

Palliative Hypofractionated Radiotherapy in Urinary Bladder Cancer

Abd El Motaleb Mohamed¹, Ahmed Al busseiny¹, Nabila Hefzi¹, Hassan Metwally²

(1) Department of Clinical Oncology, Faculty of Medicine, Zagazig University

(2) Department of Clinical Oncology, Faculty of Medicine, Menoufia University

PAJO, June 2015, 8(2): 24-28

Abstract

Aim: Evaluation different hypofractionation dose schedules for palliation of haematuria and pelvic pain in urinary bladder cancer.

Patients and methods: Eighty patients with locally advanced and metastatic bladder cancer, were divided into 4 arms, Each group had 20 patients as the following ,arm A 30 Gy with fraction size 3 Gy in 10 fractions, five days/week, Arm B 20 Gy with fraction size 4 Gy in 5 fractions, five days/ week, Arm C 21 Gy with fraction size 7 Gy in 3 fractions, day after day in 1 week, and Arm D 8 Gy in single fraction. The primary end points were duration of such symptoms improvement and toxicity.

Results: Hypofractionated radio-therapy for palliative management of hematuria and pain from bladder cancer showed improvement and acceptable toxicities. The response to palliative radiotherapy in 4 arms showing the following the arm A complete stop of macroscopic haematuria in 75% of patients and 90% of pain with GI and GII diarrhea in 4 patients, arm B complete stop of macroscopic (gross) haematuria in 70 % and 85% of pain with GI and GII diarrhea in 3 patients, in arm C complete stop of macroscopic haematuria in 78 % and 85% of pain with GI and GII diarrhea in 4 patients and in arm D complete stop of macroscopic haematuria in 65 % and 75% of pain with GI and GII diarrhea in 3 patients from our results the 4 arms are nearly similar in toxicities and more in response in arm A and C without statistical significance.

Conclusion: Hypofractionated radiotherapy is effective to alleviate tumor-related pain and hematuria with acceptable toxicities and decrease burden in patients and machines.