

Special Issue

Improving Outcomes in Resected Colorectal Liver Metastases: Risk-Stratified Chemotherapy and Aggressive Integration of Thermal Ablation

Message from the Guest Editor

Indications for liver resection in patients with colorectal liver metastases (CRLM) have expanded substantially, and long-term survival has improved dramatically with advances in surgical techniques and systemic therapy. Nevertheless, postoperative recurrence remains frequent even after curative-intent resection. This underscores the need for refined, individualized treatment strategies rather than uniformly applied perioperative approaches. Recurrence risk is driven not only by tumor burden but also by biological aggressiveness. Tumor markers such as carcinoembryonic antigen (CEA) and carbohydrate antigen 19-9 (CA19-9), together with RAS mutation status, have demonstrated prognostic relevance, while circulating tumor DNA (ctDNA) provides insights into minimal residual disease and early relapse. Integrating these serological and molecular biomarkers enables more accurate risk stratification and optimized selection for preoperative or perioperative chemotherapy, while avoiding overtreatment in low-risk populations.

Guest Editor

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Cancers (ISSN 2072-6694) is an international, online journal addressing both clinical and basic science issues related to cancer research. The journal will continue its open access format, which will certainly evolve to ensure that the journal takes full advantage of the rapidly changing world of information and knowledge dissemination. It publishes high-quality clinical, translational, and basic science research on cancer prevention, initiation, progression, and treatment, as well as other related topics, particularly to capture the most seminal studies in the rapidly growing area of immunology, immunotherapy, and tumor microenvironment.

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