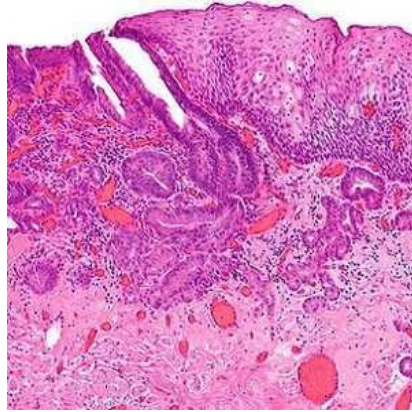




Oesophageal Cancer: PET Does Not Improve Treatment



Positron emission tomography (PET) is increasingly being used to assess the effectiveness of chemo- or radiotherapy in patients with cancer of the oesophagus. Now researchers say that no robust evidence exists to show that PET improves the treatment for these patients. Their finding is reported in the journal *Deutsches Ärzteblatt International*.

Cancer patients are often given chemo- or radiotherapy, with the aim of shrinking the tumour before it is surgically removed. PET is an imaging technique that makes a tumour in the oesophagus visible without the need for the patient to undergo an invasive examination. Especially during treatment cycles in which the tumour is supposed to shrink, it makes sense to check the tumour's response to the treatment. To date, however, no benefit for patients has ensued, according to Milly Schröer-Günther, MD, Institute for Quality and Efficiency in Healthcare (IQWiG), Cologne, Germany, and co-authors.

Dr. Schröer-Günther and colleagues conducted a systematic review of all available data to assess the benefit for patients of using PET to assess the response of oesophageal cancer to chemo- or radiotherapy. They searched the Medline, Embase, and Cochrane Library databases for randomised controlled trials (RCTs) and controlled clinical trials (CCTs) comparing PET with conventional techniques such as endosonography and computed tomography (CT). They did not find any RCTs or CCTs that addressed the question of the patient-relevant benefit of PET.

According to the researchers, the studies they have analysed have often investigated only a small number of patients or that their results are biased. Nevertheless, they say, PET carried out early on in treatment does have the potential to identify patients who will not respond to that treatment, and these patients could then be spared continuing treatment with its associated side effects. To reach this point, however, will require randomised controlled trials.

Source: [Deutsches Ärzteblatt International](#)

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