

RE-IRRADIAZIONE MEDIANTE RADIOCHIRURGIA ROBOTICA DI RECIDIVE DI TUMORE TESTA-COLLO: ESPERIENZA MONOCENTRICA DELL'UNIVERSITA' DI FIRENZE

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Background

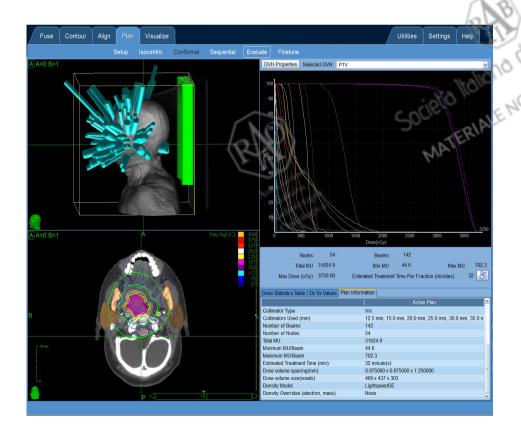
- •Despite aggressive treatment modalities, local recurrence or persistent disease is seen at rate as high as 3-50%. (Roh KW,IJROBP, 2009).
- In current practice, most patients are offered chemotherapy with palliative intent, with a median survival of 10 months (Vermorken, 2008)
- Surgery improves prognosis, although not feasible in the majority of cases (Temam S, H&N, 2005)

What part does radiotherapy play in the treatment of local-regional recurrence?



Purpose

To report a 3-year update of our institutional experience with stereotactic body radiation therapy (SBRT) for re irradiation of locally recurrent head and neck cancer, focusing on *toxicity and perliminary clinical outcome*.



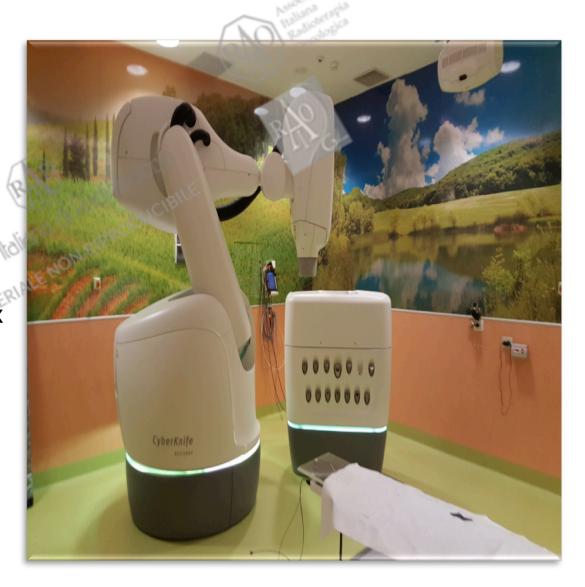


Material and Methods

From **February 2012** to **November 2015**:

37 patients re-irradiated:

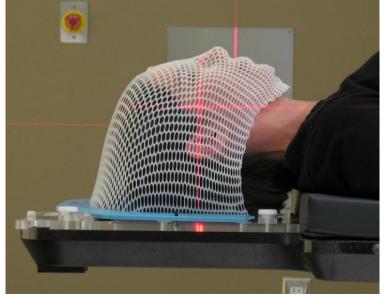
- -Median previous RT dose: 66 Gy (range 40 70 Gy)
- -Median SBRT dose of 30 Gy over 5 fx (range 25-35 Gy, 80% isodose)
- -Tumor control and survival were calculated using the Kaplan-Meier method
- -CTCAE v4.0



Material and Methods

- Non invasive immobilisation with thermoplastic masks;
- A planning CT without contrast is acquired using multislice scanner (Lightspeed 16 GE Medical System, WI) at 1.25 mm slice thickness...
- A contrast-enhanced CT scan is also acquired.
- For all patients fusion with MR imaging studies is performed to help delineate the GTV and OAR.
- **GTV-PTV: 1 mm:** Plans are optimised with Multiplan® Treatment Planning System and dose is calculated by a ray tracing algorithm
- Till june 2015 we used CKVSI System, from october 2015 CK M6







Material and Methods

A		
Age		
	Median	65
	Range	46-93

Sex		
	Male	28 (75,6%)
	Female	9 (24,4%)

Target of Re-RT

Neck lymph nodes	9 (24%)
Paranasal sinuses	7 (19%)
Nasopharynx	5 (13%)
Oral cavity	5 (13%)
Larynx	3 (8%)
Parotid gland	2 (5%)
Other sites	6 (16%)

vietnous	SBRT modality	N	%
lue (%)	Cyberknife	37	100%
65	Total dose (Gy)		
16-93	25	18	49%
	30	16	43%
3 (75,6%) (24,4%)	35	3	8%
Region di Rodion	Prior chemotherapy		
(24%) (19%) (13%) (18%) (18%) (18%)	Yes No	12 25	33% 67%
(13%) (8%)	Primary site		
Median GTV 41 c (8-211cc	Nasopharynx Oropharynx Hypopharynx	4 6 2 7 8 2 6 2	11% 16% 5% 19% 22% 5% 16% 5%

KPS

100-90	24 (64,8%)
80-70	13 (35,2%)

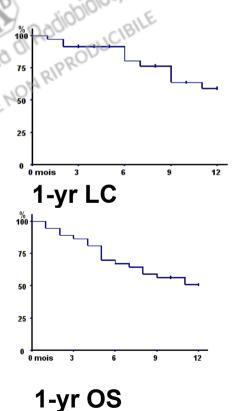
Median time to retreatment 27 months (range 11-171 months)

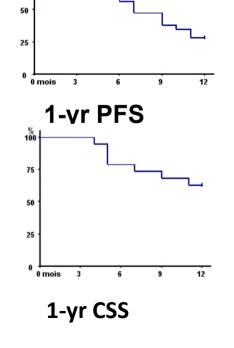
Results

We evaluate:

- •Outcome of patients with recurrent, unresectable HNC re-irradiation with SBRT
- √37/37 patients were evaluable at the moment of the analysis
- ✓ All completed treatment
- ✓ parameters of evaluation of the patients: age, time re-rt, KPS
- ✓ Median follow-up 12 months (range 1-45 months)

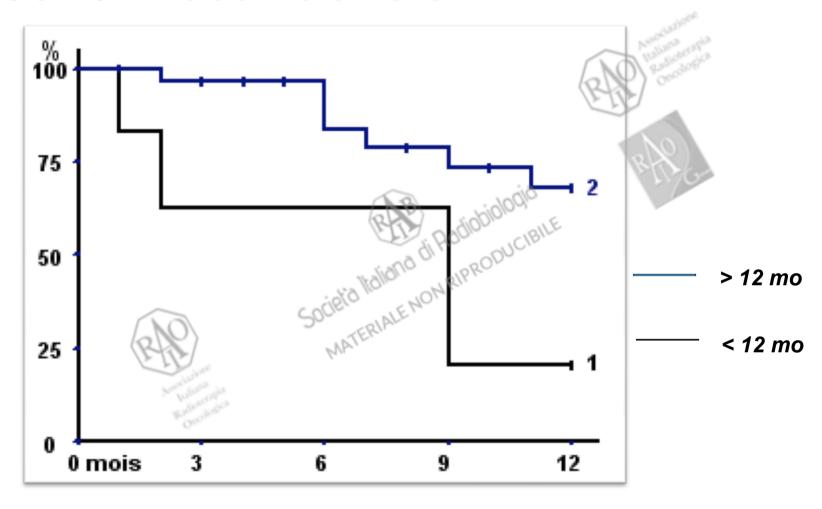
OUTCOME ENDPOINT	1year (%)	Months (Median)
LC	70,3 %	14 TERIAL
PFS	35,1%	7,2
OS	51,3%	13
CSS	63,2%	17







Results: Local Control

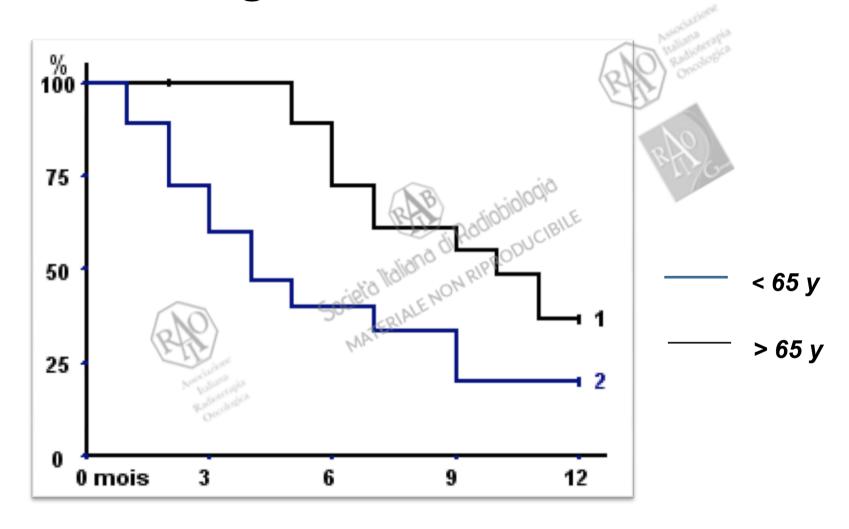


LC ANALISYS (log-rank)

UNIVARIATED: DELAY 1RT- REIRR <12 MONTHS IMPAIR OUTCOME (P=0.025)



Results: Progression Free Survival



PFS ANALISYS (log-rank)

UNIVARIATED: age >65 IMPAIR OUTCOME (P=0.039)

Results: Survival

OS ANALISYS

UNIVARIATED (log-rank):

age > 65: **p=0.0032**

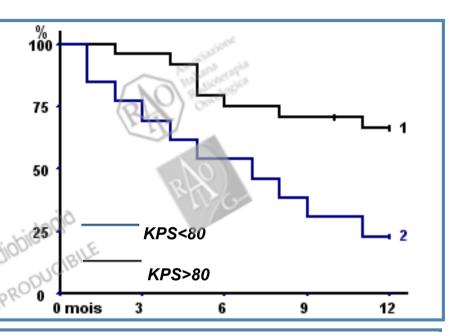
KPS<80: p=0.0075

CCI>5: p=0.014

MULTIVARIATE ANALISYS

(CoxModel)

KPS<80: HR 3.04 (1.39-6.68)



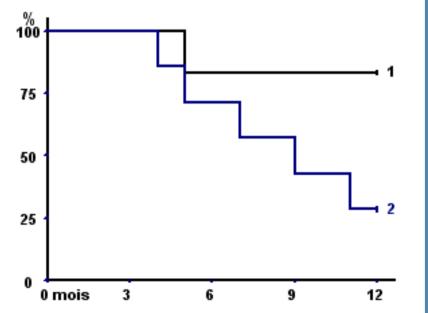
CSS ANALISYS

UNIVARIATE ANALISYS (log-rank test)

age > 65 : **p=0.045** KPS<80 : **p=0.024**

MULTIVARIATE ANALISYS (CoxModel)

KPS<80: HR 3.28 (1.01-10.69)



Results: Toxicity

Toxicity-correlation

The majority of patients did not develop any acute side effect.

1 of patient developed <u>acute</u> grade 3 toxicity

Common Terminology Criteria for Adverse Events (CTCAE)

Version 4.0

Published: May 28, 2009 (v4.02; Sept. 15, 2009)

RTMENT OF HEALTH AND HUMAN SERVICES Neconal Instrum of Health

ACUTE TOX	G1 N° (%)	G2 N° (%)	G3 N° (%)	G4 N° (%)
Salivary duct inflammation:	4 (11%)	5 (13%)	(0%)	(0%)
Mucositis oral	5 (13%)	5 (13%)	1 (3%)	(0%)
Dermatitis	5 (13%)	(0%)	(0%)	(0%)
Xerostomia	3 (8%)	3 (8%)	(0%)	(0%)
Dysphagia	6 (16%)	2 (5%)	(0%)	(0%)

Results: Toxicity

Toxicity-correlation

3 of patients developed <u>late</u> grade 3 toxicity

Common Terminology Criteria for Adverse Events (CTCAE)

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RIMENT OF HEALTH AND HUMAN SERVICES Necosal Instrum of Health

LATE TOX	G1 N° (%)	M° (%) 8000	M° (%)	G4 N° (%)
Superficial soft tissue fibrosis	10 (27%)	2 (5%)	1 (3%)	(0%)
Trismus	2 (5%)	2 (5%)	(0%)	(0%)
Injury to carotid artery	(0%)	(0%)	1 (3%)	(0%)
Dysphagia	3 (8%)	2 (5%)	1 (3%)	(0%)

Conclusion

- •Stereotactic re-irradiation is a feasible and well-tolerated option for local-regionally recurrent head and neck cancer
- •Prolunged local control in selected patients, despite the large median recurrent GTV volume treated
- •Low KPS at Re-RT should be considered a strong factor in predicting an unfavorable outcome
- •Re-irradiation time <12 months is negative predictor in LC analysis



Grazie per l'attenzione!

