#### ASO AUTHOR REFLECTIONS



# ASO Author Reflections: The Number of Involved Structures is a Promising Prognostic Factor in Thymic Epithelial Tumors

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### PAST

The staging systems for thymic epithelial tumors are historically based on infiltration concept, with advanced

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M. Chiappetta, MD e-mail: marco.chiappetta@policlinicogemelli.it; marcokiaps@hotmail.it tumors identified considering the infiltration of surrounding structures.<sup>1,2</sup> In detail, the 8th TNM edition was also based considering different infiltration level, starting from proximal structures, such as mediastinal pleura and finishing at more far structures such as great vessels or trachea. However, this concept may present limits due to the different spatial distribution of these structures, and the survival difference among the different subgroups was not statistically significant. This limit is also present in the 9th TNM proposal, which changed the infiltrated structures in the T subgroups but without reporting significant survival differences.<sup>3</sup>

# PRESENT

Our research, based on the European Society of Thoracic Surgeons Thymic Database, investigated the role of the

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number of infiltrated structures in thymic epithelial tumors, including patients who presented surrounding structures infiltration and underwent surgical treatment.<sup>4</sup> Considering the indolent nature of thymomas and the possibility of long-term survival after recurrence, we chose cancer-specific survival as our endpoint. Our study showed a significant prognostic difference considering this parameter, identifying an optimal cut-off of two infiltrated structures for prognosis in this kind of tumor.

## FUTURE

These results highlight the prognostic role of the number of infiltrated structures in thymic tumors, opening up new perspectives in this rare disease in terms of staging as well as in terms of integrated treatment administration. Indeed, this different subgroup analysis will allow for the consideration of a homogeneous category of patients, testing the effectiveness of postoperative radiotherapy or the possibility of administering neoadjuvant in cases with multiple structure infiltration. Finally, this parameter may be considered in future TNM proposals to test its validity in separate T categories as well.

#### **DISCLOSURE** The authors have nothing to disclose.

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