Reply to 'Pancreatic Metastasis from Colon Carcinoma Treated with Radiotherapy with Palliative Benefit'

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Dear Sir,

I would like to thank Drs. Saif and Kaley for their comments [1] and interest shown in my article on pancreatic metastasis from colon carcinoma [2]. I note with interest the alternate nonsurgical approach in the management of their patient with pancreatic metastasis from colorectal cancer. As the surgical resection of the pancreatic metastasis invariably plays only a palliative role with cure being exceptional, the burning question often is whether a more conservative approach, such as chemotherapy and radiotherapy, would offer the same benefit of palliation as pancreatic resection but with lesser morbidity. Unfortunately, the rarity of the condition and the absence of knowledge regarding the

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natural history of this condition make it impossible to compare the survival rate of resected and unresected patients treated with chemotherapy and radiotherapy. What is of interest is that their patient achieved a relatively symptom-free period of two years, being managed with chemotherapy and radiotherapy, exceeding the mean survival rate of 16 months post-resection of pancreatic metastasis from colorectal cancer. This article, to a certain extent, supports the possible role of chemotherapy and radiotherapy in achieving palliation in these otherwise unfortunate patients.

Conflict of interest The authors have no potential conflict of interest

References

- 1. Saif MW, Kaley K. Pancreatic metastasis from colon carcinoma treated with radiotherapy with palliative benefit. JOP. J Pancreas (Online) 2010; 11:644-5.
- 2. Machado NO, Chopra PJ, Al Hamdani A. Pancreatic metastasis from colon carcinoma nine years after a hemicolectomy managed by distal pancreatectomy. A review of the literature regarding the role and outcome of pancreatic resection for colorectal metastasis. JOP. J Pancreas (Online) 2010; 11:377-81. [PMID 20601814]