

## St. Gallen EORTC Gastrointestinal Cancer Conference 2014



### 2<sup>nd</sup> St.Gallen EORTC Gastrointestinal Cancer Conference 2014

Primary Therapy of Early GI Cancer with International Treatment Consensus  
6–8 March 2014, St.Gallen/Switzerland



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conferences



## Opening Session

- Welcome on behalf of SONK (Florian Otto, Switzerland)
- Welcome on behalf of EORTC (Manfred Lutz, Germany)
- SPECTAcOLOR, a new major project of the EORTC GI group (Arnaud Roth, Switzerland)

[Navigation überspringen](#)

[Session 1: Understanding rectal cancer: Biological basis](#) [Epidemiology of colorectal cancer: Risk factors, genetic predisposition](#) [Anatomy of rectum: Surgeon's perspective](#) [Anatomy of rectum: Comment from the radiation oncologist](#) [Molecular differences between colon and rectal cancer](#)

[Session 2: Staging of rectal cancer – early cancer MRI, CT and endosonography: Do we need them all? Endoscopic resection: When is EMR/ESD sufficient? Transanal endoscopic microsurgery. Predicting lymph node metastases in T1 rectal cancer](#)

[Session 3: Surgical treatment of rectal cancer I What is “good quality” in rectal ca surgery: The pathologist’s perspective. Total mesorectal excision: Open, laparoscopic or robotic? Ultra-low resection vs wide perineal resection. Treatment of T4 rectal ca. do we always need an exenterative procedure?](#)

[Session 4: Combined modality therapy in rectal cancer Aims of combined modality therapy. Can neoadjuvant CT replace radioCT. Neoadjuvant radiotherapy \(5x5\) – immediate vs delayed surgery. Early and late toxicity of radiotherapy for rectal cancer – is there a difference between radioCT and 5x5 ?](#)

[Session 5: Surgical treatment of rectal cancer II Do T3 rectal cancers always need radiochemotherapy. Quality of life after surgery for rectal cancer . How to manage stenosing rectal cancer: Stoma and preoperative radiochemotherapy OR primary surgery](#)

[Session 6: Issues in combined modality treatment for rectal cancer Immediate surgery or clinical follow-up after complete response? What is the best chemotherapy “partner” for neoadjuvant radiochemotherapy. Is there a need for adjuvant chemotherapy after combined modality treatment?](#)

[Session 7: Rectal cancer with synchronous liver metastases Liver first approach in synchronous liver metastases from colorectal cancer. Limits of resectability and how to overcome them. Leave it all in? When to \(not\) resect the primary?](#)

[Session 8: Rectal cancer with synchronous liver metastases II Choice of drug therapy before \(and after\) liver resection. Surgery versus radiofrequency ablation \(Lessons from the CLOCC trial\). Recurrence patterns after resection of liver metastases. Do we really need perioperative CT for resectable liver metastases?](#)

[The 10th ESO colorectal cancer observatory Controversies in colorectal cancer screening. Progress in surgical oncology of colorectal cancer. Progress in radiation oncology. Adjuvant therapy. Treatment of metastatic cancer. The patient’s perspective](#)

[Keynote II: Effective combinations of targeted therapies for colon cancer based on insights in cross-talk between signaling pathways Keynote II: Effective combinations of targeted therapies for colon cancer based on insights in cross-talk between signaling pathways](#)

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