

P116

Prognostic Value of Adjuvant Chemotherapy Following Pancreaticoduodenectomy in Elderly Patients With Pancreatic Cancer

Yejong PARK¹, Sang Hyun SHIN², Dae Wook HWANG¹, Ki Byung SONG¹, Jae Hoon LEE¹, Jaewoo KWON¹, Changhoon YOO³, Shadi ALSHAMMARY⁴, Song Cheol KIM*¹

¹*Division of Hepato-Biliary and Pancreatic Surgery, Department of Surgery, University of Ulsan college of Medicine and Asan Medical Center, Korea*

²*Department of Surgery, Samsung Medical Center, Sungkyunkwan University School of Medicine, Korea*

³*Department of Oncology, University of Ulsan college of Medicine and Asan Medical Center, Korea*

⁴*Department of Surgery, College of Medicine, Imam Abdulrahman Bin Faisal University, Saudi Arabia*

Introduction : The aim of this study was to investigate the relationship between age and long-term survival among patients who underwent pancreaticoduodenectomy (PD) for pancreatic ductal adenocarcinoma (PDAC).

Methods : A total of 916 patients who underwent PD for curative resection of PDAC were included in this study. Patients were divided into younger (n=726, <70 years) and older (n=190, ≥70 years), and the overall survival (OS) between the two groups was compared.

Results : Median OS was significantly longer in the younger group (p<0.001). However, the survival advantage among younger patients was not significant when analyzing only the patients who received adjuvant chemotherapy (p=0.548). Among patients who did not receive adjuvant chemotherapy, OS was significantly longer in the younger group (p=0.003). Among patients who received neither adjuvant chemotherapy nor treatment for recurrence, survival was not significantly different between the groups (p=0.629).

Conclusions : Adjuvant chemotherapy should be recommended, and additional treatment for recurrence is effective even among elderly who have not received adjuvant chemotherapy.

Corresponding Author. : **Song Cheol KIM** (drksc@amc.seoul.kr)