

Radiation plus chemotherapy provides long-term positive results for head and neck cancer patients

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A select subgroup of advanced head and neck cancer patients treated with radiation therapy plus the chemotherapy drug cisplatin had more positive outcomes than patients treated with radiation therapy alone and continued to show positive results 10 years post-treatment, according to a study presented at the Multidisciplinary Head and Neck Cancer Symposium, sponsored by AHNS, ASCO, ASTRO and SNM.

Researchers analyzed two subgroups totaling 410 patients who had advanced [head and neck cancer](#) and received [radiation therapy](#) or radiation therapy plus [cisplatin](#). Those who had microscopically involved resection margins and/or extracapsular spread of disease showed improved local-regional control with radiation and chemotherapy. At 10 years post-treatment, the local-regional failure rates were 33.1 percent and 27.1 percent, respectively. Disease free survival for radiation therapy only patients was 12.3 percent compared to 18.4 percent for those treated with radiation plus cisplatin and overall survival was 19.6 percent and 27.1 percent, respectively.

In contrast, patients who were enrolled in the study solely because they had tumors involving multiple lymph nodes did not benefit from receiving radiation therapy and chemotherapy concurrently.

"This is good news," Jay Cooper, MD, FASTRO, lead author of the study and director of the Maimonides [Cancer Center](#) in Brooklyn, N.Y.,

said. "We now can eradicate some advanced head and neck tumors that we couldn't before by adding chemotherapy to radiation therapy. At the same time, we can spare other patients who would not do better with the addition of chemotherapy from its side effects."

More information: The abstract, "Long-term follow-up of the RTOG 9501/Intergroup Phase III trial: Postoperative concurrent radiation therapy and chemotherapy in high-risk squamous cell carcinoma of the head and neck," will be presented on Thursday, January 26, 2012.

Provided by American Society for Radiation Oncology

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