

Surgery plus chemo better for treating relapsed ovarian cancer

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(HealthDay)—For women with recurrent ovarian cancer, overall survival

is longer with cytoreductive surgery followed by chemotherapy than with chemotherapy alone, according to a study published in the Dec. 2 issue of the *New England Journal of Medicine*.

Philipp Harter, M.D., Ph.D., from the Kliniken Essen-Mitte in Germany, and colleagues randomly assigned 407 patients with recurrent ovarian cancer who had a first relapse after a platinum-free interval of six months or more to either secondary cytoreductive [surgery](#) followed by platinum-based chemotherapy or platinum-based [chemotherapy](#) alone (206 and 201 patients, respectively). Eligible patients had a positive Arbeitsgemeinschaft Gynäkologische Onkologie (AGO) score, ascites of less than 500 mL, and complete [resection](#) at initial surgery.

The researchers found that 75.5 percent of the patients in the surgery group who underwent the procedure achieved a complete resection. Median overall survival was 53.7 and 46.0 months in the surgery and no-surgery groups, respectively (hazard ratio for death, 0.75). The most favorable outcome was seen for patients with a complete resection, with a [median overall survival](#) of 61.9 months. There was no difference observed between the groups in quality-of-life measures through one year of follow-up; no perioperative mortality was seen within 30 days after surgery.

"The results of the current trial showed a benefit of surgery with respect to progression-free and overall survival, with an acceptable incidence of complications, and without a [detrimental effect](#) on quality of life in patients selected for inclusion on the basis of the AGO score," the authors write.

The study was supported by GlaxoSmithKline and Medac.

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