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ASO Visual Abstract

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ASO Visual Abstract: Intersurgeon Variability in Local Treatment Planning for Patients with Initially Unresectable Colorectal Cancer Liver Metastases—Analysis of the Liver Expert Panel of the Dutch Colorectal Cancer Group

Marinde J. G. Bond, MD¹, Babette I. Kuiper, MD^{2,3}, Karen Bolhuis, MD, PhD^{4,5}, Aysun Komurcu, MSc⁶, Martinus J. van Amerongen, MD, PhD⁷, Thierry Chapelle, MD, PhD⁸, Cornelis H. C. Dejong, MD, PhD^{9,10}, Marc R. W. Engelbrecht, MD, PhD¹¹, Michael F. Gerhards, MD, PhD¹², Dirk J. Grünhagen, MD, PhD¹³, Thomas van Gulik, MD, PhD², John J. Hermans, MD, PhD¹⁴, Koert P. de Jong, MD, PhD¹⁵, Joost M. Klaase, MD, PhD¹⁵, Niels F. M. Kok, MD, PhD¹⁶, Wouter K. G. Leclercq, MD, PhD¹⁷, Mike S. L. Liem, MD, PhD¹⁸, Krijn P. van Lienden, MD, PhD¹⁹, I. Quintus Molenaar, MD, PhD²⁰, Ulf P. Neumann, MD, PhD⁹, Gijs A. Patijn, MD, PhD²¹, Arjen M. Rijken, MD, PhD²², Theo M. Ruers, MD, PhD¹⁶, Cornelis Verhoef, MD, PhD¹³, Johannes H. W. de Wilt, MD, PhD²³, Geert Kazemier, MD, PhD^{2,3}, Anne M. May, PhD¹, Cornelis J. A. Punt, MD, PhD^{1,4}, and Rutger-Jan Swijnenburg, MD, PhD^{2,3}

¹Department of Epidemiology, Julius Centre for Health Sciences and Primary Care, University Medical Centre Utrecht, Utrecht University, Utrecht, The Netherlands; ²Department of Surgery, Amsterdam UMC, University of Amsterdam and Vrije Universiteit Amsterdam, Amsterdam, The Netherlands; ³Cancer Center Amsterdam, Amsterdam, The Netherlands; ⁴Department of Medical Oncology, Amsterdam UMC, Cancer Centre Amsterdam, Amsterdam, The Netherlands; ⁵Department of Gastrointestinal Oncology, Netherlands Cancer Institute, Amsterdam, The Netherlands; ⁶The Netherlands Comprehensive Cancer Centre, Utrecht, The Netherlands; ⁷Department of Radiology, Sint Maartenskliniek, Nijmegen, The Netherlands; ⁸Department of Hepatobiliary, Transplantation, and Endocrine Surgery, Antwerp University Hospital, Antwerp, Belgium; ⁹Department of Surgery, Maastricht University Medical Centre, Maastricht, The Netherlands; ¹⁰Department of Surgery, Universitätsklinikum Aachen, Aachen, Germany; ¹¹Department of Radiology and Nuclear Medicine, Amsterdam UMC, Amsterdam, The Netherlands; ¹²Department of Surgery, OLVG Hospital, Amsterdam, The Netherlands; ¹³Department of Surgery, Erasmus MC Cancer Institute, Rotterdam, The Netherlands; ¹⁴Department of Radiology, Radboud University Medical Centre, Nijmegen, The Netherlands; ¹⁵Department of Hepatobiliary Surgery and Liver Transplantation, University Medical Centre Groningen, Groningen, The Netherlands; ¹⁶Department of Surgery, Netherlands Cancer Institute, Amsterdam, The Netherlands; ¹⁷Department of Surgery, Máxima Medical Centre, Veldhoven, The Netherlands; ¹⁸Department of Surgery, Medical Spectrum Twente, Enschede, The Netherlands; ¹⁹Department of Radiology, Sint Antonius Hospital, Nieuwegein, The Netherlands; ²⁰Department of Surgery, University Medical Centre Utrecht, Utrecht, The Netherlands; ²¹Department of Surgery, Isala hospital, Zwolle, The Netherlands; ²²Department of Surgery, Amphia Hospital, Breda, The Netherlands; ²³Department of Surgery, Radboud University Medical Centre, Nijmegen, The Netherlands

Deceased: Cornelis H. C. Dejong

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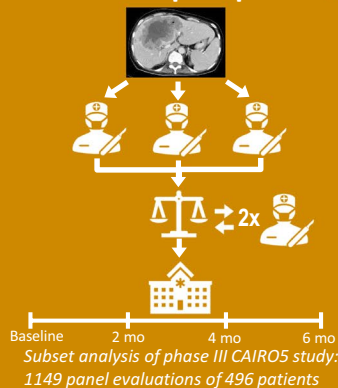
R.-J. Swijnenburg, MD, PhD
e-mail: r.j.swijnenburg@amsterdamumc.nl

Evaluation of a liver expert panel in the phase III randomized CAIRO5 study showed considerable variability among liver surgeons in prospective resectability assessments and local treatment planning for patients with initially unresectable colorectal liver metastases who received induction systemic therapy (<https://doi.org/10.1245/s10434-023-13510-7>).

Intersurgeon Variability in Local Treatment Planning for Initially Unresectable Colorectal Cancer Liver Metastases

No consensus on (un)resectability criteria

Liver expert panel ←



Resectability assessments

Per individual patient

Disagreement

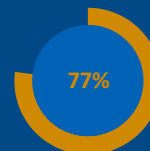
Minor 40% / major 10%
Baseline 36% vs follow-up 60%, $p < .001$

In general
(all evaluations per surgeon)

Ranges in votes per surgeon:

	Baseline	Follow-up
Resectable	0-12%	27-62%
Permanently unresectable	3-40%	6-47%

Local treatment planning



Different plans proposed by surgeons

Most pronounced differences:
 hemihepatectomy
 versus
 parenchymal-preserving approaches

Bond et al. *Ann Surg Oncol*.
 VisualAbstractfor @AnnSurgOncol

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