

Split-course palliative radiotherapy confirmed as effective treatment for advanced NSCLC

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Research published in the February edition of the *Journal of Thoracic Oncology* sought to assess the overall efficacy of split-course palliative chest radiotherapy (RT) for symptom relief in patients with advanced non-small cell lung cancer. Additionally, researchers investigated the impact the regimen's two-week break has on survival outcomes.

The majority of [lung cancer](#) patients present with locally advanced or stage IV disease. The primary challenge in treating these patients is that most present with poor performance status, and the benefit of treatment may be doubtful because of poor tolerance to any form of therapy. Palliative chest RT for lung malignancies has shown to be effective in relieving serious chest symptoms from tumor bleeding or mass effect on major airways, vessels and nerves. However, there is a lack of consensus for an optimal palliative RT regimen.

Researchers reviewed the medical records of 140 patients in a retrospective analysis. The team evaluated symptom relief and toxicity during and after completion of RT treatment from clinician notes and patient-reported symptom inventory forms. Then, the researchers examined the impact of the treatment regimen on survival rates. Symptomatic relief was observed in all types of chest symptoms with an extent ranging from 52-84 percent. Long-lasting symptom relief was experienced in 58 percent of patients. Therapy was well-tolerated, and toxicity was mild and transient, with grade 1 or 2 treatment-related esophagitis completely resolved during the two-week break. Furthermore, [cancer survival](#) was not adversely affected by a break in treatment.

"Balancing symptomatic relief with the side effects of radiotherapy remains a critical element of patient treatment," explains lead investigator, Su K.

Metcalf, MD, MPH of the James P. Wilmot Cancer Center at the University of Rochester. "Our selection design represents a viable option for patients who cannot tolerate continuous [radiation treatment](#) courses. Furthermore, the study's finding provides the basis for future large prospective studies that evaluate split-course palliative chest radiotherapy against other regimens.

More information: Journal of Thoracic Oncology (JTO) - journals.lww.com/jto

Provided by International Association for the Study of Lung Cancer

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