INTRODUCTION

Prognosis for ESCC is relatively worse than that of squamous cell carcinoma of the lung, prostate, and colorectal cancer.

METHODS

80 newly diagnosed ESCC patients were enrolled in a prospective study. The primary endpoint was to compare the survival outcomes of patients who received chemotherapy with or without the addition of bevacizumab.

RESULTS

The median survival time was significantly longer in the combination arm compared to the monotherapy arm (10.2 months vs. 6.8 months, p = 0.001). The hazard ratio for progression-free survival was 0.47 (95% CI: 0.30-0.73, p = 0.001). Bevacizumab was well tolerated, with a manageable adverse event profile.

DISCUSSION

The findings of this study support the use of bevacizumab in the treatment of ESCC and highlight the potential for improved survival outcomes.

CONCLUSION

Bevacizumab should be considered as a viable addition to the therapeutic regimens for ESCC patients.