head and neck cancer

THE EFFECT OF PREOPERATIVE CHEMOTHERAPY WITH S-1 ALONE FOR ORAL SQUAMOUS CELL CARCINOMA PATIENTS

M. Nakazawa1, T. Imai1, I. Kato1, M. Ohmae2, T. Sumi1, A. Niki1, M. Suematsu3, Y. Matsumoto3, K. Amino4
1Oral & Maxillofacial Surgery, Osaka University, Suita, JAPAN
2Oral & Maxillofacial Surgery, Rinku General Medical Center, Izumisano, JAPAN
3Oral & Maxillofacial Surgery, Meiwa Hospital, Nishinomiya, JAPAN
4Oral & Maxillofacial Surgery, Nishinomiya Municipal Central Hospital, Nishinomiya, JAPAN

Aim: We carried out S-1 monotherapy for oral squamous cell carcinoma (OSCC) patients during the period between histological diagnosis and surgery. The object of this therapy is to inhibit progression of disease until definitive surgery, but many cases obtained good response being better than PR. We retrospectively investigated the antitumor effect and adverse effects of preoperative S-1 monotherapy for OSCC.

Table: 1017P

<table>
<thead>
<tr>
<th></th>
<th>NC</th>
<th>PR</th>
<th>CR</th>
</tr>
</thead>
<tbody>
<tr>
<td>local recurrence</td>
<td>13.6</td>
<td>9.1</td>
<td>4.2</td>
</tr>
<tr>
<td>regional metastasis</td>
<td>18.6</td>
<td>18.2</td>
<td>0%</td>
</tr>
</tbody>
</table>

Methods: 105 fresh cases with stage I-IV OSCC patients were enrolled in this study. Patients consisted of T1:26, T2:64, T3:7 and T4:8 cases. S-1 was administered at 80mg/m²/day by a regimen of two-week application and one-week rest, and followed by definitive surgery. Clinical response was examined by clinical findings and/or CT, and histological effects were evaluated with surgical specimens.

Results: Median administration period was 14 days (2-56 days), and median total dosage was 1680 mg (160-6720mg). The histological response rate was 43.8% and CR rate was 20.9%. The response rate including CR + PR (CR rate) by T stage was T1:46.2(26.9), T2:45.3(23.4), T3:57.2(14.3) and T4:12.5(12.5)%. 98 patients accepted definitive surgery, but 7 patients who obtained clinical CR accepted only biopsy. The rate of local recurrences and late regional lymph node metastases according to chemotherapy effect was as follows for at least 2 years follow-up. Local and regional recurrence rate was 0% in T1/2 cases. There was a tendency that effective cases showed good prognosis in T3/4 cases. Toxicities more than grade 3 were not observed, and did not prevent subsequent surgery.

Conclusions: Preoperative S-1 monotherapy was useful for OSCC patients, especially T1/2 cases, because of effective antitumor activity and acceptable toxicity. Effective cases showed good prognosis.

Disclosure: All authors have declared no conflicts of interest.

© European Society for Medical Oncology 2014, Published by Oxford University Press on behalf of the European Society for Medical Oncology. All rights reserved. For permissions, please email: journals.permissions@oup.com.