Reply to 'Is Liver Resection in Metastases of Exocrine Pancreatic Carcinoma Justified?'

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Dear Sir,

We thank Dr. Saif for showing interest in our article [1]. Our aim was only to present our limited experience with synchronous resections in a selected group of patients. We agree with Dr. Saif that this should be performed in a high volume center and only a small number of patients are candidates for these procedures. We used gemcitabine-based adjuvant therapy in patients who received this procedure: all the patients in the synchronous selected group and 134 (60.1%) of the other 223 patients.

In this study, three patients with pancreatic head cancer underwent synchronous resection of a liver metastasis

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along with the primary tumors. On follow-up, two developed local recurrences and only one had systemic disease in the form of liver metastases. This indicates the probable locally aggressive nature of the disease rather than a distant metastasis.

There is some evidence available for the use of neoadjuvant treatment for locally unresectable tumors detected on preoperative imaging [2], but its role in resectable pancreatic cancers [3] and in patients with metastatic disease in an otherwise resectable cancer needs to be investigated in future studies.

Conflict of interest The authors have no potential conflict of interest

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