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# 三维适形放疗配合腔内后装治疗宫颈癌的 效果

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Effect of Three Dimensional Conformal Radiotherapy Combined with Intracavitary Brachtherapy in Treatment of Cervical Cancer

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摘要 目的探讨三维适形放疗配合腔内后装治疗宫颈癌的临床疗效及放疗并发症。方法60例宫颈癌随机分 为两组。适形组30例采用6MVX线适形放疗,全盆腔DT40Gy后重新定位,重新作治疗计划继续照射至50Gy,有 局部宫旁残留者缩野推量到60Gy。腔内后装治疗A点总剂量30Gy/5次。常规组30例则采用全盆腔放疗40Gy 后改为盆腔四野照射10Gy,有局部宫旁残留者缩野推量到60Gy。腔内后装治疗A点总剂量(30~36)Gy/( 5~6)次。两组均作同期化疗。 结果适形组和常规组1、2、3年生存率分别为96.7%、93.3%、90.0%和 86.6%、76.7%、70%(P=0.04、P=0.02和P=0.02), 差异有统计学意义。两组不良反应比较,适形组 I ~Ⅱ 级放射性膀胱炎、直肠炎及盆腔纤维化发生率低于常规组(P=0.007、P=0.006和P=0.003)),其他不良反应 相似。 结论全程三维适形放疗配合腔内后装治疗加同期化疗是治疗宫颈癌的有效肯定的方法,能提高近 期生存率,晚期并发症较常规放疗低。

关键词: 关键词:宫颈癌 体外照射 三维适形放疗 腔内后装治疗 化疗

Abstract: ObjectiveTo explore the effect and complications of all course three dimensional conformal radiotherapy(3DCRT) combined with intracavitary brachytherapy in the treatment of cervical cancer. MethodsSixty cervical cancer patients were randomly divided randomly into two groups. First, all patients accepted 3D conformal radiotherapy in the 3DCRT group, when whole pelvic received 40Gy, a planning CT scan of each patient was obtained. And second 3DCRT therapy plans were taken. Then continued to irradiate with 50Gy. Finally, 3DCRT boost local involved volumes to the total dose of 60Gy. When 3DCRT combined with intracavitary branchtherapy, the dose of branchytherapy to point A was 30Gy/5fraction. In the conventional group after a total tumour dose of 40Gy was delivered by whole pelvic irradiation, the four-field technique was used to irradiate the parametrial tissue and regional nodes (median dose of 10Gy), the invovived volumes were boosted to 60Gy and combined with intracavitary branchtherapy, (the dose of branchytherapy to point A was (30~36)Gy/(5~6)fraction). In two groups two cycle chemotherapy were given concurrently with radiotherapy in the first week and the last week, respectively. ResultsThe 1,2,3-year survival rate for 3DCRT group and conventional group were 96.7%,93.3%,90.0% and 86.6%, 76.7%, and 70% respectively (P=0.04, P=0.02 and P=0.02). There was significant difference. The toxic effects were compared in two group, except the  $m I \sim II$  grade rectal and bladder reaction and pelvic fibrosis which was lower in the 3DCRT group (P=0.007,P=0.006 and P=0.015), the side effects were similar and well tolerated in two groups. ConclusionThe all course three dimensional conformal radiotherapy combined with intracavitary brachytherapy can be considered as an effective and feasible approach to cervical cancer and may significantly improve the survival rate and reduce the late

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