

Title:

From utopia to reality: increased survival in peritoneal carcinomatosis treated with cytoreduction and hyperthermic intraperitoneal chemotherapy

Authors:

Juan José Segura-Sampedro, Rafael Morales-Soriano

DOI: 10.17235/reed.2017.5179/2017

Link: [PubMed \(Epub ahead of print\)](#)

Please cite this article as:

Segura-Sampedro Juan José, Morales-Soriano Rafael. From utopia to reality: increased survival in peritoneal carcinomatosis treated with cytoreduction and hyperthermic intraperitoneal chemotherapy. Rev Esp Enferm Dig 2017. doi: 10.17235/reed.2017.5179/2017.

ENERO 2017 • Volumen 109 • Número 1 • Páginas 1-86

CODE: REED09 ISSN: 1009-0108

Revista Española de Enfermedades Digestivas
THE SPANISH JOURNAL OF GASTROENTEROLOGY

Acceso al texto completo en: www.reed.es o www.sped.es

Factor de Impacto 100 (IIF): JCR: 1.455 (2016) SCR: 0.34 (2016)

ORGANO OFICIAL DE:
SOCIEDAD ESPAÑOLA DE PATOLOGÍA DIGESTIVA, SOCIEDAD ESPAÑOLA DE ENDOSCOPIA DIGESTIVA Y ASOCIACIÓN ESPAÑOLA DE ECOGRAFÍA DIGESTIVA

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CE 5179 inglés

From utopia to reality: increased survival in peritoneal carcinomatosis treated with cytoreduction and HIPEC

Juan José Segura-Sampedro and Rafael Morales-Soriano

Peritoneal Oncologic Surgery Unit. Digestive Surgery Department. Hospital Universitario Son Espases. Palma de Mallorca, Spain. Malignant Peritoneal Disease Research Group. Health Research Institute of Balearic Islands (IdISBa). Palma de Mallorca, Spain

Correspondence: Juan José Segura Sampedro

e-mail: segusamjj@gmail.com

Dear Editor,

We have read with great interest the article by Illán et al. (1) entitled “*Long survival in a patient with metastatic colorectal carcinoma: reality or utopia?*”. This article describes the case of a 42-year-old patient with mucinous-type colon adenocarcinoma who had tumor recurrence with peritoneal metastases 18 months after resection of the primary tumor and adjuvant chemotherapy. The patient underwent multiple metastasectomies and several lines of chemotherapy, and died 27 months after the recurrence.

As described by the authors, survival reaches an average of 24 months after treatment with the latest cytostatics and molecular targets (2) in colon cancer patients with systemic disease. The treatment of peritoneal carcinomatosis has changed substantially during recent years. The application of radical peritoneal cytoreductive surgery in combination with hyperthermic intraperitoneal chemotherapy (HIPEC) has transformed this almost terminal disease into a salvageable disease in a quarter of patients. There are randomized and multi-center studies which have demonstrated the lower response rate of peritoneal metastases to systemic chemotherapy (3). Thanks to cytoreduction and HIPEC therapies, a survival rate that ranges between 30.1 months

(4) and 62.7 months (5) is now achieved. Nowadays, these patients can benefit from treatment by multidisciplinary units that allow the combination of surgical cytoreduction and HIPEC with systemic chemotherapy. This type of management offers the best survival rate and is the treatment of choice in selected patients (2).

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