



XXXII CONGRESSO NAZIONALE AIRO
XXXIII CONGRESSO NAZIONALE AIRB
XII CONGRESSO NAZIONALE AIRO GIOVANI

AIRO2022

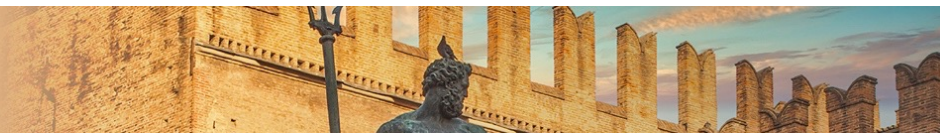
Radioterapia di precisione per un'oncologia innovativa e sostenibile

BOLOGNA, 25-27 NOVEMBRE
PALAZZO DEI CONGRESSI

L'IPOFRAZIONAMENTO NELLA PATOLOGIA MAMMARIA: LA PANDEMIA COVID HA CAMBIATO IL SUO UTILIZZO IN LOMBARDIA? – UNA SURVEY PROMOSSA DA AIRO LOMBARDIA

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DICHIARAZIONE

Relatore: Sara Pedretti

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



During the COVID pandemic, in Europe, hypofractionation was used more frequently, with the aim of reducing patients' (pts) hospital admissions. The aim of this work is to picture the use of hypo-fractionation for breast cancer in Lombardy and its implementation during COVID pandemic.

Clinical Trial > Lancet Oncol. 2021 Jul;33(7):430-439. Epub 2021 Apr 28.
Hypofractionation versus 3 weeks late normal treatment: a non-inferiority, randomised controlled trial
 Adrian Murray Brunt¹, Joanne S. Fiverson¹, Hannah L Yare¹, Brian P Yarem¹, P Lewis¹, A M Brunt², C Coles³, S Griffin⁴, I Locke⁵, Breast Radiotherapy Consensus Working Group

Cost Minimization Radiology
 Indian J Surg. 2020 Jul 2. Epub 2020 Jul 2.
Breast Cancer Management COVID-19 Pandemic
 Manoj Gowda S¹, Kirti Katherine Kalra¹, Evandro de Azevedo¹, Icro Meattini¹, Carlotta Becherini², Liesbeth Boersma³, Orit Kaidar-Person⁴, Vivek Misra², Sankaran Narayanan¹, Philipp Beutner⁷, Michael Grant⁸, Suresh Di Cosimo⁹, Javier Garcia¹⁰

Review > Lancet Oncol. 2022 Jan;23(1):e21-e31. doi: 10.1016/S1470-2045(21)00539-8.

European Society for Radiotherapy and Oncology Advisory Committee in Radiation Oncology Practice consensus recommendations on patient selection and dose and fractionation for external beam radiotherapy in early breast cancer

The regional executive committee of AIRO Lombardy proposed a **survey**, with multiple choice questions, concerning:

- the use of ultra-hypofractionation
- APBI
- moderate hypo-fractionation
- SIB

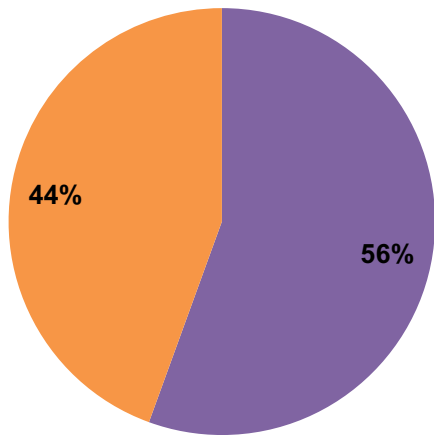
implementation of such schedules in the course of the COVID pandemic. The questionnaire was sent by mail to the responsible for breast disease and to Director of each centre in May 2022.



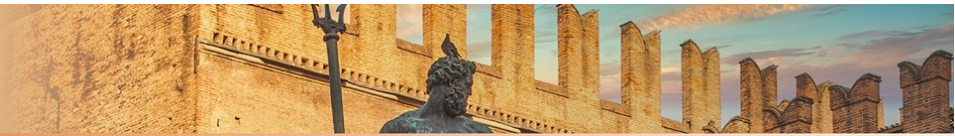
27 of 31 centres filled the survey (81%).

Fast forward

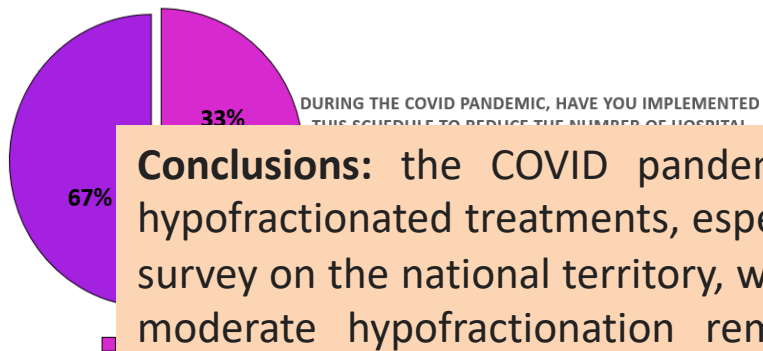
■ yes ■ no



subtypes	Luminal A/B Always Selected cases (>80y, logistic problem..)	12 1 2	80% 7% 13%
Age	≥ 50 year ≥ 70 year always irrespective of age Selected cases (>80y, logistic problem..)	4 8 1 2	27% 53% 7% 13%
Margins	Negative Negative or close (< 2 mm) Always (negative, close AND positive)	8 4 3	53% 27% 20%
Boost - fractionation	Normo-fractionated boost Hypo-fractionated boost (≥ 3 Gy/fr) I only select the patients who can omit the boost	2 3 10	13% 20% 67%
Stage	Tis-T2 N0-N1mi Tis-T2 N1a	12 3	80% 20%
after adjuvant chemotherapy?	No yes	10 5	67% 33%
Implemetation during COVID pandemic	No yes	6 9	40% 60%



APBI



When do you not use moderate hypofractionation? (multiple choice)

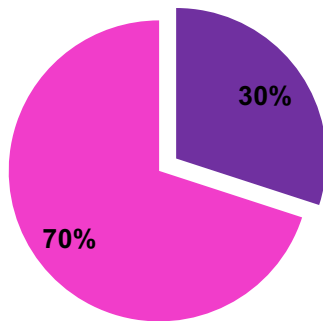


Implementation of moderate hypofractionation

- yes (after mastectomy and needed nodal irradiation)
- yes (after conservative surgery)
- no

Conclusions: the COVID pandemic was one of the factors favouring the implementation of hypofractionated treatments, especially ultra-hypofractionated. It would be interesting to extend this survey on the national territory, with the aim of standardizing in the selection of pts. In some centres moderate hypofractionation remains unused in case of nodal or skin irradiation and after mastectomy

SIB



When do you use SIB?	always, if boost is necessary	14	74%
	only if VMAT planning	4	21%
	only if electrons boost is not possible	1	5%
Implementation during COVID pandemic	No	14	74%
	yes	5	26%