



Ontario Health

Cancer Care Ontario

Guideline 2-33

A Quality Initiative of the
Program in Evidence-Based Care (PEBC), Ontario Health (Cancer Care
Ontario)

Role of Adjuvant Treatment in Resected Pancreatic Ductal Adenocarcinoma

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An assessment conducted in December 2023 deferred the review of Guideline 2-33. This means that the document remains current until it is assessed again next year. The PEBC has a formal and standardized process to ensure the currency of each document ([PEBC Assessment & Review Protocol](#))

Guideline 2-33 is comprised of 5 sections. You can access the summary and full report here: <https://www.cancercareontario.ca/en/guidelines-advice/types-of-cancer/71976>

Section 1:	Recommendations
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Recommendations

This section is a quick reference guide and provides the guideline recommendations only. For key evidence associated with each recommendation, the systematic review, and the guideline development process, see the Full Report.

GUIDELINE OBJECTIVES

To make recommendations regarding the adjuvant treatment (adjuvant chemotherapy, adjuvant chemoradiation therapy [CRT] and adjuvant stereotactic body radiation therapy [SBRT]) of patients with resected pancreatic ductal adenocarcinoma (PDAC) with respect to overall survival, progression-free survival, toxicity/safety, and quality of life.

TARGET POPULATION

These recommendations apply to adults with resected PDAC with R0 or R1 margins who are eligible for adjuvant treatment. This guideline does not apply to patients being considered for neoadjuvant therapy of PDAC.

INTENDED USERS

The intended users of this guideline are clinicians involved in the delivery of care to patients with resected PDAC.

RECOMMENDATIONS

Recommendation 1

Adjuvant chemotherapy is recommended for patients with R0 or R1 resected pancreatic ductal adenocarcinoma. Modified FOLFIRINOX (mFOLFIRINOX) is recommended for appropriately fit patients. If a patient is not suitable for mFOLFIRINOX, alternative options include gemcitabine plus capecitabine or gemcitabine alone.

Recommendation 2

There is insufficient evidence to support the routine use of adjuvant chemoradiation for patients with R0 or R1 resected PDAC. The role for adjuvant CRT remains uncertain.

Recommendation 3

Following surgical resection of pancreatic cancer, adjuvant SBRT is only recommended on a clinical trial or multi-institutional registry. (Endorsed from the American Society for Radiation Oncology [ASTRO] guideline by Palta et al. 2019) (1).