

**BP PP 1-6****Oncologic efficacy of the surgical treatment for oligometastasis of the pancreatic cancer after neoadjuvant chemotherapy**Yun Beom RYU, Woohyung LEE**Division of Hepatobiliary and Pancreatic Surgery, Department of Surgery, Asan Medical Center, Korea*

Introduction : The surgical treatment for liver metastasis of pancreatic ductal adenocarcinoma (PDAC) is considered as a contraindication. However, recent studies showed favorable oncologic outcomes in oligometastasis for PDAC after neoadjuvant chemotherapy (NACT). This study was aimed to investigate oncologic outcome of surgery for oligometastasis of PDAC after NACT compared with palliative surgery.

Methods : The patients (N=174) with BRPC and LAPC patients who underwent surgery after NACT were found between 2015 and 2019 in a tertiary referral center. The patients were divided into curative intent surgery (CU), oligometastectomy with pancreatic resection (OL), and palliative bypass surgery (PA), and we compared oncologic outcomes among three groups.

Results : CU, OL, PA groups were found in 160 (91.9%), 7 (4.0%), and 7 (4.0%) patients, respectively. Median follow up period was 13 months, and 3-year overall survival (OS) and recurrence free survival (RFS) were 36.2% and 25%, respectively. There were significant difference of the median OS among CU, OL, and PA groups (37.1 vs 20.9 vs 7.0 months, $p < 0.001$) and OL group showed longer median OS compared with PA group with marginal significance ($p = 0.067$). There were no significant difference of the median RFS between CU and OL groups (Median survival: 11.9 vs 7 months, $p = 0.237$).

Conclusions : OL group showed better OS compared with PA group although there were no statistical significance. Surgical treatment for oligometastasis of PDAC after sufficient NACT could be a considerable option of these disease entity, however, we need to analyze oncologic data for large patients.

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