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## POSTER

**Adjuvant radiotherapy in patients with stages I and II of endometrial carcinoma. Results of 215 cases**

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**Purpose:** To evaluate the results of the adjuvant radiotherapy treatment in stages I-II (PTNM- UICC) of endometrial carcinoma, previously treated with total (abdominal hysterectomy and bilateral salpingo-oophorectomy (TAH-BSO) or TAH-BSO and sample of pelvic nodes (TAH-BSO-SL).

**Methods:** From 1978 to 1995, 215 patients were diagnosed of endometrial carcinoma in stage I (160 patients) and in stage II (55 patients). The median age was 61 years old (range 31-84). The histology was in 199 patients of adenocarcinoma and in 16 patients of adenosquamous carcinoma. The histologic grade were: G1 = 89, G2 = 80, G3 = 26 and GX = 20. 168 patients were treated with TAH-BSO and 47 with TAH-BSO-SL and subsequently treated with external radiotherapy exclusively (18 patients), external radiotherapy and intracavitary insertion (180 patients) or intracavitary insertion exclusively (17 patients). The median follow-up was 63 months

**Results:** Disease free survival for all the patients (stage I and II) at 5-10 years was 92%-86% respectively with a confidence interval (CI) of 95%. For the stage I the disease free survival at 5-10 years was 94%-87% (CI of 95%), and for the stage II 84%-84% (CI of 95%). A multivariate analysis will be made.

**Conclusion:** Adjuvant radiotherapy provides and excellent local control and survival in patients with stages I and II of endometrial carcinoma.

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## PUBLICATION

**Intraarterial chemotherapy and transcatheter embolization (TE) in treatment of advanced uterine carcinomas (UC)**

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**Aim:** To evaluate efficacy of TE and intraarterial chemotherapy (IC) of patients (pts) with UC. **Methods:** Regional IC was performed in 58 pts with advanced UC. 37 out of them had no primary clinical curability to the end of combined radiotherapy and 21 pt had local recurrences of disease. For chemoinfusion cisplatin was administered (120 mg/sqm) into femoral artery. TE was performed in 38 pts with profuse bleeding from uterine tumors. Autoclots, Ivalon, Gelfoam were used for occlusion.

**Results:** Main direct effect of regional chemoinfusion was partial tumor regression (63% of pts) Common 2-year survival was 53%. Bleeding was controlled by embolization in all pts with UC.

**Conclusion:** Intraarterial chemotherapy and transcatheter embolization are useful methods of treatment of advanced uterine carcinomas and their recurrences.

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## PUBLICATION

**The relation between heat stable alkaline phosphatase isoenzyme activity and tumour regression in cervical carcinoma**

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**Aim and Purpose:** In this study, our aim was to investigate the prognostic effect of heat stable alkaline phosphatase isoenzyme (HSAP) activities in serum of 51 patients with cervical squamous cell carcinoma treated by combined radiotherapy and surgery or radiotherapy alone.

**Methods and Materials:** Serum activities of HSAP and alkaline phosphatase (AP) were measured before and at the end of radiotherapy, and three months after the completion of radiotherapy. The results were compared with those obtained from twenty healthy women within a comparable age group. The relation between the changes in the activity of HSAP and the changes in tumour volume was studied.

**Results:** There were significant differences ( $p = 0.007$ ) in AP activities between control group and cancer patients. However there were no significant differences in HSAP activities between control group and cancer patients.

It was found that there was a significant relation ( $p = 0.005$ ) between the variance in the HSAP activity and reduction of tumour volume.

**Conclusion:** HSAP activity reduced with tumor regression in our study.

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## PUBLICATION

**Therapy of cervical cancer and improvement of treatment results during the past 40 years at the gynaecological clinic of Pécs, Hungary**

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**Purpose:** Analysing of data of patients with cervical cancer at Gynaecological Clinic of Pécs in a 40 years' period.

**Patients and Treatment:** Between 1952-1992 the total number of patients was 5796. A total 186 Schauta and 178 Wertheim operations were done and patients could not be operated on received LDR brachytherapy and external beam irradiation.

**Results:** The treatment results could be evaluated in the cases of 3706 patients. The previous 5 years disease free survival (DFS) rate of 55% has risen to 61.7% by the end of the 1980's. Looking at the whole period 5 years DFS could be achieved in 58.6% of cases. The 5 years (DFS) rate was much worse in cases of adenocarcinomas and anaplastic tumours (49% and 38% respectively).

**Conclusion:** Treatment results could be further improved by the extension of the screening and by the widespread use of a HDR after loading apparatus and a high energy accelerator unit.

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## PUBLICATION

**Cervical tumors: Stages of the disease, level of differentiation, presence of HPV and loss of heterozygosity**

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**Purpose:** In total 86 patients with squamous cell carcinomas of cervix were divided in few groups according to the stage of the disease and level of differentiation.

**Methods:** DNA from tumor samples as well as from adjacent normal tissues were checked for the presence of human papilloma virus sequences (HPV) by type specific PCR and loss of heterozygosity (LOH) on both arms of chromosome 6 by microsatellite technique.

**Results:** HPV genome sequences were detected in 90% samples from tumors. The prevalent was HPV 16. HPV 18 were detected only in few cases, in adjacent normal tissue the finding of HPV sequences was lower. LOH was detected in 23% of total specimens in region 6 p 21.2. With 2 other primers (one on the same arm and the second on 6q) LOH positivity was less than 10%, and with 2 additional primers on both arms LOH was not detected.

**Conclusion:** Virus sequences were revealed at all stages of the disease and independent of tumor differentiation. Level of differentiation did not influence the frequency of LOH, but positivity in LOH finding was lower in tumors on early stages of the disease and increased on later stages (especially in patients with metastasis).

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## PUBLICATION

**Phase II study of carboplatin based chemotherapy in combination with medroxyprogesterone acetate (MPA) in advanced endometrial cancer**

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The purpose of the study was to evaluate the efficacy and toxicity of the combination of carboplatin 300 mg/m<sup>2</sup>, methotrexate 30 mg/m<sup>2</sup> and 5 FU 500 mg/m<sup>2</sup> given on D1, i.v., every 3 weeks, for 6 cycles, with MPA 300 mg daily, p.o.s, until progression. Eligible patients had expected survival  $\geq 3$  months, p.s  $\leq 1$  and measurable or evaluable disease. Tumor response was evaluated every 2 cycles. 22 pts entered the study. 21 were evaluable for response. Complete and partial responses were achieved in 2 (9%) and 16 (76%) pts, respectively, for an overall response rate of 85% (95% C.I.: 70%-99%). Both CRs were in the lung. The TTP was 11 m (7-42+ m). The OS was 21 m (2-72 m). The regimen was well tolerated. The most common side effects were Leukopenia G1-2 in 6, Anaemia G1 in 5,