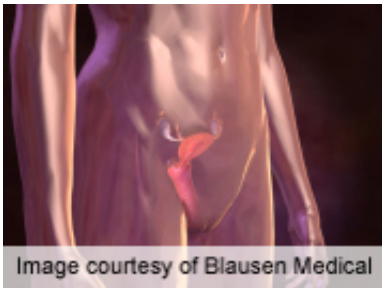


No increased risk of second cancers with radiotx in pelvic CA

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(HealthDay)—For patients with pelvic cancers, the risk of developing a second cancer is not increased with radiotherapy (RT), according to a study published online Dec. 22 in the *Journal of Clinical Oncology*.

Lisette M. Wiltink, from the Leiden University Medical Center in the Netherlands, and colleagues examined the long-term probability of developing a second [cancer](#) among [patients](#) included in the TME, PORTEC-1, and PORTEC-2 trials. In the TME trial, 1,530 patients with [rectal cancer](#) were randomized to preoperative external-beam radiotherapy (EBRT) or no RT; in PORTEC-1, 714 patients with endometrial cancer were randomized to postoperative EBRT versus no RT; and in PORTEC-2, 427 patients with [endometrial cancer](#) were randomized to EBRT versus vaginal brachytherapy (VBT).

The researchers observed no significant difference in the probability of second cancers for patients who were treated without RT (10- and 15-year rates, 15.8 and 26.5 percent, respectively) and those treated with EBRT (10- and 15-year rates, 15.4 and 25.6 percent, respectively) or VBT (10-year rate, 14.9 percent). No significant differences were found between treatment arms in the individual trials. The risk of developing a second cancer was higher for all cancer survivors versus an age- and sex-matched general population, with a standardized incidence ratio of 2.98 for any second cancer.

"Those who underwent EBRT or VBT had no higher probability of developing a second cancer than patients who were treated with surgery alone," the authors write.

One author disclosed financial ties to Amgen.

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