

# CT引导下三管式腔内后装与腔内结合插植后装用于宫颈癌治疗的对比研究

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**Title:** A comparative study of the CT-guided three tube intracavitary brachytherapy and intracavitary/interstitial brachytherapy for cervical cancer

**作者:** 郑斯明; 白玉海; 刘晓东; 李民英; 雷风; 李珍  
中山市人民医院放疗科, 广东 中山 528403

**Author(s):** Zheng Siming; Bai Yuhai; Liu Xiaodong; Li Minying; Lei Feng; Li Zhen  
Department of Radiotherapy, Zhongshan City People's Hospital, Guangdong Zhongshan 528403, China.

**关键词:** 宫颈癌; 三维腔内后装; 腔内; 组织间插植; 剂量学

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**摘要:** 目的: 比较局部晚期宫颈癌采用标准三管施源器的腔内后装(tandem and ovoid)与腔内结合组织间插植后装的剂量学差异。方法: CT引导下的三维适形近距离治疗局部晚期宫颈癌患者20例, 间隔采用三管式腔内后装与腔内结合组织间插植共72次。按照施源器的不同分成2个组, 每组36次, 对靶区剂量、危及器官等进行比较。结果: 在给予A点相同处方剂量的情况下, HR-CTV D90、D100在三管式腔内后装组与腔内结合组织间插植后装组中分别为 $(590.0\pm46.4)$  cGy、 $(471.2\pm66.2)$  cGy,  $(502.8\pm67.7)$  cGy、 $(335.9\pm46.0)$  cGy,  $P < 0.05$ , 膀胱、直肠、乙状结肠D2cc均相近( $P=0.85$ 、 $0.28$ 、 $0.53$ )。结论: 采用腔内结合插植后装治疗局部晚期宫颈癌比三管式腔内后装可获得更高的靶区剂量, 但长期疗效及晚期反应仍需进一步研究。

**Abstract:** Objective: To investigate the dosimetric differences between the three tube intracavitary brachytherapy(tandem and ovoid) and the intracavitary/interstitial(IC/IS)brachytherapy for locally advanced cervical cancer.Methods: Twenty patients with locally advanced cervical cancer were treated with CT-guided 3D conformal brachytherapy.The intracavitary brachytherapy and the IC/IS brachytherapy were used interchangeably for 72 cycles.Patients were divided into two groups according to the type of technique.Each group received 36 cycles of treatment.Dosimetric difference in the planning for clinical target and OAR was compared.Results: Gaving point A same prescription dose,HR-CTV D90,D100 was  $(590.0\pm46.4)$  cGy,  $(471.2\pm66.2)$  cGy in intracavitary brachytherapy group and IC/IS brachytherapy group were  $(502.8\pm67.7)$  cGy,  $(335.9\pm46.0)$  cGy, $P < 0.05$ .The average D2cc values for the bladder,rectum and sigmoid were similar ( $P=0.85,0.28,0.53$ ).Conclusion:IC/IS brachytherapy shows a significant dosimetric advantage compared with intracavitary brachytherapy.However,the long term curative effect and toxicity need to be further investigated.

## 参考文献/REFERENCES

- [1] Erickson B, Albano K, Gillin M. CT-guided interstitial implantation of gynecologic malignancies [J]. International Journal of Radiation Oncology Biology Physics, 1996, 36(3):699-709.
- [2] Nomden CN, Leeuw AACD, Moerland MA, et al. Clinical use of the utrecht applicator for combined intracavitary/interstitial brachytherapy treatment in locally advanced cervical cancer [J]. International Journal of Radiation Oncology Biology Physics, 2012, 82(4):1424-1430.
- [3] Assenholt MS, Vestergaard A, Kallehauge JF, et al. Proof of principle: Applicator-guided stereotactic IMRT boost in combination with 3D MRI-based brachytherapy in locally advanced cervical cancer [J]. Brachytherapy, 2014, 13(4):361-368.
- [4] LIU ZS, ZHAO YZ, GUO J, et al. Dosimetry and short term effect compareson of CT-guided interstitial brachytherapy and intracavitary brachytherapy for locally advanced cervical cancer [J]. Journal of Chin J Radiat Oncology, 2017, 26(5): 550-554. [刘忠山,赵杨祉,郭杰,等. CT引导下局部晚期宫颈癌组织间插植近距离治疗剂量学分析 [J]. 中华放射肿瘤学杂志, 2017, 26(5):550-554.]
- [5] Potter R, Haie-Meder C, Van LE, et al. Recommendations from gynaecological (GYN) GEC ESTRO working group (II): Concepts and terms in 3D image-based treatment planning in cervix cancer brachytherapy?

rachytherapyTRO working group (II):Concepts and terms innatomy,radiation physics [J] .Radiotherapy & Oncology,2006,78(1):67-77.

[6] Viswanathan AN,Dimopoulos J,Kirisits C,et al.Computed tomography versus magnetic resonance imaging-based contouring in cervical cancer brachytherapy:Results of a prospective trial and preliminary guidelines for standardized contours [J] .International Journal of Radiation Oncology Biology Physics,2007,68(2):491-498.

[7] Hegazy N,Potter R,Kirisits C,et al.High-risk clinical target volume delineation in CT-guided cervical cancer brachytherapy:Impact of information from FIGO stage with or without systematic inclusion of 3D documentation of clinical gynecological examination [J] .Acta Oncologica,2013,52(7):1345-1352.

[8] Menon G,Huang F,Sloboda R,et al.Practically achievable maximum high-risk clinical target volume doses in MRI-guided intracavitary brachytherapy for cervical cancer:A planning study [J] .Brachytherapy,2014,13(6):572-578.

[9] Ribeiro I,Janssen H,Brabandere MD,et al.Long term experience with 3D image guided brachytherapy and clinical outcome in cervical cancer patients [J] .Radiotherapy & Oncology Journal of the European Society for Therapeutic Radiology & Oncology,2016,120(3):447-454.

[10] Freitas PDM,Grossi MD,De ATL,et al.Predicting the necessity of adding catheters to intracavitary brachytherapy for women undergoing definitive chemoradiation for locally advanced cervical cancer [J] .Brachytherapy,2018,7(6):935-943.

[11] Franziska W,Cornelius M,Schüttrumpf Lars,et al.Combined intracavitary and interstitial brachytherapy of cervical cancer using the novel hybrid applicator Venezia:Clinical feasibility and initial results [J] .Brachytherapy,2018,17(5):775-781.

[12] Otter S,Coates A,Franklin A,et al.Improving dose delivery by adding interstitial catheters to fixed geometry applicators in high-dose-rate brachytherapy for cervical cancer [J] .Brachytherapy,2018,17(3):580-586.

[13] Kirisits C,Lang S,Dimopoulos J,et al.The Vienna applicator for combined intracavitary and interstitial brachytherapy of cervical cancer:design,application,treatment planning, and dosimetric results [J] .International Journal of Radiation Oncology Biology Physics,2006,65(2):624-630.

[14] Nam H,Park W,Huh SJ,et al.The prognostic significance of tumor volume regression during radiotherapy and concurrent chemoradiotherapy for cervical cancer using MRI [J] .Gynecologic Oncology,2007,107(2):320-325.

[15] Bishan B,Swapnendu B,Bikramjit C,et al.Clinical investigations:A comparison of dose distribution from Manchester-style and Fletcher-style intracavitary brachytherapy applicator systems in cervical cancer [J] .Journal of Contemporary Brachytherapy,2012(4):213-218.

[16] ZHAO HF,HAN DM,CHENG GH,et al.A comparative study of Utrecht interstitial applicator and ring interstitial applicator in three - dimensional conformal brachytherapy for cervical cancer [J] .Journal of Chin J Radiat Oncology,2016,25(4):362-366. [赵红福,韩东梅,程光惠,等.宫颈癌三维适形近距离治疗腔内联合插植施源器对比研究 [J] .中华放射肿瘤学杂志,2016,25(4):362-366.]

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