

HPV and CERVICAL CANCER
CURRICULUM



Chapter 6.c.3

Methods of treatment – Radiation

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Cervical cancer

- Diagnostics
- Staging
- Therapy
 - Surgery
 - Radiation
 - Systemic therapy
- Prognosis
- Follow-up treatment



Radiotherapy

- External beam radiotherapy (EBRT) to treat cancer
 teletherapy
- Radiotherapy combined with chemotherapy
 - = chemoradiation
- Regional internal radiotherapy
 - = brachytherapy or afterloading (local therapy)



Radiotherapy indications

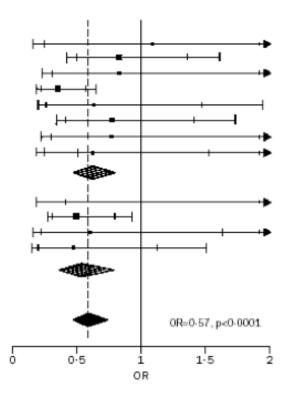
Primary radiotherapy

- Irradiation and simultaneous chemotherapy
- Brachytherapy and teletherapy better than teletherapy alone
- Post-operative radiotherapy
- Only if there are risk factors such as large size of tumour, positive parametrium, hemangiosis, positive lymph nodes
- If possible irradiation and simultaneous chemotherapy
- Radiotherapy of recurrent disease
- Effective when no previous radiotherapy
- If possible radiotherapy and simultaneous chemotherapy



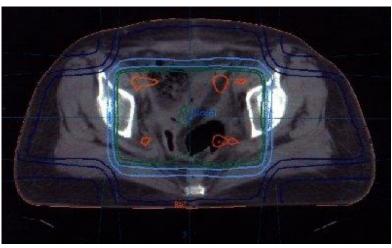
Combined chemoradiation

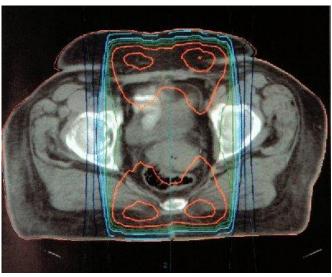
- Overall survival in 11
 prospective randomised
 studies radiotherapy vs.
 chemotherapy in primary and
 adjuvant radiotherapy of 2856
 patients with cervical cancer
- Combined chemoradiation is superior to radiotherapy alone for both primary and adjuvant treatment

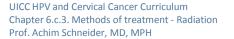




Organ sparing

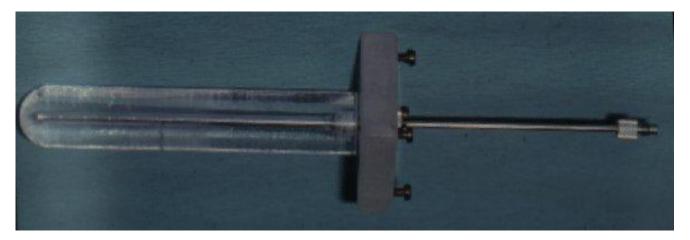








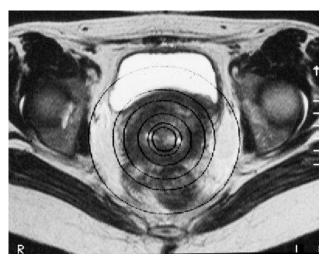
Delivery systems



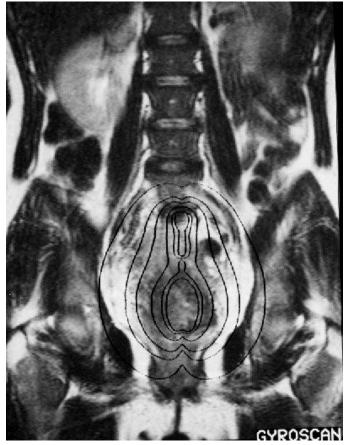


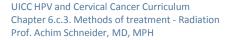


Brachytherapy













Adjuvant chemoradiation after surgical therapy

- Indication for:
 - R1 (microscopic resection margin involvement)
 - pN1 (lymph node involvement)
 - pT2b
 - V1 and L1 (blood and lymph vessel involvement)



Toxicity

Acute toxicity

- Occurs within the first 90 days after initiation of therapy
- Can be effectively treated

Late toxicity

- Occurs more than 90 days after initiation of therapy
- Usually chronic



Acute toxicity

- Erythema
- Hyperpigmentation
- Pollakisuria
- Mucositis
- Diarrhea
- Fistula formation
- Bone marrow depression
- Kidney toxicity
- Hearing impairment



Late toxicity

- Chronic proctitis
- Chronic cystitis
- Bladder shrinkage
- Stenosing lesions of the rectosigmoid, urethra, ureters and/or vagina
- Hearing impairment
- Impairment of renal function
- Lymphedema



Thank you

This presentation is available at www.uicc.org/cervicalcancercurriculum

