CHEMOTHERAPY

Cisplatin more effective when given less often

Cervical cancer is one of the most common gynecologic malignancies. If caught early, patients have a favorable prognosis with over 80% living beyond 5 years; however, for those diagnosed with advanced-stage disease the prognosis is very poor. For nonresectable tumors, the standard therapy is cisplatin-based chemoradiotherapy. Previous trials have used cisplatin either weekly or triweekly (every 3 weeks); however, the optimum cisplatin dose and schedule is unknown. Now, Ryu *et al.* show that triweekly cisplatin given with radiotherapy is more effective.

In this open-label randomized phase II trial, 104 patients with cervical cancer were randomized to receive six cycles of weekly cisplatin or three cycles of triweekly cisplatin. Both regimens were well tolerated. Grade 3 or 4 neutropenia was higher in the weekly cisplatin arm but there were no notable differences in other toxic effects. Importantly, the overall 5-year survival rate was significantly higher in patients receiving triweekly cisplatin compared with the weekly regimen (88.7% versus 66.5%). The progression-free survival and recurrence rates were similar for both arms. A phase III trial is currently ongoing to test this regimen. Ryu concludes, “this study is the first to report that triweekly cisplatin 75 mg/m² chemotherapy concurrent with

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radiotherapy is more effective and feasible than the conventional weekly cisplatin 40 mg/m² regimen”.

Lisa Hutchinson

Original article Ryu, S.-Y. *et al.* Randomized clinical trial of weekly vs. triweekly cisplatin-based chemotherapy concurrent with radiotherapy in the treatment of locally advanced cervical cancer. *Int. J. Radiat. Oncol. Biol. Phys.* doi:10.1016/j.ijrobp.2011.05.002