

# **Best practice examples**Head & Neck cancers

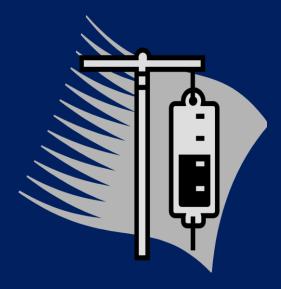


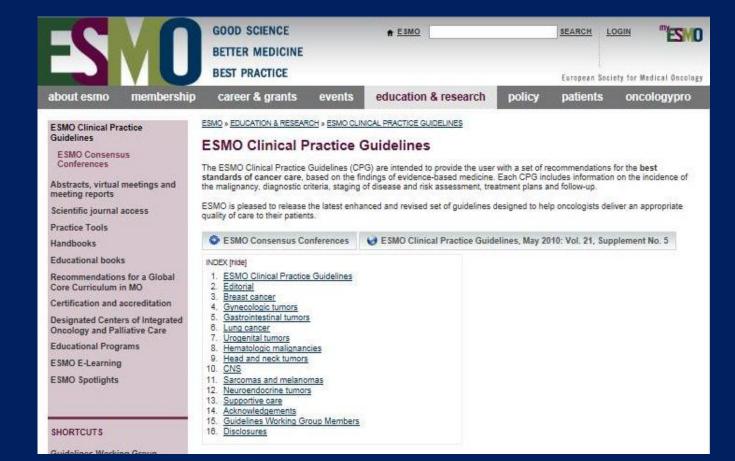












www.esmo.org

### ESTRO\*

ESTRO Congress Bidding Guidelines>>>

Upcoming early registration deadlines:

WRT & Other Conformal ... 5 March

Target Valume Betermination 9 March

Advanced Treatment Planning 16 March >>
BT for Prostate Concer 18 March >>

#### Welcome to ESTRO

founded in 1980, ESTRO exists to advance all aspects of adiation oncology through a range of activities for its members and the wider healthoare and patient communities.

STRO promotes excellence through education, professional development, promotion of research and dissemination of outcomes, courses and conferences. ESTRO is focused on improving all aspects of patient care and supports the role of radiation oncology in the multimodality treatment of cancer.

The ESTRO Radiotherapy Information Centre is an open scoess resource with sections for patients, health professionals, journalists and researchers as well as data on sancer and its treatment across Europe.



www.estro.org

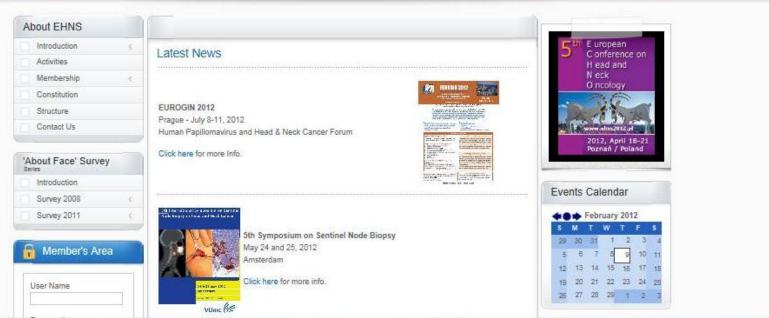


### European Head & Neck Society





Home Congresses Courses National Societies Events



www.ehns.org

Annals of Oncology 21 (Supplement 5): v184–v186, 2010 doi:10.1093/annonc/mdq185

## Squamous cell carcinoma of the head and neck: EHNS-ESMO-ESTRO Clinical Practice Guidelines for diagnosis, treatment and follow-up

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On behalf of the EHNS-ESMO-ESTRO Guidelines Working Group\*

### clinical practice guidelines

Annals of Oncology 21 (Supplement 5): v187–v189, 2010 doi:10.1093/annonc/mdq186

### Nasopharyngeal cancer: EHNS-ESMO-ESTRO Clinical Practice Guidelines for diagnosis, treatment and follow-up

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On behalf of the EHNS-ESMO-ESTRO Guidelines Working Group\*

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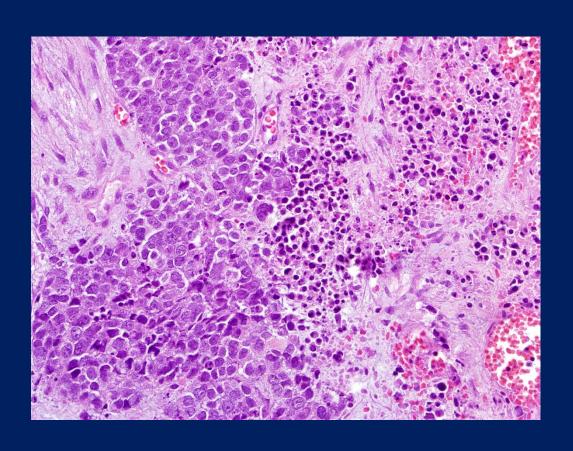
<sup>&</sup>lt;sup>1</sup>Department of Radiation Oncology, St-Luc University Hospital, Brussels, Belgium; <sup>2</sup>Department of Head and Neck Surgery, Centre Oscar Lambret, Lille, France; <sup>3</sup>Medical Oncology Head and Neck Unit, Istituto Nazionale dei Tumori, Milan, Italy; <sup>4</sup>Medical Oncology Service, Vall d'Hebron University Hospital, Barcelona, Spain

### diagnosis

Pathological diagnosis should be made according to the World Health Organization classification from a surgical biopsy sample.

Routine staging includes physical examination, chest X-ray, head and neck endoscopy, and head and neck computed tomography (CT) scan or magnetic resonance imaging (MRI). MRI is the preferable staging procedure for every tumour subsite except laryngeal and hypopharyngeal cancers. A thoracic CT scan may be performed to rule out metastatic disease and or second lung primaries. The role of 2-[<sup>18</sup>F]fluoro-

The role of induction chemotherapy (ICT) has been reconsidered since the introduction of taxane–platinum-based (TPF) combinations that have proved to be superior to platinum–fluorouracil PF schedule in loco-regionally advanced disease [I, A]. However, at present, induction chemotherapy is not considered standard treatment in advanced disease. ICT followed by RT-CT (so-called sequential CT-RT) is still under evaluation. The overall toxicity of this approach can be substantial thus compromising the final result.



resectable patients [I, A]. Radiotherapy given concomitantly with cetuximab has demonstrated a higher response rate, longer disease-free progression and longer overall survival versus radiotherapy alone [II, B]. There is no formal comparison between the combination of radiotherapy with cisplatin or cetuximab. In this context the therapeutic decision is difficult to take. However, it should be considered that results of concomitant chemoradiation are based on thousands of patients, that this combination is associated with significant toxicity and that its efficacy in the elderly population is questioned. On the other hand results of cetuximab + radiation are based on 200 patients, the magnitude in effect was similar or even better than that achieved by concomitant chemoradiation, it proved to be less toxic and the benefit in the elderly subgroup is also questioned.



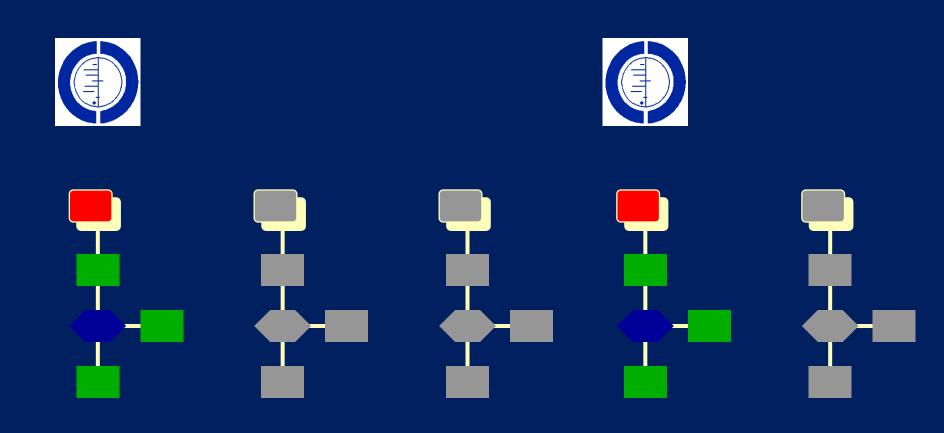
#### JOURNAL OF CLINICAL ONCOLOGY

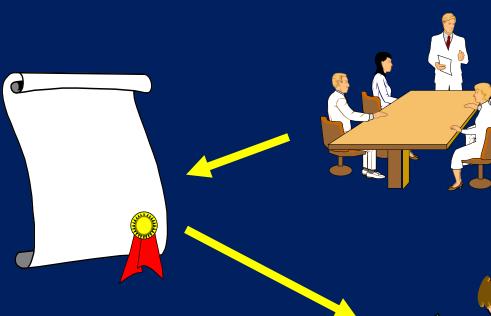
#### ASCO SPECIAL ARTICLE

### American Society of Clinical Oncology Clinical Practice Guideline for the Use of Larynx-Preservation Strategies in the Treatment of Laryngeal Cancer

David G. Pfister, Scott A. Laurie, Gregory S. Weinstein, William M. Mendenhall, David J. Adelstein, K. Kian Ang, Gary L. Clayman, Susan G. Fisher, Arlene A. Forastiere, Louis B. Harrison, Jean-Louis Lefebvre, Nancy Leupold, Marcy A. List, Bernard O. O'Malley, Snehal Patel, Marshall R. Posner, Michael A. Schwartz, and Gregory T. Wolf

# The "grey zone" of evidence-based medicine



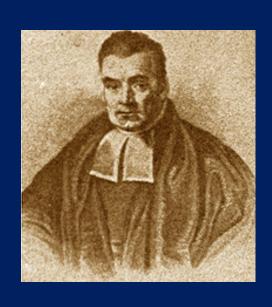


# international evidence-based consensus



willingness to pay

# Bayesian approaches to summarizing evidence?



$$P[A|B] = P[A] \times \frac{P[B|A]}{P[B]}$$



