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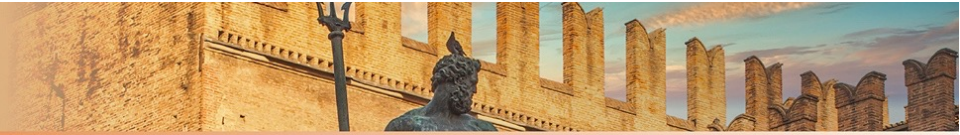
AIRO2022

Radioterapia di precisione per un'oncologia innovativa e sostenibile

BOLOGNA, 25-27 NOVEMBRE
PALAZZO DEI CONGRESSI

EXTREME HYPOFRACTIONATED LINAC-BASED STEREOTACTIC RADIOTHERAPY FOR PROSTATE CANCER PATIENTS: PRELIMINARY ANALYSIS OF A PHASE II TRIAL

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DICHIARAZIONE

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Come da nuova regolamentazione della Commissione Nazionale per la Formazione Continua del Ministero della Salute, è richiesta la trasparenza delle fonti di finanziamento e dei rapporti con soggetti portatori di interessi commerciali in campo sanitario.

- Posizione di dipendente in aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Consulenza ad aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Fondi per la ricerca da aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Partecipazione ad Advisory Board **(NIENTE DA DICHIARARE)**
- Titolarità di brevetti in compartecipazione ad aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**
- Partecipazioni azionarie in aziende con interessi commerciali in campo sanitario **(NIENTE DA DICHIARARE)**



AIMS

Stereotactic body radiation therapy with extreme hypofractionation is replacing prostatectomy mostly in case of low-risk prostate cancer.

In selected case of intermediate/high risk, it could be a treatment justified solution. Aim of this study is to evaluate safety and efficacy of Linac-based SBRT in patients affected by PC.

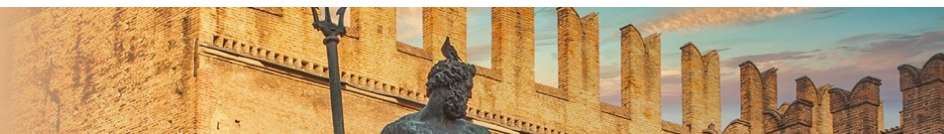




METHODS

Men affected by localized PC were enrolled and analyzed. The SBRT schedule consisted of 35 Gy in 5 fractions administered with Volumetric arc therapy in 1 or 2 weeks based on target volume and urinary symptom. According to risk group androgen deprivation therapy (ADT) was prescribed in some cases. Toxicity was assessed at the end of treatment, 2 weeks after SBRT and during follow-up (fu) using the Common Terminology Criteria for Adverse Events. PSA values were recorded before treatment and during fu as biochemical response criteria





RESULTS

Between July 2019 and September 2021

Total number of patients	156
Age	
Median (range)	75 (50-86) years
PSA pre-RT	
Median (range)	6.36 (0.2-49.5) ng/ml
ADT	
Yes	65 pts (42%)
Risk group	
Low	65 pts (42%)
Intermediate	65 pts (42%)
High	26 pts (16%)
IPSS pre-RT	
Median (range)	6 (0-19)

GU acute toxicities	
G0	106 pts (68%)
G1	50 pts (32%)
GI acute toxicities	
G0	137 pts (88%)
G1	19 pts (12%)
GU 2-weeks toxicities	
G0/G1	149 pts (96%)
G2	7 pts (4%)
GI 2-weeks toxicities	
G0/G1	135 pts (87%)
G2	21 pts (13%)
PSA last follow-up	Median 23 (8-35) months
Median (range)	0.5 (0-7.21) ng/ml



CONCLUSIONS

Linac-based SBRT in patients affected by localized PC is feasible and well tolerated with excellent biochemical disease control.



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