

Advanced Anal Squamous Cell Carcinoma – Radiotherapy or Surgery?

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Abstract

Background: Anal and rectal cancers occupy the third position of death causes in Poland. Adenocarcinoma is the most frequent among the tumours in this group. Squamous cell carcinoma can be relatively less common. This kind of carcinoma may rather affect the anus than the rectum. Although the lesion is perceived as not very malignant and as such responsive to radiant energy therapy, some cases may require surgical treatment.

Methods: Within 1999-2008 (the observation period of 10 years) there were 18 patients treated for anal squamous cell carcinoma at the Department of Thoracic Surgery, General and Oncological Surgery of the Medical University of Lodz, at the Surgical Department of the Ministry of Interior and Administration Hospital in Lodz and at the Teleradiotherapy Department of Mikolaj Kopernik Voivodship Specialist Hospital in Lodz. Each patient underwent radiochemotherapy with Mitomycin and 5-Fluorouracil and Lucovorin. The applied radiation doses ranged between 45-54 Gy in eighteen 2.0 Gy fractions. The abdomino-perineal resection of the rectum (APR) was performed in 3 patients (16.5%) who did not show full regression of the carcinoma. In all three cases the histopathological diagnosis preceded the surgical procedure.

Results: For the total number of 18 patients with anal squamous cell carcinoma the mean observation period was 5.5 years, in the group of the operated patients the mean survival rate was 48 months (the median of 14-74 months) while for the group of the patients treated conservatively the mean survival rate amounted to 55 months (the median of 17-82 months, $p=0.23$). The mean 5-year disease-free survival rate was rather similar to the same rate of the general group, whereas the post-operative complications occurred in 66% of surgical procedures and 27% of teleradiotherapeutic procedures.

Conclusions: Combined radiotherapy and chemotherapy can be the method of choice in treating anal squamous cell carcinoma. Surgery should be used in advanced cases, when complete regression on radiochemotherapy cannot be observed. The abdomino-perineal resection of the rectum is the kind of a procedure that may be accompanied with a vast number of complications. Nevertheless, it still remains a necessary therapeutic method in the described cases.

Key words: anal carcinoma, APR, radiotherapy, advanced anal squamous cell carcinoma

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