

Newer radiation technology improves head and neck cancer patients' long-term quality of life

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Patients treated with IMRT for head and neck cancer report an increasingly better quality of life post-treatment when compared to patients receiving other forms of radiation therapy, according to a study presented at the Multidisciplinary Head and Neck Cancer Symposium, sponsored by AHNS, ASCO, ASTRO and SNM.

Intensity modulated [radiation therapy](#), or IMRT, is a highly specialized form of [external beam radiation](#) therapy that allows the [radiation beam](#) to better target and conform to a tumor. It is a newer treatment that has become widely adopted for treating [head and neck cancer](#). Prior studies have shown that IMRT decreases the probability of radiation therapy related side effects, including [dry mouth](#) and chewing and swallowing problems, but no study has been conducted to measure long-term quality of life in head and [neck cancer](#) patients treated with various forms of radiation therapy.

Investigators from the University of California, Davis, School of Medicine, prospectively administered the University of Washington Quality of Life instrument, a standardized, previously validated questionnaire that patients complete after radiation therapy, to 155 patients undergoing treatment for cancers of the head and neck and analyzed the scores over time. Fifty-four percent of patients were initially treated with IMRT and 46 percent were treated with non-IMRT techniques.

The researchers showed that the early quality of life gains associated with IMRT not only are maintained but become more magnified over time. At one-year post-treatment, 51 percent of IMRT patients rated their quality of life as very good or outstanding compared to 41 percent of non-IMRT patients. However, at two-years after treatment, the percentages changed to 73 percent and 49 percent, respectively. Also, 80 percent of patients treated with IMRT reported that their health-related quality of life was much better or somewhat better compared to the month before developing cancer. In contrast, only 61 percent of patients treated by non-IMRT techniques felt similarly.

Although the researchers acknowledged that quality of life is somewhat of a subjective concept, they nonetheless believe their findings support the widespread use of IMRT for head and neck cancer.

"Hopefully, these results provide some reassurance to patients that radiation therapy using contemporary techniques in the hands of expert specialists can maintain their function and long-term [quality of life](#), while still curing them of cancer," Allen Chen, MD, lead author of the study and director of the radiation oncology residency training program at the University of California, Davis School of Medicine in Sacramento, Calif., said.

"Radiation therapy for head and neck cancer is without a doubt an intensive process and very intimidating to most patients. Folks think about the prospects of six to seven weeks of radiation and naturally expect the worst. It is nice to know that technological advances have made the treatment much more tolerable than in the past."

More information: The abstract, "Intensity-modulated radiotherapy is associated with improved global quality of life among long-term survivors of head and neck cancer," will be presented as a poster viewing.

Provided by American Society for Radiation Oncology

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