AIM

To assess the outcome of the cervical cancer patients treated with extended field radiotherapy and concurrent weekly chemotherapy followed by brachytherapy.

Various prognostic factors in these patients were also studied to determine their role in the outcome.

STAGE

<table>
<thead>
<tr>
<th>Stage</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>IIB</td>
<td>23</td>
</tr>
<tr>
<td>IIIA</td>
<td>0</td>
</tr>
<tr>
<td>IIIB</td>
<td>4</td>
</tr>
</tbody>
</table>

CONCLUSION

Cervical cancer patients harbouring para-aortic nodes can be effectively treated with extended field radiation and concurrent weekly platinum based radiotherapy.

DISCUSSION

The complete local response rate of 85% seen in our study is less than that seen in similar studies by Sood et al (92%) but better than the overall response rate of 62% in the RTOG trial.

Our 3 year survival rate can be compared to the study by Goodman et al which reported the results of a number of studies demonstrating an overall survival of 30% to 40% in cervical cancer patients with para aortic nodes.

Similar to our study, Vigliottiet al also noted that 5 year survival rate for patients with no residual disease after treatment was 50% compared to 23% with moderate size residual disease and 0% for gross residual disease.

REFERENCES