

Combination of Chemotherapy and Radiotherapy in the Treatment of Cervical Cancer

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There have been no major improvements in the treatment of locally advanced cervical cancer in the past 40 years. Strategies involving combination of chemotherapy and irradiation have been explored to improve the outcome of radiotherapy. The aims are to overcome radioresistance as a cause of local treatment failure and to eradicate distant micrometastases as a cause of systemic treatment failure. The available data has showed (1) no significant benefit for neoadjuvant chemotherapy, (2) a significant improvement in the locoregional control as well as the overall and progression free survival following concomitant chemoradiation, and (3) a significantly longer survival for the combination of chemoradiation and adjuvant chemotherapy. Despite these findings, many questions remain to be answered. The optimal regimens, drugs and schedules are uncertain. The recommendation of adding cisplatin to the current radiotherapy regimen as a standard treatment appears premature. Further randomized studies are required to confirm the role and to establish the optimal regimens and schedules for the delivery of chemotherapy when combined with radiotherapy. (HKJGOM 2000; 1:50-57)

Keywords : Chemotherapy, Radiotherapy, Chemoradiation, Cervical cancer
