

Combining radiation and surgery significantly improves survival for head and neck cancer patients

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Adding radiation therapy to surgery significantly improves overall survival in patients diagnosed with node-positive head and neck cancer when compared to treating with surgery alone, according to a study in the June issue of the International Journal of Radiation Oncology*Biophysics, the official journal of the American Society for Therapeutic Radiology and Oncology.

Radiation therapy is commonly used after surgery to treat some head and neck cancers, but very few studies have been conducted to determine its impact on survival. Researchers at the Mount Sinai School of Medicine departments of Radiation Oncology and Otolaryngology and Head and Neck Surgery in New York sought to determine with this study the impact of radiation and surgery on a head and neck cancer patients' overall survival.

Between 1988 and 2001, 5,297 patients with a median age of 59 who were diagnosed with node-positive head and neck squamous cell carcinoma were treated with surgery and/or adjuvant radiation therapy. The patients were surveyed approximately 4.4 years after treatment, and the researchers found that adding radiation to surgery improved patients' chance of survival by 25 percent in all nodal stages (N1-N3), including N1 stage patients, even though radiation is typically recommended only for N2 and N3 stage patients.

"This study provides evidence that radiation should be considered after surgery for most head and neck cancer patients with positive lymph nodes," said Johnny Kao, M.D., assistant professor of radiation oncology at the Mount Sinai School of Medicine and lead author of the study. "For these patients, adding radiation improves not only locoregional control but also greatly increases their chance for overall survival. The findings of this study should serve to enhance the use of adjuvant radiation as the most effective treatment method for these types of cancer."

Source: American Society for Therapeutic Radiology and Oncology

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