

Press release

Please fill in this form and return it to graduateschoolhealth@au.dk in Word format no later than three weeks prior to your defence.

Basic information

Name: Jesper Beck Jørgensen

Email: jesjoe@rm.dk Phone: +4530267031

Department of: Clinical Medicine

Main supervisor: Professor Lene Hjerrild Iversen, MD, PhD, DMSci

Title of dissertation: Long-term benefits, risks and adverse events after intended curative rectal cancer treatment in Denmark

Date for defence: November 27, 2020 at (time of day): 15.00-17.00 Place: Auditorium C114-101, Indgang C, Aarhus University Hospital, Palle Juul-Jensens Boulevard 99, 8200 Aarhus N. Online via Zoom

Press release (Danish)

Langsigtede fordele, risici og utilsigtede følger efter kurativt intenderet behandling for endetarmskræft i Danmark

Afhandlingen præsenterer langsigtede fordele, risici og utilsigtede følger 3 år efter intenderet kurativ behandling af endetarmskræft i Danmark. Arbejderne I-III indeholder en evaluering af 3-års overlevelse og recidiv, og belyser desuden utilsigtede følger relateret til behandling af endetarmskræft, som har stor betydning for patienterne og dermed afgørende betydning for det samlede resultat af behandlingen. Resultaterne er sammenfattet i en ph.d.-afhandling fra Aarhus Universitet, Health. Projektet er gennemført af Jesper Beck Jørgensen, der forsvare det d. 27/11 2020.

Endetarmskræft udgør en tredjedel af det samlede antal tilfælde af tyk- og endetarmskræft, som er én af de hyppigst forekomne kræftformer i Danmark. Vi har påvist gunstige overlevelse- og recidivrater for danske patienter, der er diagnosticeret med endetarmskræft i 2011 og 2012, efter implementering af flere nationale initiativer, der sigter mod at forbedre behandlingsresultaterne af endetarmskræft i Danmark.

Studie I viser en høj 3-års overlevelse på 81,0% og en lav risiko for lokalrecidiv (6,5%) og/eller fjernrecidiv (12,8%) i en veldefineret kohorte af patienter med UICC stadium I-IV endetarmskræft behandlet med intenderet kurativ resektion.

Studie II viser, at kun 74% af danske patienter med UICC stadium I-IV endetarmskræft, der i perioden 2001-2012 gennemgik endetarmsresektion med intenderet bevaret tarmkontinuitet, fik deres stomi lagt tilbage indenfor 3 år efter operationen.

Studie III beskriver i en veldefineret kohorte af endetarmskræftpatienter en uventet høj rate (33,6%) med træthedbrud af bækkenet (insufficiensfraktur) påvist ved MR skanning af bækkenet 3 år efter behandling med neoadjuverende kemo- stråleterapi efterfulgt af kurativt intenderet endetarmsresektion.

Forsvaret er offentligt og finder sted i Auditorium C114-101, Indgang C, Aarhus University Hospital, Palle Juul-Jensens Boulevard 99, 8200 Aarhus N. Online via Zoom.

På grund af COVID-19 regler vedr. max. antal personer, som kan være i auditoriet, er fysisk deltagelse ved forsvaret kun muligt for op til 10 personer.

Læs den vedhæftede pressemeddelelse for yderligere information.

Titlen på projektet er "Long-term benefits, risks and adverse events after intended curative rectal cancer treatment in Denmark".

Yderligere oplysninger: Ph.d.-studerende Jesper Beck Jørgensen, e-mail: jesjoe@rm.dk, tlf. 30267031.

Bedømmelsesudvalg:

Brendan Moran, MD, MCh, FRCS, FRCSI
Department of Surgery
Basingstoke and North Hampshire Hospital
Basingstoke, England

Professor Torbjörn Holm, MD, PhD
Department of Surgery, Södersjukhuset
Stockholm, Sweden

Professor Kari Tanderup, Cand.scient, PhD (chairman)
Department of Oncology, Aarhus University Hospital
Aarhus, Denmark

Press release (English)

Long-term benefits, risks and adverse events after intended curative rectal cancer treatment in Denmark

This thesis presents long-term benefits, risks and adverse events 3 years after intended curative rectal cancer treatment in Denmark. The papers I-III contain an evaluation of 3-year survival and recurrence, and attempts to illuminate important adverse events related to rectal cancer treatment, affecting the overall outcome. The project was carried out by Jesper Beck Jørgensen, who is defending his dissertation on November 27, 2020.

Rectal cancer constitutes one third of colorectal cancers, and is one of the most frequent cancer diseases in Denmark. We have demonstrated favorable survival and recurrence rates for Danish patients diagnosed with rectal cancer from 2011 through 2012, after implementation of several national initiatives aiming to improve outcome of rectal cancer therapy in Denmark.

In study I, we found a high 3-year OS of 81,0% and a low risk of local recurrence (6,5%) and/or distant recurrence (12.8%) in UICC stage I-IV rectal cancer patients treated with intended curative resectional surgery in a well-defined Danish cohort.

In study II, we found that only 74% of UICC stage I-IV patients undergoing intended restorative rectal cancer resection in Denmark between 2001 and 2012 had their stoma reversed during 3 years of follow-up.

In study III, an unexpectedly high PIF rate of 33.6% was detected by 3-year postoperative MRI, in patients undergoing neoadjuvant chemo-radio-therapy followed by curatively intended mesorectal excision surgery, in a well-defined Danish cohort, between April 2011 and August 2012.

The defence is public and takes place on November 27, 2020 at Auditorium C114-101, Indgang C, Aarhus University Hospital, Palle Juul-Jensens Boulevard 99, 8200 Aarhus N. Online via Zoom. The title of the project is Long-term benefits, risks and adverse events after intended curative rectal cancer treatment in Denmark.

For more information, please contact PhD student Jesper Beck Jørgensen, email: jesjoe@rm.dk, Phone +45 30267031 .

Assessment committee:

Brendan Moran, MD, MCh, FRCS, FRCSI
Department of Surgery
Basingstoke and North Hampshire Hospital
Basingstoke, England

Professor Torbjörn Holm, MD, PhD
Department of Surgery, Södersjukhuset
Stockholm, Sweden

Professor Kari Tanderup, Cand.scient, PhD (chairman)
Department of Oncology, Aarhus University Hospital

Aarhus, Denmark

Permission

By sending in this form:

- I hereby grant permission to publish the above Danish and English press releases.
- I confirm that I have been informed that any applicable inventions shall be treated confidentially and shall under no circumstances whatsoever be published, presented or mentioned prior to submission of a patent application, and that I have an obligation to inform my head of department and the university's Patents Committee if I believe I have made an invention in connection with my work. I also confirm that I am not aware that publication violates any other possible holders of a copyright.