

Accepted Manuscript

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PII: S1556-0864(17)32771-5

DOI: [10.1016/j.jtho.2017.09.1966](https://doi.org/10.1016/j.jtho.2017.09.1966)

Reference: JTHO 751

To appear in: *Journal of Thoracic Oncology*

Received Date: 5 June 2017

Revised Date: 19 September 2017

Accepted Date: 21 September 2017

Please cite this article as: Xu L, Li Y, Liu X, Sun H, Zhang R, Zhang J, Zheng Y, Wang Z, Liu S, Chen X, Treatment Strategies and Prognostic Factors of Limited-Stage Primary Small Cell Carcinoma of the Esophagus, *Journal of Thoracic Oncology* (2017), doi: 10.1016/j.jtho.2017.09.1966.

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The authors declare that they have no conflicts of interest.

ABSTRACT

Introduction. Primary small cell carcinoma of the esophagus (PSCCE) is characterized by high malignancy, early metastasis and poor prognosis. This retrospective study aimed to review the clinical characteristics of patients with limited-stage PSCCE and determine the relevant prognostic factors and optimal treatment strategies. **Methods.** We retrospectively evaluated 152 consecutive patients with limited-stage PSCCE between January 2007 and December 2015. Prognostic factors were analyzed using univariate analysis and a Cox regression model. Subgroup analysis was applied to evaluate the effect of treatment strategy on survival. **Results.** Univariate and multivariate analyses showed that treatment modality ($P=0.034$) and N stage ($P=0.002$) were independent prognostic factors. Stage I/IIA patients who underwent surgery alone exhibited better survival than those who did not undergo surgery (median survival time [MST]: 29 vs. 17.4 months, $P=0.031$), and postoperative adjuvant therapy did not increase overall survival (OS) and disease-free survival (DFS) ($P>0.05$). The OS rate of stage III patients who underwent neoadjuvant chemotherapy (nCT) was significantly better than that of patients who underwent surgery alone or did not undergo surgery ($P=0.021$ and $P=0.026$, respectively); additionally, nCT could increase DFS ($P=0.031$). **Conclusions.** Treatment modalities and N stage are independent prognostic factors. Radical esophagectomy should be considered as the primary treatment for stage I/IIA PSCCE, and nCT followed by esophagectomy could be an effective treatment option for stage III PSCCE. Multicenter randomized studies are required to confirm the role of neoadjuvant chemotherapy in the management of limited-stage PSCCE.

Keywords: Primary small cell carcinoma of the esophagus; limited-stage; prognostic factors; treatment

INTRODUCTION

Esophageal carcinoma is one of the fastest growing tumor types worldwide, and it is estimated to be the third most common cancer in

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