


XXXII CONGRESSO NAZIONALE AIRO
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AIRO2022

Radioterapia di precisione per un'oncologia innovativa e sostenibile

BOLOGNA, 25-27 NOVEMBRE
PALAZZO DEI CONGRESSI

 Associazione Italiana
Radioterapia e Oncologia clinica


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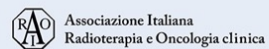
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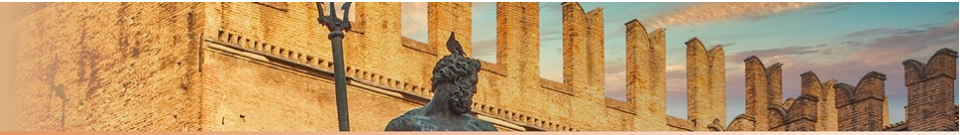
Radioterapia di precisione per un'oncologia innovativa e sostenibile

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RADIOTHERAPY FOR ELDERLY PATIENTS WITH CERVIX CANCER: FEASIBILITY AND OUTCOME OF CURATIVE TREATMENT

E. Bonetto; S. Arcangeli; E. De Ponti; S. Trivellato; P. Caricato; S. Meregalli



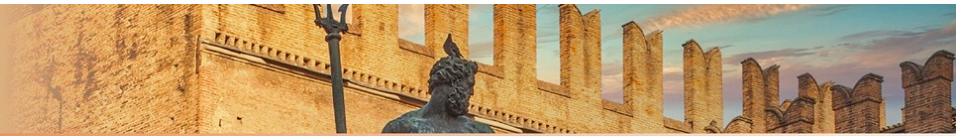


DICHIARAZIONE

Relatore: Sofia Meregalli

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)**
- Altro

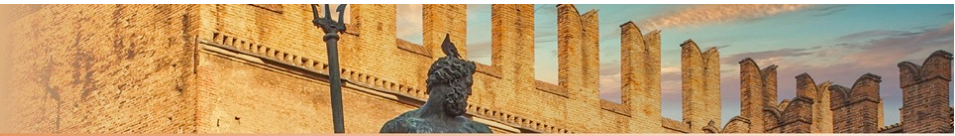


AIMS

Elderly patients with carcinoma cervix (E-CC) are a challenging group to treat. We retrospectively evaluated at our institute the survival outcome and safety of radiotherapy (RT) with or without chemotherapy (CT) in this subset of patients

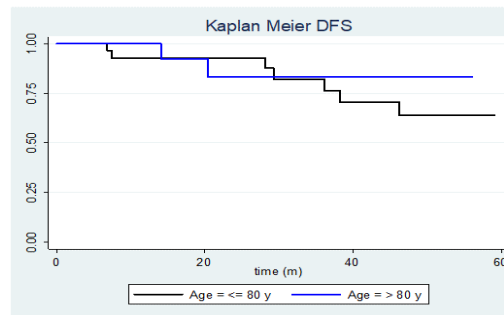
METHODS

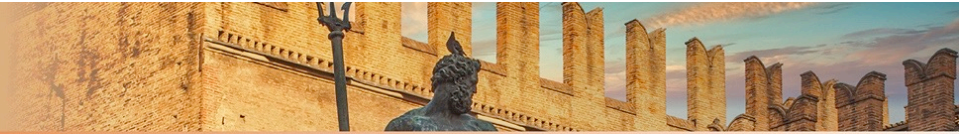
Forty-one elderly patients (median 78 years, range 69-89) consecutively referred for curative radiotherapy between July 2008 and March 2020 were evaluated. All the patients were treated with definitive radiotherapy (22 VMAT, 19 conformal 3D), 38 of them receiving external beam and intracavitary brachytherapy (ICBT) boost; 3 patients receiving external beam boost. Twenty-one patients (51.2%) received concurrent chemotherapy using weekly cisplatin. Median total dose for EBRT and ICBT was 50.4 Gy (Range:41.4-60.9 Gy) and 24 Gy (Range:10-30), respectively. Cox multivariate analysis was used to investigate the association between the survival time of and possible predictive factors



RESULTS

Thirty-three patients (80.5%) had squamous cell carcinoma, 7 had adenocarcinoma (17%) and one neuroendocrine cancer. Seventeen patients had FIGO IIB stage, 13 had IB1-IIA stage, 11 had III/IVA stage. Median follow-up period was 40.1 months (range 3.7-116.6). All the patients completed the treatment. No grade 3 acute and late toxicity was observed. Nine patients experienced recurrence (local: 4; para-aortic lymph node: 1; distant: 4). Twenty-one patients died during the follow-up period, 6 patients due to the primary disease, 15 for other causes (5 unknown). All patients aged > 80 years died for other causes. Overall 5-year survival and disease-free- survival (OS and DFS) rates for all patients were 82.8% and 67.9%, respectively. By Cox multivariate analysis the association of weekly cisplatin was an independent significant predictive factor for OS ($p=0.005$) and DFS ($p=0.017$). More advanced age was an independent significant predictive factor for OS ($p=0.005$) and age > 80 years was a significant predictive factor for DFS ($p= 0.026$)





CONCLUSIONS

In general, advanced age is considered a negative prognostic factor, and less aggressive cares are provided. Our results indicate that radiotherapy is a useful modality for elderly patients with cervical cancer, also for age over 80 years. The association of chemotherapy improves OS and DFS. The importance of radiotherapy will be greater in the aging society