

HIV-positive head and neck cancer patients benefit from radiation therapy

January 19 2011

HIV-positive head and neck cancer patients respond well to radiation therapy treatments and experience similar toxicity rates as non-HIV-positive patients, despite prior reports to the contrary, according to a study in the January issue of the *International Journal of Radiation Oncology Biology Physics*, an official journal of the American Society for Radiation Oncology (ASTRO).

Patients with <u>HIV</u> have a significantly higher risk of developing some types of cancers; however, since the use of highly active antiretroviral therapy (HAART) began in the mid-1990s, the instances of AIDS-related cancer have greatly decreased. This has alternately caused a higher incidence of these patients developing non-AIDS-related cancers, including those originating from the head and neck.

Radiation therapy constitutes a current standard treatment for head and neck cancer, but there has been very little investigation into how radiation therapy affects HIV-positive patients. Traditionally, aggressive treatment such as radiation therapy has been used sparingly in this population due to concerns regarding acute and late complications. This newly presented research sought to determine the feasibility of radiation therapy and the likelihood of cure for HIV-positive patients with head and neck cancer.

The three-year estimates of overall survival and local-regional control were 78 percent and 92 percent, respectively. Grade 3+ toxicity was reported by 58 percent of patients, but this did not appear worse than the



standard rate seen in HIV-negative patients.

The researchers did note that 75 percent of patients studied were receiving HAART therapy at the time of treatment. Also, all patients underwent dental prophylaxis and gastrostomy tube placement before beginning therapy, which may have played a role in the toxicity levels remaining comparable to HIV-negative patients. Dental prophylaxis, gastrostomy tubes, and monitoring of CD4 counts are recommended in these patients to minimize treatment complications.

"It is clear that HIV-positive patients tolerated primary radiation therapy for head-and-neck cancer without excessive toxicity or exaggerated tissue reactions," Allen Chen, M.D., senior author of the study and training program director at the University of California Davis Cancer Center in Sacramento, California, said. "With HIV-positive patients living longer than ever before and therefore developing cancers unrelated to their HIV, these studies are important to ensure that we are treating these patients for cancer in a way that provides them with the best possible outcomes."

Provided by American Society for Radiation Oncology

Citation: HIV-positive head and neck cancer patients benefit from radiation therapy (2011, January 19) retrieved 9 April 2024 from https://medicalxpress.com/news/2011-01-hiv-positive-neck-cancer-patients-benefit.html

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