33.3%) with a median age of 60 years. There was no perioperative mortality. Postoperative morbidity was 7.2%. The median length of follow-up for the entire cohort of post hepatic resection was 29 months with 1-year and 3-year overall survival rates of 99% and 71%, respectively. The disease-free survival rates were 76% and 48%, respectively. Minor resections for the liver metastases showed significantly better overall survival. Primary tumour in the colon compared to rectum, disease-free interval (DFI) <12 months and adjuvant chemotherapy showed a trend towards shorter overall survival. Carcinoembryonic antigen (CEA) levels greater than 100 ng/mL significantly shortens the disease-free survival. **Conclusion:** Liver resection for colorectal metastases in our institution is a safe and effective treatment option in properly selected patients, which currently represents the best chance for long-term survival and possibly "cure".

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