

Accelerated radiotherapy more efficient than current practice

September 4 2013

Radiotherapy with or without chemotherapy is increasingly being used in the curative treatment for un-resected non-small cell lung cancer (NSCLC). But, until now, researchers had not looked at the cost-effectiveness of the treatment. In the October issue of the International Association for the Study of Lung Cancer's journal, the *Journal of Thoracic Oncology (JTO)*, researchers compared the cost-effectiveness of different modified radiotherapy schemes and conventional fractional radiotherapy in the curative treatment of un-resected NSCLC patients.

They conclude that, "accelerated radiotherapy is almost certainly more efficient than current practice and should be recommended as standard radiotherapy for the curative treatment of un-resected NSCLC patients not receiving concurrent chemo-radiotherapy." However, they did not arrive at a conclusion for which model is most cost-effective.

The researchers looked at 10 [randomized clinical trials](#) with a population of un-resected NSCLC patients. These trials accrued a total of 2,000 patients between 1989 and 2006.

Most patients were male, aged 60-69 years, had [squamous cell carcinoma](#) and stage III disease. They found it was uncertain which modified scheme is most cost-effective and it is unclear whether the study results can be extrapolated to modified radiotherapy combined with concomitant chemotherapy. Therefore, further research comparing the cost-effectiveness of different types of modified radiotherapy and examining the role of chemotherapy might be valuable.

Despite this, the researchers say, "it is encouraged to adopt accelerated radiotherapy for the [curative treatment](#) of un-resected NSCLC patients who do not receive concurrent chemo-radiotherapy and examine its role in the context of concurrent chemo-radiotherapy."

Provided by International Association for the Study of Lung Cancer

Citation: Accelerated radiotherapy more efficient than current practice (2013, September 4)
retrieved 26 April 2024 from

<https://medicalxpress.com/news/2013-09-radiotherapy-efficient-current.html>

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