



Radioterapia stereotassica
ablative nel trattamento
delle lesioni polmonari in
pazienti affetti da NSCLC
oligometastatico:
tossicità e risultati clinici

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Background

- **Oligometastatic patients:** metastases are limited in site and number
- Different types of **local therapies** have been used for the treatment of limited metastases, mostly in the lung and liver
- Data on the use of **SABR** are emerging and the early results on local control are promising

- **definitive treatment** of PT
- **lack of intra-thoracic N mets**
- disease free interval > **6-12 months**



Long-term survival
improvement

*The biggest challenge in the treatment of oligometastatic disease is to identify the patients who will benefit from **local aggressive therapy***



Is there an oligometastatic state in non-small cell lung cancer? A systematic review of the literature

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Methods and Materials

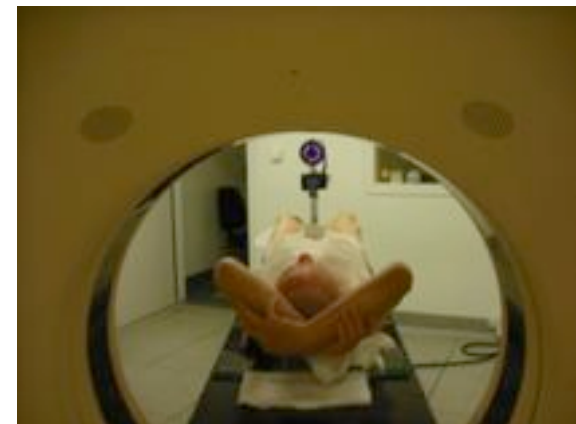
- NSCLC patients with lung metastases
- Oligometastatic disease
- Up to 4 lesions
- Definitive treatment of primary lung tumor
- Adequate pulmonary function
- Discussion in a multidisciplinary team

PROCEDURE

- Thermoplastic masks for the thoracic region
- CT scan from the mandible to L3 with 3 mm slice thickness in a free breathing mode
- 4D-CT scan to evaluate organ motion
- Personalized margins according to the respiratory motion
- CBCT every day

DOSE PRESCRIPTION

Peripheral lesions ≤ 2 cm	60 Gy/3 fr
Peripheral lesions	48 Gy/4 fr
Central lesions	60 Gy/8 fr



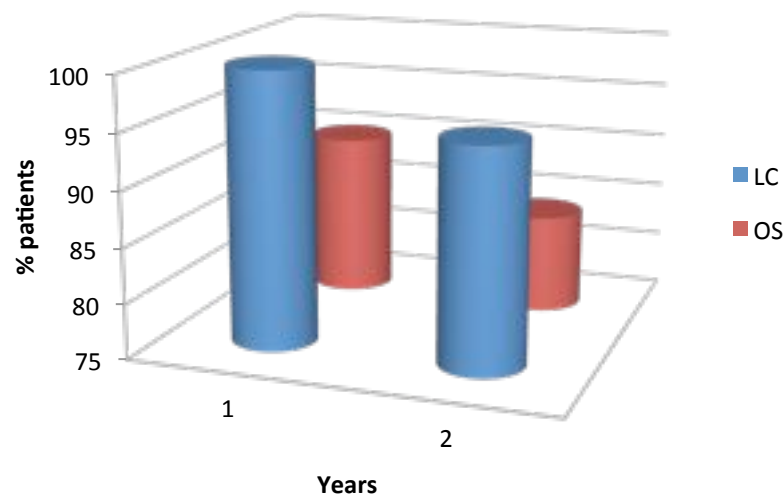
Methods and Materials



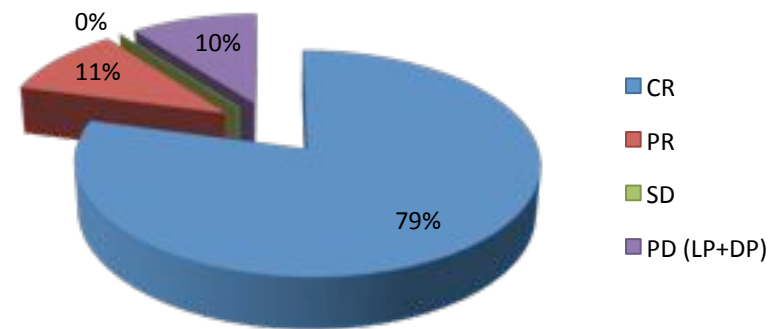
Results

- 41 evaluable patients (65 lung lesions)
- Median follow up 24 months (6-40 months)
- Median age 68 years (range 50 - 85 years)
- No pulmonary toxicity greater than **GRADE 2**
- No CHEST PAIN or RIB FRACTURE

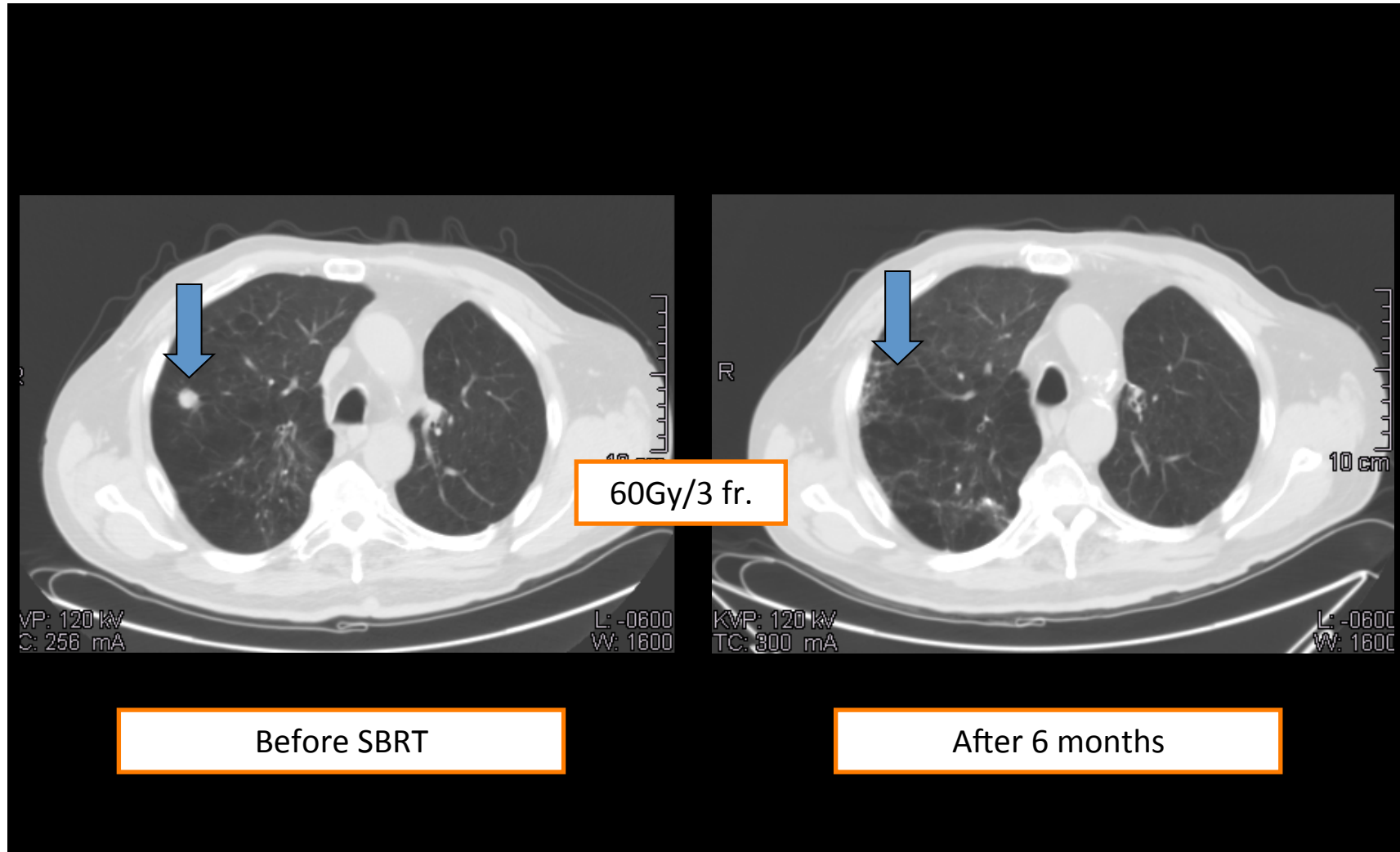
Local control & overall survival



Radiological response



Results



Conclusions

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