

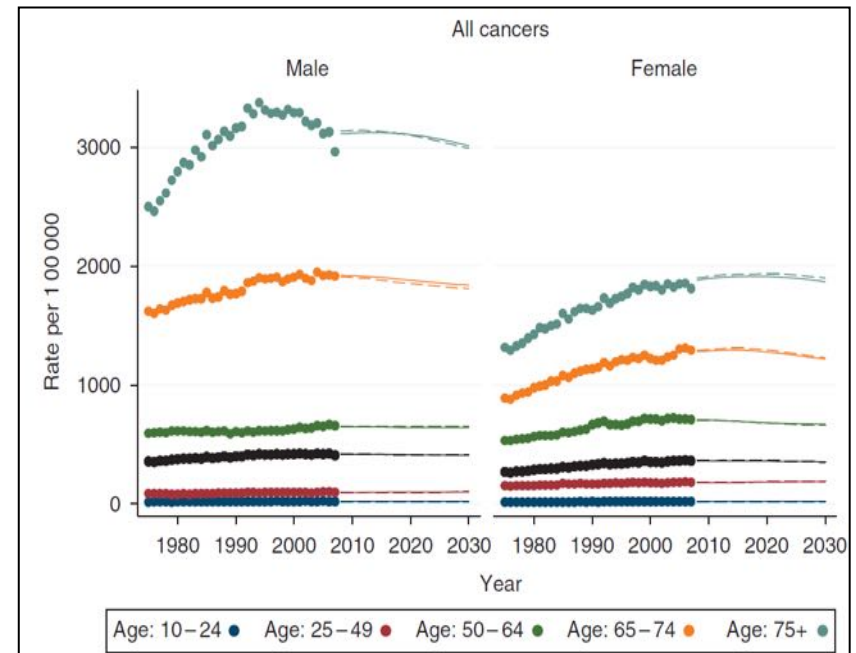
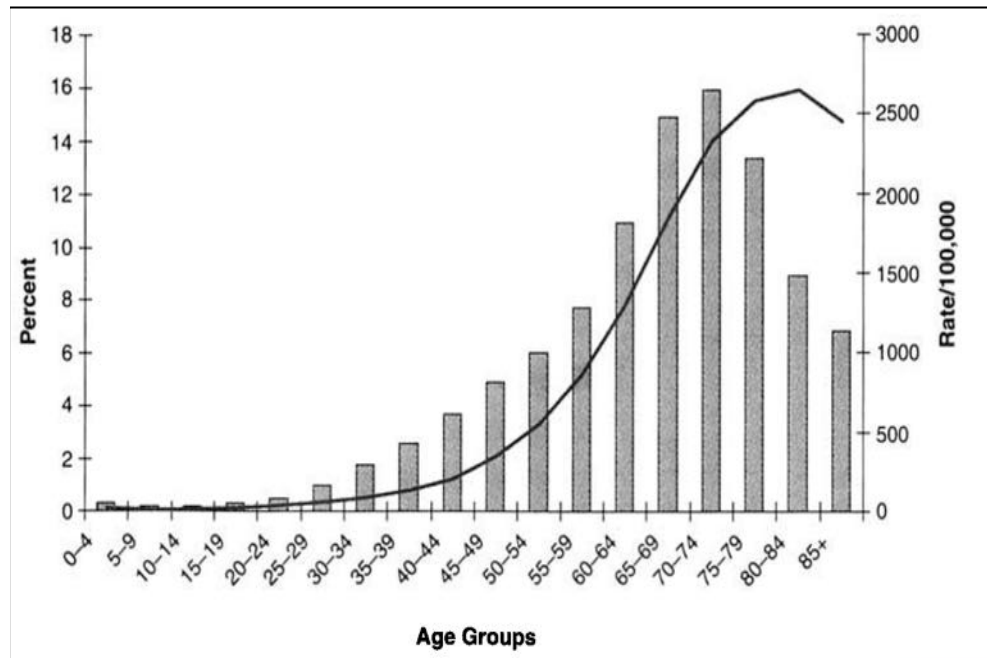


**Il ruolo della radioterapia stereotassica (SBRT) nel trattamento della malattia oligometastatica nel paziente anziano.**

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## Background



R.M. Yancik, LA.G. Ries Aging and cancer in America. Demographic and epidemiologic perspectives Hematol Oncol Clin N Am, 14 (2000), pp. 17-23

Mistry M, Parkin DM, Ahmada S et al. Cancer incidence in the United Kingdom: projections to the year 2030. Br J Cancer 2011; 105: 1795-1803.

## Background

### VIEWPOINT

#### Cancer in the elderly: why so badly treated?

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J. FESTEN F. COGNETTI M. S. AAPRO

#### RADIOTHERAPY FOR CANCER PATIENTS AGED 80 AND OLDER: A STUDY OF EFFECTIVENESS AND SIDE EFFECTS

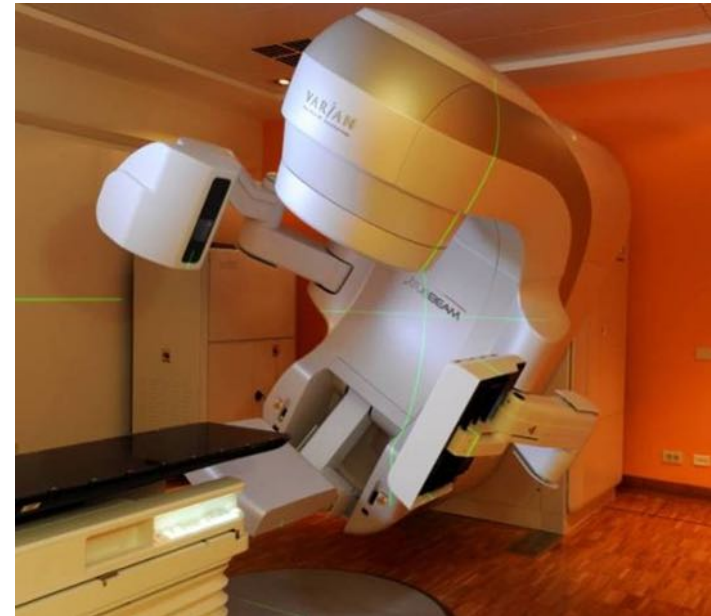
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#### Review of current best practice and priorities for research in radiation oncology for elderly patients with cancer: the International Society of Geriatric Oncology (SIOG) task force

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J.-L. Lagrange<sup>9</sup>, A. Markouizou<sup>9</sup>, R. Pfeffer<sup>10</sup> & S. Villa<sup>11</sup>, On behalf of the SIOG Radiotherapy  
Task Force



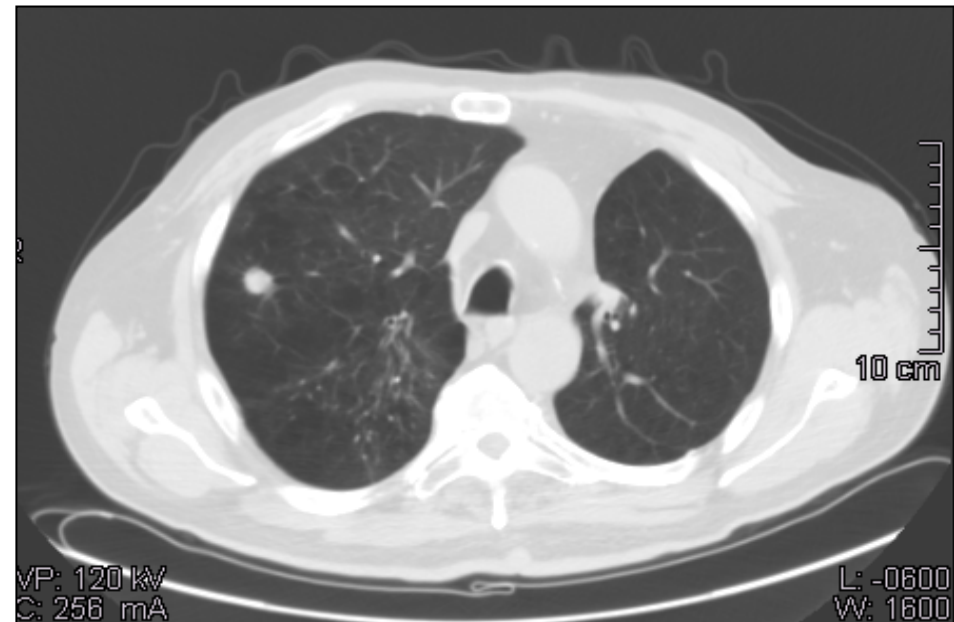
## Humanitas experience





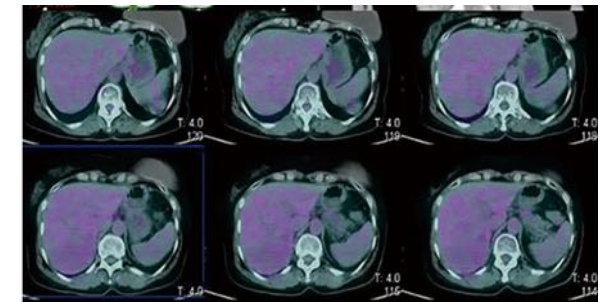
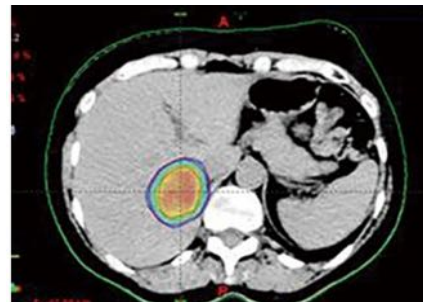
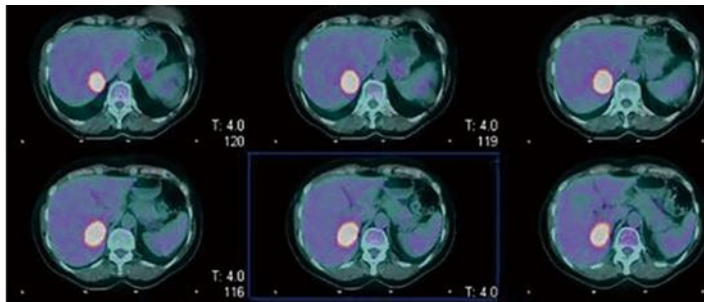
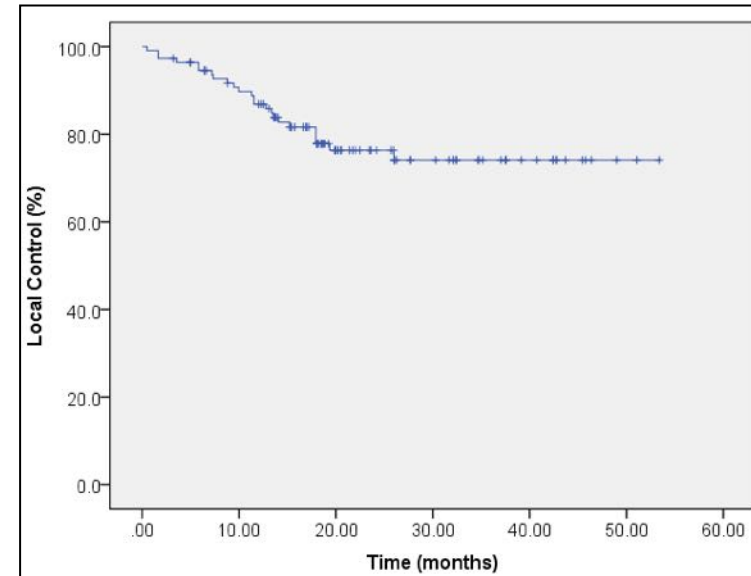
## Patient's demographics and treatment characteristics

Parameter	Number of cases (frequency)	
Number of patients	82	
Number of lesions	111	
Median age (range) [years]	78.8 [73.0-88.5]	
Sex Male/Female	64 (78%) / 18 (22%)	
Primary tumor	<p>Colorectal: 40 (48.8%)</p> <p>Lung: 13 (15.9%)</p> <p>Kidney-urethra: 7 (9.5%)</p> <p>Liver: 4 (4.9%)</p> <p>Prostate: 3 (3.6%)</p> <p>Pancreas: 3 (3.6%)</p> <p>Other: 12 (14.6%)</p>	
Treatment Site	<p>Abdomen: 16 (14.4%)</p> <p>Liver: 50 (45.0%)</p> <p>Lung: 45 (40.5%)</p>	
Chemotherapy cycles received before SBRT	<p>0: 42 (51.2%)</p> <p>1: 12 (14.6%)</p> <p>2: 16 (14.4%)</p> <p>&gt;2: 12 (14.6%)</p>	
Number of treated lesions	<p>1: 64 (78.0%)</p> <p>2: 10 (12.2%)</p> <p>3: 6 (7.3%)</p> <p>4: 2 (2.4%)</p>	
Prescription dose	<p>40-45Gy: 18 (16.2%)</p> <p>48-68Gy: 57 (51.3%)</p> <p>75Gy: 36 (32.4%)</p>	
Number of fractions	<p>3: 48 (43.2%)</p> <p>4: 40 (36.0%)</p> <p>5-8: 23 (20.7%)</p>	

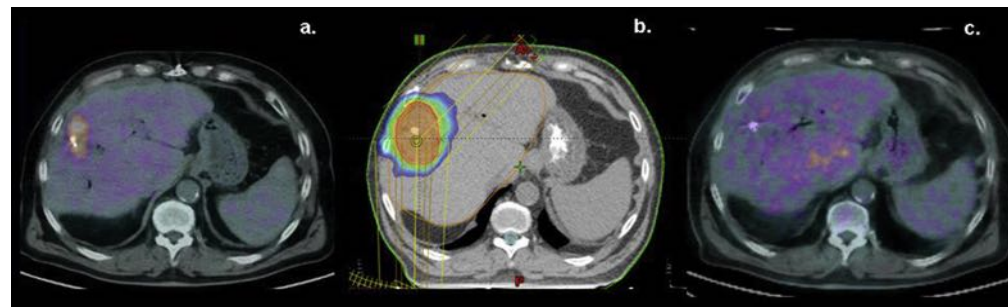
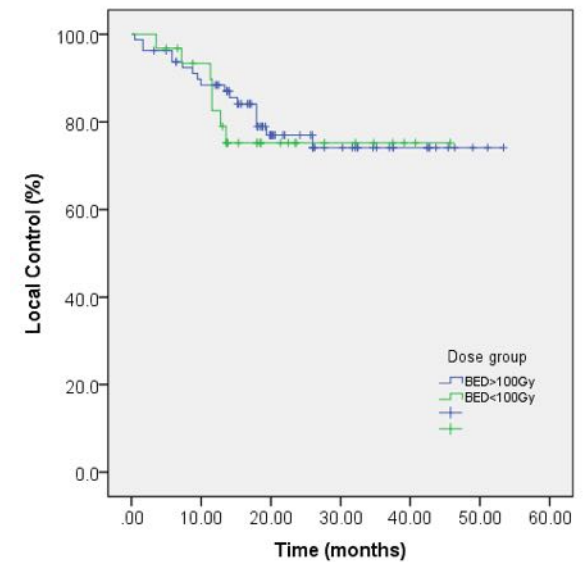
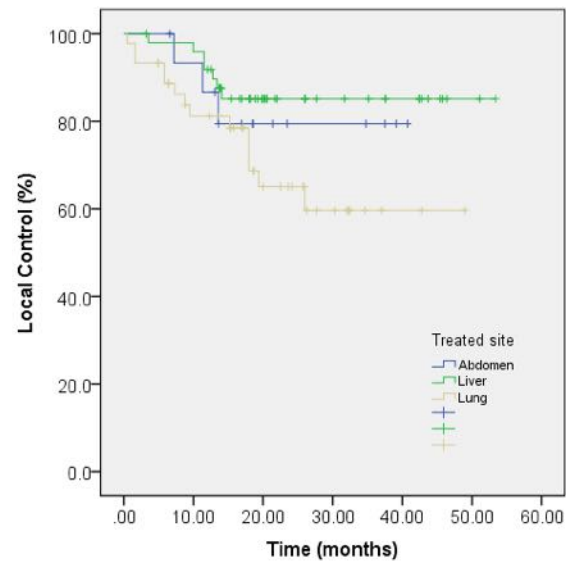
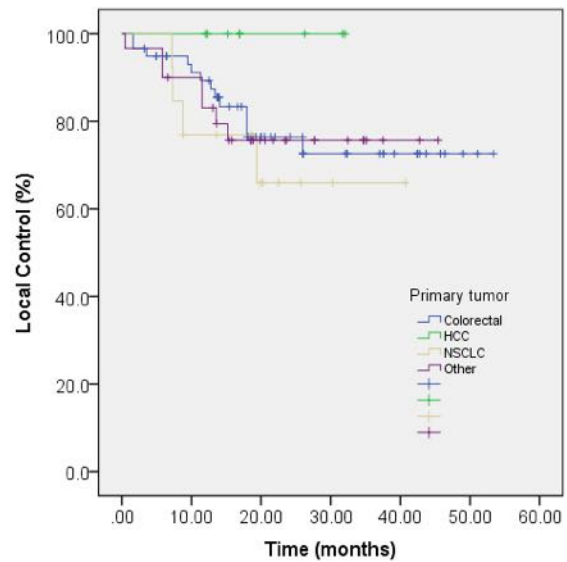


## Local control and distant failure

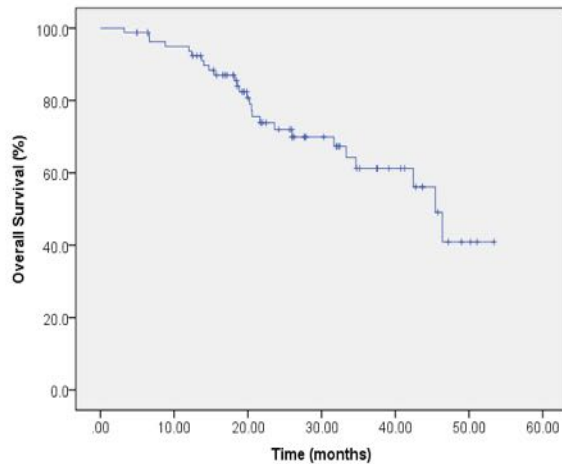
Status	Number of cases (frequency)
Complete response	42 (37.8%)
Partial Response	39 (35.1%)
Stable disease	6 (5.4%)
Progressive disease	24 (21.6%)
Mean Time to progression [range] (months)	11.1±6.2 [1-26]
Distant progression	71 (64.0%)
Time to distant progression [range] (months)	14.7±10.3 [0-55]



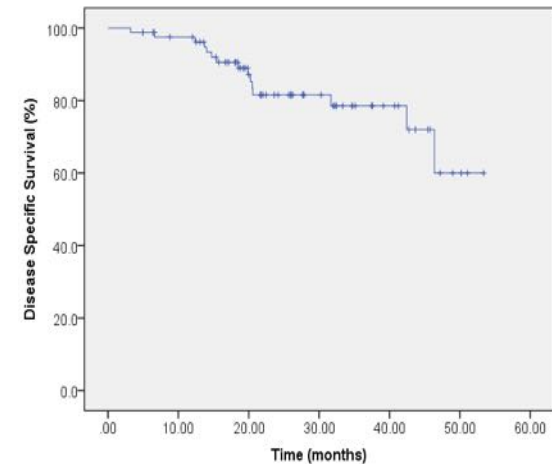
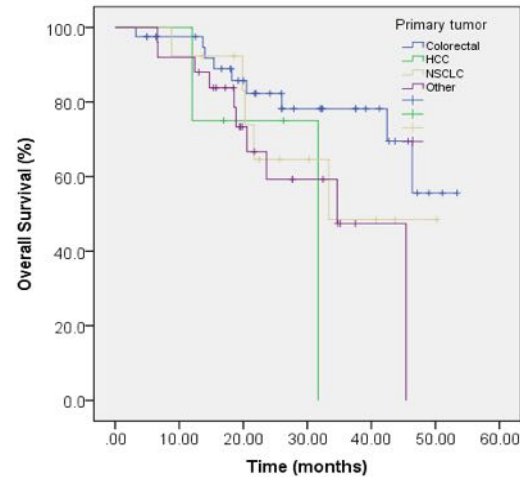
## Local control and distant failure



## Local control and distant failure



OS 12	93.6±2.7%
24	72.0±5.6%
36	61.2±6.9%



DSS 12	97.5±1.8%
24	81.6±4.9%
36	78.5±5.6%



## Toxicity

	<b>G0</b>	<b>G1</b>	<b>G2</b>	<b>G3</b>
<b>All patients</b>	70 (85.4%)	7 (5.9%)	3 (2.5%)	2 (1.7%)
<b>Liver patients</b>	32 (86.5%)	3 (8.1%)	2 (5.4%)	0 (0%)
<b>Abdomen patients</b>	15 (78.9%)	3 (15.8%)	0 (0%)	1 (5.3%)
<b>Lung patients</b>	23 (88.5%)	1 (3.8%)	1 (3.8%)	1 (3.8%)

## Conclusions

- SBRT can be considered an effective and safe treatment for oligometastatic patients in the elderly.
- SBRT can guarantee sustained local control, associated with encouraging survival rates and low toxicity.
- A prospective phase II trial will be conducted to confirm this retrospective evaluation and to formally assess also quality of life and correlation of outcome results with life expectancy.

HUMANITAS  
CANCER CENTER

GRAZIE PER  
L'ATTENZIONE

