

Preoperative radiation may improve survival rates in advanced rectal cancer patients

December 2 2008

Patients treated with radiation prior to surgery for advanced rectal cancer have fewer instances of cancer recurrence and better overall survival rates, according to a recent Geisinger report.

The report examined a treatment called neoadjuvant therapy, which can reduce cancerous tumor size or limit the spread of cancer, before surgery to remove the tumor. Neoadjuvant therapy may include chemotherapy and/or radiation.

Neoadjuvant therapy should not be considered a "one size fits all" approach for rectal cancer patients, said the report's primary author, Mohammed Mohiuddin, MD, FRCR, FACR. Dr Mohiuddin is director of The Henry Cancer Center and co-director of Geisinger Health System's Cancer Institute.

"Physicians need to consider a variety of factors such as tumor size, cancer stage and patient preference before deciding on the course of preoperative treatment," said Dr. Mohiuddin, who has published extensively on the topic of radiation oncology.

The report compared the results of nine recently published research studies involving several thousand cancer patients in Europe and the United States.

Giving comparatively higher dosages of radiation reduces the likelihood that the cancer returns to the same place in the body, the report said.

Short-term radiation therapy in some patients may be more convenient because it reduces the number of trips to the hospital.

In patients with late stage rectal cancer, the report supports the pre-surgical practice of combining chemotherapy with smaller radiation dosages over several weeks.

The report appears in the November edition of the *International Journal of Radiation Oncology Biology Physics*.

Source: Geisinger Health System

Citation: Preoperative radiation may improve survival rates in advanced rectal cancer patients (2008, December 2) retrieved 23 April 2024 from <https://medicalxpress.com/news/2008-12-preoperative-survival-advanced-rectal-cancer.html>

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