Sir,
We are pleased to know about the interest shown by readers in our study. Radiofrequency ablation (RFA) is now increasingly being accepted as a therapeutic modality to treat cancer patients presenting with liver metastasis.[1,2] In our study,[3] the majority of patients treated were those presenting with noncolorectal primary cancers. The primary site included breast (65%), cervix (10%), sarcomas (10%), lung (10%) and colorectum (5%). We would like to clarify that all patients in our study underwent surgical evaluation prior to RFA, but were considered ineligible for surgery for various reasons like poor general condition, associated comorbid conditions, presence of two metastatic lesions in different lobes of liver and patient’s refusal to undergo surgery. All patients had their primary tumor under control at the time of undergoing RFA, which was done with a curative intent. Though surgical resection is traditionally offered to patients with liver metastasis from colorectal cancers, its role can be debated in metastasis from other primary sites. Moreover RFA in liver metastasis is producing results comparable to surgical resection and can be an alternative to surgery. A recent study by Leblanc F et al.[4] compared surgical resection with RFA in patients with liver metastases. After two years of follow-up, the local recurrence rate was similar in the RFA and resection groups with similar survival rates. Another study found a comparable three-year survival rate for patients with solitary liver metastases treated with resection versus radiofrequency ablation (55.4 versus 52.6%).[5] RFA is a minimally invasive procedure as compared to surgical resection, with excellent patient compliance, minimum morbidity and requiring only day-care facilities or overnight stay. Results of smaller trials comparing the two show an equivalent local control and survival rate.[4,5] A larger randomized trial with adequate follow-up is called for to answer the question of equivalence of the two modalities. We strongly feel that radiofrequency ablation is a viable newer treatment alternative to surgical resection for treating both colorectal and noncolorectal liver metastasis.

REFERENCES

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