

短期および長期の放射線治療は患者の可動性を維持するのに役立つ(Abstract LBA10004)

転移性脊髄圧迫症状の治療には単回照射で十分である

Single radiation treatment sufficient to treat metastatic spinal cord compression symptoms

転移性がん患者において一般的に認められる脊髄圧迫は、QOL損失の主要な原因である。放射線治療は疼痛やその他の症状を緩和するのに広く用いられているが、標準的な推奨スケジュールはなく、方法も様々である。2017年American Society of Clinical Oncology年次集会で取り上げられた第III相臨床試験の結果、単回照射療法が1週間の放射線療法と同様に有効であることが示された。8週後に、単回照射を受けた患者の69.5%、および5回照射を受けた患者の73.3%は同様の歩行状態を有し、短期および長期の放射線療法のいずれもが患者の可動性を維持するのに役立つことが示された。

Full Text

A common complication in people with metastatic cancer, spinal cord compression is a major detriment to quality of life. Radiation treatment is widely used to relieve pain and other symptoms, but there is no standard recommended schedule, and approaches currently vary. Findings from a phase III clinical trial show that a single radiation treatment is as effective as a full week of radiation.

The study was featured at the 2017 American Society of Clinical Oncology (ASCO) Annual Meeting.

"Our findings establish single-dose radiotherapy as the standard of care for metastatic spinal canal compression, at least for patients with a short life expectancy," said lead study author Peter Hoskin, MD, FCRP, FRCR, an oncologist at the Mount Vernon Cancer Centre in Middlesex, United Kingdom. "For patients, this means fewer hospital visits and more time with family."

Many patients with advanced solid tumors develop bone metastases, and up to 10% of all patients with cancer will have metastatic spinal cord compression.

The study enrolled 688 patients with metastatic prostate (44%), lung (18%), breast (11%), and gastrointestinal cancers (11%). The median age was 70 years, and 73% were male. The researchers randomly assigned patients to receive external beam spinal canal radiation therapy either as a single dose of 8 Gy or as 20 Gy split in five doses over five days.

The primary endpoint of the study was ambulatory status, measured on a four-point scale:

Grade 1: Able to walk normally
Grade 2: Able to walk with walking aid (such as cane or walker)
Grade 3: Has difficulty walking even with walking aids
Grade 4: Dependent on wheelchair

At study entry, 66% of patients had ambulatory status 1 to 2.

At eight weeks, 69.5% of patients who received single-dose radiation therapy and 73.3% of those who received five doses had ambulatory status 1 to 2, showing that both shorter- and longer-course radiation treatments helped patients stay mobile. The median overall survival was similar in the two groups – 12.4 weeks with single dose vs. 13.7 weeks with five doses (the difference was not statistically significant). The proportion of patients with severe side effects was similar in the two groups (20.6% vs. 20.4%), but mild side effects were less common in the single-dose group (51% vs. 56.9%).

Prof. Hoskin emphasized that early recognition and prompt treatment of spinal cord compression symptoms are critical to achieve best results with radiation therapy.

"Longer radiation may be more effective for preventing regrowth of metastases in the spine than single-dose radiation. Therefore, a longer course of radiation may still be better for patients with a longer life expectancy, but we need more research to confirm this," said Prof. Hoskin.

"Spinal cord compression is a debilitating condition that many patients with advanced cancer experience. Until now, patients often had to spend multiple days traveling back and forth to undergo radiation treatments. This study means that without compromising care, we can help patients have more time to focus on the things they enjoy instead of on the cancer," said Joshua A. Jones, MD, MA, ASCO Expert.

Patients with metastatic breast cancer were under-represented in this clinical trial, as were younger patients. For certain patients with spinal cord compression, surgery instead of or in addition to radiation therapy may be recommended.

This study was funded by Cancer Research UK.

ASCO2017特集

[News 01]

ナッツの摂取が大腸がん再発リスクを低下させる

[News 02]

胆管がん患者の生存期間延長

[News 03]

分子標的治療は肺がんの再発を遅延させる

[News 04]

結腸がん治療後の健康的なライフスタイルは生存率を改善する

[News 05]

ワクチン使用による経口HPV感染の軽減

[News 06]

結腸がんに対する補助療法の改善

[News 07]

症状を自己報告するウェブベースのシステムは患者の生存期間延長に役立つ

[News 08]

OlaparibはBRCA関連転移性乳がんの増殖を遅延させる

[News 09]

多発性骨髄腫に対する新たなタイプの免疫療法

[News 10]

EGFR遺伝子変異陽性肺がんの新たな治療の可能性

[News 11]

アレクチニブは肺がんの無増悪生存期間を改善する

[News 12]

浸潤性乳がんのリスクを低下させる

[News 13]

新規診断転移性前立腺がんにおける予後の改善

[News 14]

Larotrectinibは多様な腫瘍タイプに効果的である

[News 15]

短期および長期の放射線治療は患者の可動性を維持するのに役立つ

[News 16]

胸膜中皮腫に対する初めての免疫療法の兆しが見える

[News 17]

心理的介入はがん患者の苦悩を緩和する

[News 18]

乳がん罹患後の妊娠は再発率を上昇させない

[News 19]

精巣腫瘍による性腺機能低下症は慢性的な健康問題と関連がある

[News 20]

心理的介入はがん再発の恐怖を軽減する