

A Comparison of Clinical Outcomes for T₁₋₂N₀₋₁ Oral Tongue Cancer Treated with Surgery Alone or with Postoperative Radiotherapy

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목 적 : The aim of this study was to compare the clinical outcomes of postoperative radiotherapy to those obtained surgery alone in patients with T₁₋₂N₀₋₁ squamous cell carcinoma of the oral tongue.

방 법 : Retrospective analysis of 86 patients with T₁₋₂N₀₋₁ oral tongue cancer received surgery between January 2000 and December 2006. Fourteen patients (16.3%) received postoperative radiotherapy (RT). Patient characteristics, tumor characteristics, treatment modality, failure pattern and survival rates were analyzed.

결 과 : Postoperative RT was preferred in the patients with invasion depth ≥ 0.5 cm, resection margin < 0.5 cm, and higher T, N classification ($p < 0.05$).

Higher tumor grade and invasion depth ≥ 0.5 cm were the significant prognostic factors. (median survival time (MST) 67.192 months vs. 92.326 months, $p = 0.001$ for grade ; MST

72.757 months vs. 89.151 months, $p = 0.023$ for invasion depth) There were no significant differences of disease-free (MST 85.57 months vs. 78.21 months, $p = 0.475$), regional recurrence-free (MST 85.571 months vs. 81.757 months, $p = 0.775$), distant metastasis-free (MST 85.714 months vs. 90.361 months, $p = 0.548$) and overall survival (MST 86.214 months vs. 81.077 months, $p = 0.647$) between patients with RT and without RT, respectively. Notably, compared with 11.1% (8/72) local failure rate (LFR) of patients without RT, that of patients with RT was 0% (0/14) ($p = 0.161$).

결 론 : Postoperative radiotherapy was not significant factor influencing clinical outcomes in T₁₋₂N₀₋₁ squamous cell carcinoma of the oral tongue due to poor pathologic factors in these patients. Even if it was not statistically significant, there was no local failure in the patients with postoperative radiotherapy.