The ideal treatment of resectable esophageal cancer remains unknown. Prospective, concealed, and centrally randomized trial from April 2009 to November 2016. The combined stage distribution was: I 9%; II 22%; III 58%; TxN0 10%

- Baseline characteristics were well matched between arms.
- The median follow-up was 5.0 years (95% CI 4.6 to 5.5).
- There was no significant difference in the FACT-E total scores between arms at one year (p=0.759), with (N) 35.5% vs. (A) 41.2% respectively showing an increase of ≥ 15 points (p=0.759), with (N) 35.5% vs. (A) 41.2% respectively showing an increase of ≥ 15 points between arms at one year.

Conclusions:
- Chemoradiotherapy adverse events significantly more frequent in the N arm (p<0.05).
- Overall surgery related adverse events were similar between arms.

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