

## Colorectal Cancer Study Group: Dec. 2019

## Colorectal cancer therapeutic development map

	Standard treatment in Japan		Completed trials			Ongoing trials	
Subject*	Colon or upper rectum	Lower rectum	Colon or up	per rectum	Lower rectum	Colon or upper rectum	Lower rectum
Stage 0/I	EMR/ESD  Surgery (Open /Laparoscopy)	EMR/ESD  Surgery (Open /Laparoscopy)					JCOG1612 High-risk T1 after LE¹¹) Cape²¹ +radiotherapy 2019.1 ~ Recruiting
Stage II	Surgery (Conventional <sup>3)</sup> )	Surgery (TME <sup>4)</sup> +LLND <sup>5)</sup> )	JCOG0404 Open vs. Laparoscopic surgery ~2009.3 2015.1		JCOG0212 TME +LLND vs. TME alone 2009.3 2014.11	JCOG1805 High-risk Stage II Surgery alone vs. Surgery+adjuvant Cape vs. Surgery+adjuvant CapeOX Not yet recruiting  JCOG1006	
Stage III	Surgery (Open) (Conventional) +adjuvant chemotherapy  • 5FU+LV • UFT+LV • Cape • FOLFOX • CapeOX	Surgery (Open) (TME+LLND) +adjuvant chemotherapy  • 5FU+LV • UFT+LV • Cape • FOLFOX • CapeOX	JCOG0205 Adjuvant 5FU+LV vs. UFT+LV 2003.2 2006.11	JCOG0910 Adjuvant Cape vs. S-1 ~2013.8 2018.8		Conventional vs. NTIT <sup>6</sup> ) ~ 2015.11 Ongoing, not recruiting Presented at ASCO 2019  JCOG1503C Adjuvant chemotherapy + placebo vs. + aspirin 2018.1 ~ Recruiting	JCOG1310 Surgery +adjuvant mFOLFOX6 vs. +perioperative mFOLFOX6 ~ 2019.5 Terminated

- 1) LE: Local excision
- 2) Cape: Capecitabine
- 3) Conventional: Procedure which gives first priority to mobilization of the tumor-bearing segment of the colon, which is followed by central vascular ligation and ligation of other vasculature
- TME: Total mesorectal excision
- b) LLND: Lateral lymph node dissection
- 6) NTIT (No-touch isolation technique): Procedure which gives first priority to central vascular ligation, which is followed by mobilization of the tumor bearing segment of the colon

<sup>\*</sup>According to the Japanese Classification of Colorectal Carcinoma 9th edition



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	Standard treat	ment in Japan	Ongoing trials		
Subject*	Colon or upper rectum		Colon or upper rectum	Lower rectum	
Stage IV Resectable liver metastases	Surgery (primary tumor resection+hepatectomy)		JCOG0603 Hepatectomy alone vs. Hepatectomy + adjuvant mFOLFOX6 ~ 2019.1 Active, not recruiting		
Stage IV Unresectable disease: without symptoms	Chemotherapy		JCOG1007 Chemotherapy vs. Primary tumor resection + chemotherapy ~ 2019.9 Terminated		
Stage IV Unresectable disease: with symptoms  Primary tumor resection + chemotherapy		JCOG1609INT  Feasibility of DW-MRI¹¹ to improve surgical planning for liver metastasis 2016.11 ~ Recruiting			
Stage IV Unresectable/recurrent disease: elderly	Chemotherapy		JCOG1018 5-FU based chemotherapy+Bevacizmab Additional oxaliplatin (-) vs. (+) 2012.9 ~ Recruiting		
Locally recurrent disease Resectable	Surgery + adjuvant chemotherapy  • 5FU+LV  • FOLFOX  • Capecitabine  • CapeOX		JCOG1801 Surgery + adjuvant chemotherapy vs. Neoadjuvant chemoradiation+surgery+adjuvant chemotherapy 2019.8 ~ Recruiting		

## Anal cancer therapeutic development map

Subject*	Standard Treatment	Ongoing trials		
Stage II/III	Chemoradiotherapy (Western countries)	JCOG0903 S-1+Mitomycin C+radiotherapy ~2015.3 Ongoing, not recruiting Presented at ASCO GI 2019		

<sup>1)</sup> DW-MRI: Diffusion-weighted magnetic resonance imaging

<sup>\*</sup>According to the Japanese Classification of Colorectal Carcinoma 9th edition