

Recent Progress in Head and Neck Oncology-Hokkaido University Experience

Department of Otolaryngology-Head & Neck Surgery, Hokkaido University Graduate School of Medicine,
Sapporo, Japan

Satoshi Fukuda, M.D., Ph.D.

Recent progress in diagnosis, treatment and prevention for head and neck cancer is remarkable. Among these are PET-CT, NBI imaging fiberscope, navigation surgery, chemoprevention and so on.

In this Lecture, I mainly would like to talk about superselective high-dose cisplatin infusion with concomitant radiotherapy for head and neck Cancer, especially focusing on advanced nasal cavity and paranasal sinuses (Cancer 115 : 4705-4714, 2009).

The current study aimed to evaluate the efficacy of superselective high-dose cisplatin infusion with concomitant radiotherapy (RADPLAT) for previously untreated patients with advanced cancer of nasal cavity and paranasal sinuses. Between October 1999 and December 2006, 47 patients were given superselective intra-arterial infusions of cisplatin (100–120mg/m² per week) with simultaneous intravenous infu-

sions of thiosulfate to neutralize cisplatin toxicity and conventional external-beam radiotherapy (65–70 grays).

There were 7 patients (14.9%) diagnosed with T3, 22 (46.8%) with T4a, and 18 (38.3%) with T4b disease. During the median follow-up period of 4.6 years, the 5-year local progression-free survival rate was 78.4% for all patients (n=47), 69.0% for patients with T4b disease (n=18), and 83.2% for patients with <T4b disease (n=29). The 5-year overall survival rate was 69.3% for all patients, 61.1% for patients with T4b disease, and 71.1% for patients with <T4b disease. RADPLAT was feasible in 45 patients (95.7%). Although a single institution experience, the results of the current study suggest that RADPLAT can cure the majority of patients with advanced cancer of the nasal cavity and paranasal sinuses, as well as preserve organs.