

# **Ocena tolerancji i wczesnych wyników jednoczesnej radiochemioterapii i uzupełniającej chemioterapii u chorych na nisko zróżnicowane raki nosowej części gardła**

Concomitant radiochemotherapy followed by adjuvant chemotherapy in patients with poorly differentiated nasopharyngeal cancer; tolerance and early results of treatment

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## **Summary**

**Introduction:** Recently, concomitant radiochemotherapy became a method of choice in patients with poorly differentiated nasopharyngeal cancer. The aim of this study is to estimate tolerance and early results of the concomitant radiochemotherapy followed by adjuvant chemotherapy (modified US Head and Neck Intergroup protocol). **Methods and material:** Analysing protocol consist of conventionally fractionated radiotherapy (TD=70Gy) given concomitantly with cisplatin (30 mg/m<sup>2</sup> daily during 3 days every 3 weeks). This part of treatment was followed by 3 courses of PF (cisplatin + 5-fluorouracil) chemotherapy. Between August 1998 and September 2003 thirty six patients (27 male and 9 female) were qualified to treatment. Median age was 33 years. **Results:** Tolerance of concomitant radiochemotherapy was acceptable. Intensive mucosal acute reactions (>G2) were observed in 67% patients. Life threatening complications (sepsis + DIC) was observed in single case. All patients received radiotherapy in planned total dose. Eighty six percent of patients received cisplatin in planned cumulated doses. Tolerance of the adjuvant chemotherapy was worse. Only 44% patients received all three courses of PF chemotherapy. The reasons of incomplete chemotherapy were neutropenia, infections, prolonged acute reactions or performance status decreasing. Complete regression was obtained in 86% patients. Two years overall and disease free survival rates were 83% and 72%, respectively. **Conclusions:** Our results confirm high activity of the concomitant radiochemotherapy followed by chemotherapy in patients with poorly differentiated nasopharyngeal cancer. Those results confirm also high toxicity of this regimen, what suggest very careful patients qualification to treatment.