

A retrospective assessment of current practice for palliative radiotherapy for soft tissue sarcomas in South East Scotland 2014-2019

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Aim

To assess current practice for patients with soft tissue sarcomas (STS) managed with palliative radiotherapy in South East Scotland.

Background

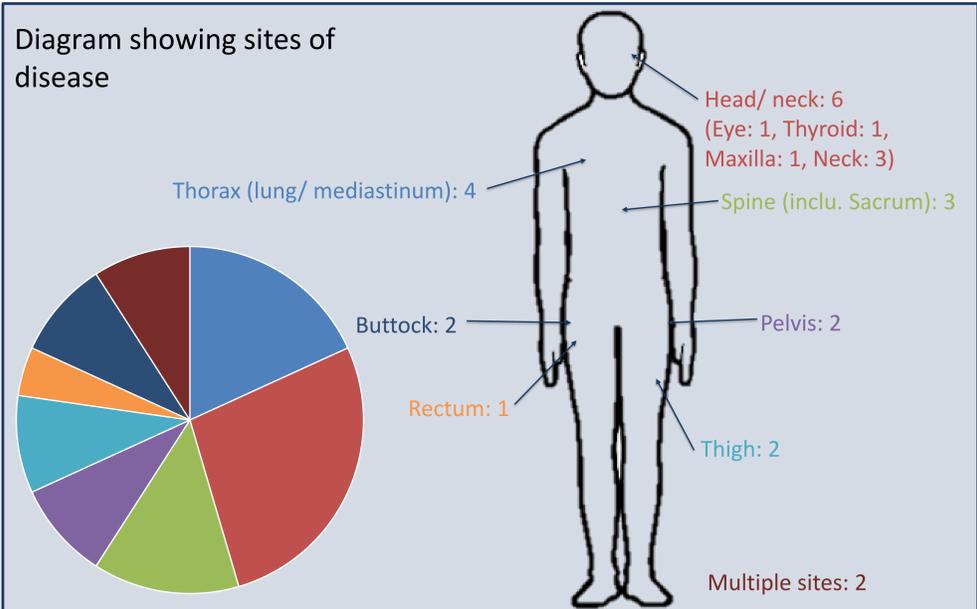
STS are a rare group of cancers. Patients with locally symptomatic disease, or unsuitable for curative management, may receive palliative radiotherapy. The Royal College of Radiology recommend 30-day mortality in palliative radiotherapy as an indicator of avoidable harm, also used in audit at other centres (1,2). We set a standard of <10%.

Methods

We included all patients with details of palliative radiotherapy for STS from the South East Scotland Cancer registry 2014-2019.

Results

Of 296 patients, 22 received palliative radiotherapy. 15 female: 7 male. Median age at diagnosis: 71 years (range 33-87). The most frequent histological subtypes were leiomyosarcoma (5/22) and undifferentiated (5/22). The most common site of disease was head/ neck; including thyroid, eye, maxilla and neck (27%, 6 patients).



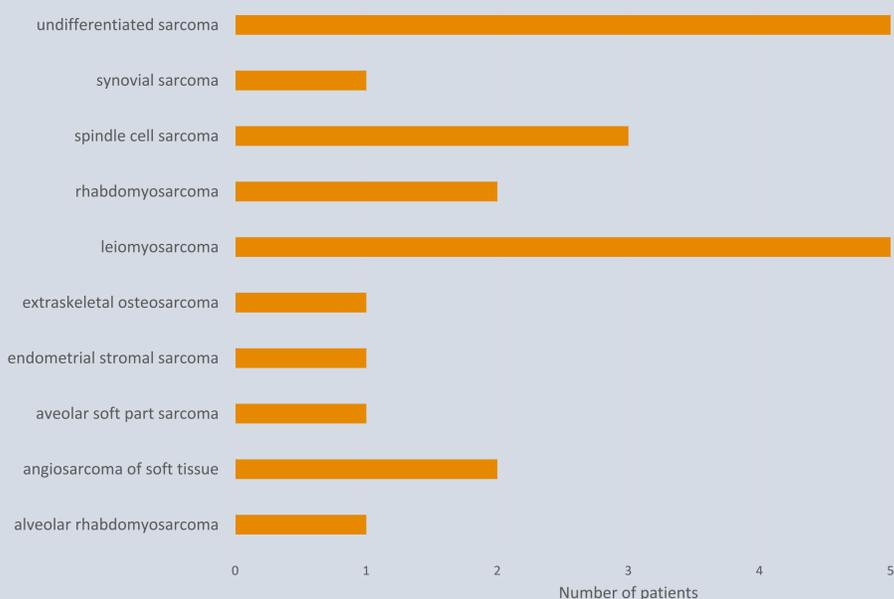
Median time from diagnosis to treatment was 1 month (range 0-8). 17 patients received radiotherapy only. 5 also received chemotherapy, with 2 requiring initial emergency chemotherapy. The most common radiotherapy dose was 3000Gy in 10 fractions (36%).

30-day mortality rate (from treatment commencing) was 9.1% (2 patients). No patients receiving >10 fractions died within 30 days. 20 patients subsequently died, 2 remain in follow-up (17 and 36 months). Median time from treatment commencing to death: 7 months (range 0-30).

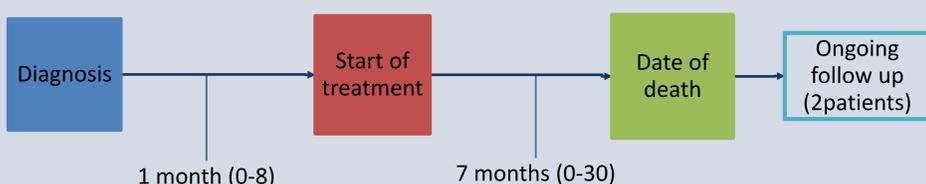
Conclusion

30-day mortality rate was <10% and currently meeting our standard of care. Both patients who died within 30 days received 20Gy in 5 fractions. We recommend patients with poor prognosis be considered for single fraction treatment. As data is slowly accrued assessment of individual cases should be ongoing.

Histological subtypes



Timeline of median patient journey



References