"COMBINATED RADIOTHERAPY AND CHEMOTHERAPY IN THE TREATMENT OF CANCER"

José María López Tobaruela

KEY POINTS:

- Radiotherapy: local treatment
- Chemotherapy: systemic treatment
- Combinated radiotherapy and chemotherapy:
 - Local and systemic control of cancer
 - Effects increase
 - Problems: very new treatment, toxicity, etc.

RADIOTHERAPY (RT)

- Local effect
- Irradiation to destroy cancer cells
- Modalities: external, intersticial, intracavitary, metabolic
- Division of RT doses to get better results and to reduce toxicity
- Damage in adjacent healthy tissues
- New modalities: radiosurgery, shaped RT



CHEMOTHERAPY (CTX)

- Systemic effect
- Many mechanisms of action: DNA alkylating, topoisomerase inhibitors, antimetabolites...
- Eradicate micrometastasis focus
- Lot of adverse reactions: alopecia, pancytopenia, digestive disorders...



COMBINATED RT+CTX: GOALS

- Better local tumor control
- Increase overall survival and disease-free survival
- Avoid relapses

COMBINATED RT+CTX: STRATEGIES:

- Sequential: classic method:
 - Neoadjuvant (CT pre-RT)
 - Adjuvant (QT post-RT)
- Alternanting
- Associated: CT and RT at the same time. More efficiency, more toxicity

COMBINATED RT + CTX: MOST COMMONLY USED DRUGS

- Platinum salts (synergistic effect)
- 5-fluorouracil (additive effect)
- Mitomycin C (action on hypoxic cells)
- Hydroxyurea (synchronise cells on G2 phase)
- Biologic therapies (on research)

COMBINATED RT + CTX: INDICATIONS¹

- Inoperable cancers (head and neck, bronchi, esophagus, etc.)
- Preoperative: to obtain resectability, downstaging and/or less mutilating conservative surgeries (larynx, stomach, pancreas, etc.)
- Postoperative: reduce local relapses and distant metastasis, increase survival (for example, rectal cancer)

COMBINATED RT+CTX: ADVANTAGES

- Spatial summation: systemic and local interventions, eradicate cancer and metastasis
- Additivity
- Supraaditivity: both methods are more effective together than separately
- Reduced radiation damage to normal tissue

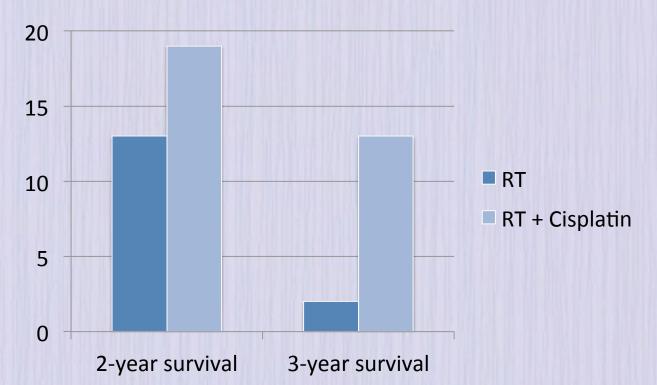
COMBINATED RT+CTX: PROBLEMS

- Choosing the most appropriate drug
- Suitable radiation scheme
- Toxicity
- Supportive care
- Identification of appropriate moment to implement
- Patient selection criteria

EXAMPLE:

"Radiotherapy combined with chemotherapy in the treatment of lung cancer": ²

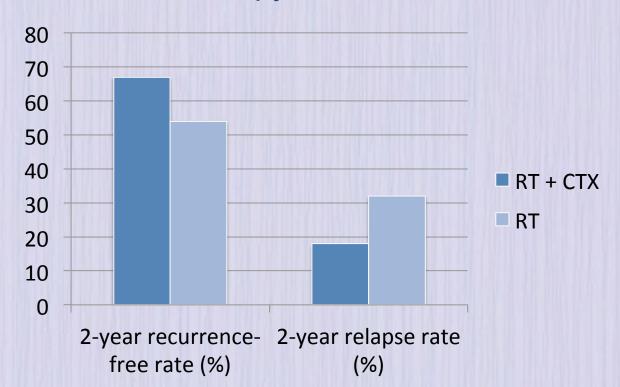
Benefit in local control and increased survival compared to single treatments.



EXAMPLE:

"Radiotherapy with or without Chemotherapy in Muscle-Invasive Bladder Cancer": 3

Improvements were seen in locoregional control compared to radiotherapy alone



BIBLIOGRAPHY

- 1: Herrera A, Granados M. Manual de Oncología. Procedimientos médico quirúrgicos. México: McGraw-Hill; 2012.
- 2: Moreno-Jiménez M, Aristu J. Radioterapia combinada con quimioterapia en el tratamiento del cáncer de pulmón. Rev Med Univ Navarra (Pamplona). 2007; 51(4): 13-33. Disponible en: http://www.unav.es/revistamedicina/51_4/pdf/radioterapia.pdf
- 3: James N, Hussain S, Hall E, Jenkins P, Tremlett J, Rawlings C et al. Radiotherapy with or without Chemotherapy in Muscle-Invasive Bladder Cancer. N Eng J Med. 2012; 366: 1477-1488. Disponible en: http://www.nejm.org/doi/full/10.1056/NEJMoa1106106#t=article

Images used:

- **Slide nº 4:** Creative Commons licensed image from Wikipedia. http://commons.wikimedia.org/wiki/File:Chemotherapy_with_acral_cooling.jpg#mediaviewer/Archivo:Chemotherapy_with_acral_cooling.jpg