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**Hematologic toxicity in anal cancer patients during combined chemo-radiation: a radiation oncologist perspective**

**This is the author's manuscript**

*Original Citation:*

*Availability:*

This version is available <http://hdl.handle.net/2318/1632323> since 2017-04-14T15:33:12Z

*Published version:*

DOI:10.1080/14737140.2017.1288104

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This is the author's final version of the contribution published as:

Franco, Pierfrancesco; Arcadipane, Francesca; Ragona, Riccardo; Mistrangelo, Massimiliano; Cassoni, Paola; Racca, Patrizia; Morino, Mario; Numico, Gianmauro; Ricardi, Umberto. Hematologic toxicity in anal cancer patients during combined chemo-radiation: a radiation oncologist perspective. *EXPERT REVIEW OF ANTICANCER THERAPY*. 17 (4) pp: 335-345.  
DOI: 10.1080/14737140.2017.1288104

The publisher's version is available at:

<https://www.tandfonline.com/doi/pdf/10.1080/14737140.2017.1288104>

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**Table 1. Acute hematologic toxicity in phase III randomized trials of anal cancer patients**

Author	Year	Randomization	Pts	CHT	RT technique	Boost strategy	HT scoring scale	≥G3 HT
Flam et al. RTOG 8704/ECOG 1289	1996	RT-CHT	145	5-FU	AP/PA	Sequential	NCI	G4-G5: 3%
		vs.  RT-CHT	146	5-FU/MMC				vs. 18%
UKCCCR  ACT I	1996	RT alone	290	None	AP/PA	Sequential	NA	No grading available
		vs.  RT-CHT	295	5-FU/MMC	Boost: electrons, photons, <sup>192</sup> Ir implants			WBC < 1,000/ul  0% (RT) vs. 2% (RT-CHT)  Plt < 25,000/μl  0% (RT) vs. 2% (RT-CHT)
Bartelink et al. EORTC 22861	1997	RT alone	52	None	AP/PA	Sequential	WHO	NA
		vs.  RT-CHT	51	5-FU/MMC	Boost: electrons, photons, <sup>192</sup> Ir implants			
Ajani et al.  RTOG 98-11	2008	RT-CHT	341	5-FU/MMC	AP/PA	Sequential	CTCAE v2.0	Overall:  61%
		vs.  RT-CHT	341	5-FU/DDP	AP/PA + paired laterals  PA + laterals  Direct perineal boost:  electrons, photons			vs. 42%
Peiffert et al.  ACCORD 03	2012	ICHT + RT-CHT (standard boost)	75	5-FU/DDP	AP/PA	Sequential	CTCAE v3.0	Overall:  29% (ICT arms)
		vs.  ICHT + RT-CHT (intensified boost)	75	5-FU/DDP	Four-field box technique			vs.  19% (RT-CT arms)
		vs.  RT-CHT (standard boost)	82	5-FU/DDP	Boost: electrons, photons, <sup>192</sup> Ir implants			
		vs.  RT-CHT (intensified boost)	75	5-FU/DDP				
James et al.  ACT II	2013	RT-CHT	246	5-FU/MMC	Four-field box technique	Sequential	CTCAE v3.0	Overall:  MMC group: 26%
		vs.  RT-CHT	246	5-FU/DDP	Boost: 3DCRT			vs.

Author	Year	Randomization	Pts	CHT	RT technique	Boost strategy	HT scoring scale	≥G3 HT
		RT-CHT + maintenance CT	226	5-FU/MMC + 5FU/DDP				DDP group: 16%
		vs. RT-CHT + maintenance CT	222	5-FU/DDP + 5FU/DDP				

pts: patients; CHT: chemotherapy; RT: radiotherapy; HT: hematologic toxicity; ICHT: induction chemotherapy; 5-FU: 5-fluorouracil; MMC: mytomycin C; DDP: cisplatin; AP/PA: anterior-posterior/posterior-anterior; <sup>192</sup>Ir: iridium 192; 3DCRT: 3-dimensional conformal radiotherapy; NA: not available; NCI: National Cancer Institute; WHO: World Health Organization; CTCAE: Common Terminology Criteria for Adverse Effects; WBC: white blood cells; Plt: platelets; µl: microliter.



Author	Year	Pts	IMRT technique	Boost strategy	BM opt	CHT	HT scoring scale	G3-G4 HT
Belgioia et al.	2015	41	Helical tomotherapy	SIB	Yes (pelvic bones)	5-FU/MMC Cape	CTCAE v 3.0	Overall: 7%
Franco et al.	2016	39	VMAT	SIB	No	5-FU/MMC	CTCAE v 3.0	Leukopenia: 36% Neutropenia: 31% Thrombocytopenia: 13% Anemia: 0%
Call et al.	2016	152	Static angle 7-9 field class solution	Sequential SIB	Yes (iliac BM)	5-FU/MMC 5-FU/DDP 5-FU/DDP/Cet	RTOG CTCAE v 3.0	Overall: 41%

**Table 3. Dosimetric parameters with a correlation to hematologic toxicity in anal cancer series.**

Author	Year	Pts	Technique	CHT	Bony regions	BM def	BM opt	HT scoring scale	End point	DP increasing HT risk
Mell et al.	2008	48	Static IMRT	5-FU/MMC	Pelvic bones	CT-based	Yes (some pts)	CTCAE v 3.0	WBC, ANC nadirs	PBM-V <sub>5</sub> ,-V <sub>10</sub> ,-V <sub>15</sub> ,-V <sub>20</sub> LSBM-V <sub>10</sub> ,-V <sub>15</sub> ,-V <sub>20</sub>
Bazan et al.	2012	33	IMRT	5-FU/MMC Cape/MMC	Pelvic bones	CT-based	No	CTCAE v 3.0	≥G3 overall HT	PBM-mean dose ≥30 Gy
Cheng et al.	2014	32	IMRT	5-FU/MMC Cape/MMC	Pelvic bones	CT-based	No	CTCAE v 3.0	≥G3 overall HT	LSBM-V <sub>10</sub> > 80%
Julie et al.	2015	108	Static IMRT	5-FU/MMC Cape/MMC	Pelvic bones	CT-based	No	CTCAE v 4.0	≥G2 anemia ≥G2 overall HT	PBM-D <sub>max</sub> >57 Gy PBM-V <sub>10</sub> > 87%
Robinson et al.	2015	40	3DCRT IMRT	5-FU/MMC Cape/MMC MMC	Pelvic bones	CT-based	No	CTCAE v 4.0	WBC, ANC nadirs	Several metrics of PBM, LSBM, IBM,LPBM
Rose et al.	2016	45	IMRT	5-FU/MMC	Pelvic bones	<sup>18</sup> FDG-PET-based <sup>ACT</sup> BM contour	Yes (iliac crests, femoral heads)	RTOG	ANC, WBC nadirs, ≥G3 overall HT	<sup>ACT</sup> BM-EUD
Franco et al.	2016	50	Static IMRT VMAT	5-FU/MMC	Pelvic bones	CT-based	No	RTOG	≥G3 overall HT	LSBM-V <sub>40</sub> ≥ 41%
Franco et al.	2016	44	Static IMRT VMAT	5-FU/MMC	Pelvic bones	<sup>18</sup> FDG-PET-based <sup>ACT</sup> BM contour	No	RTOG	WBC, ANC, Plt, Hb nadirs	LSBM-mean dose LSBM-V <sub>10</sub> ,-V <sub>20</sub> ,-V <sub>30</sub> IBM-V <sub>10</sub>

pts: patients; CHT: chemotherapy; BM: bone marrow; def: definition; opt: optimization; HT: hematologic toxicity; DP: dosimetric parameters; IMRT: intensity-modulated radiotherapy; 3DCRT: 3-dimensional conformal radiotherapy; 5-FU: 5-fluorouracil; Cape: capecitabine; MMC: mytomicin C; CT-based: computed tomography-based; WB: whole bone; <sup>18</sup>FDG-based PET: <sup>18</sup>F-fluorodeoxyglucose-based positron-emission tomography; <sup>ACT</sup>BM: active bone marrow; RTOG: Radiation Therapy Oncology Group; CTCAE: Common Terminology Criteria for Adverse Effects; WBC: white blood cells; ANC: absolute neutrophil count; Plt: platelets; Hb: hemoglobin; PBM: pelvic bone marrow; LSBM: lumbar–sacral bone marrow; IBM: iliac bone marrow; LPBM: lower pelvis bone marrow; EUD: equivalent uniform dose; V<sub>x</sub>: volume receiving the dose X Gy.

pts: patients; Cht: chemotherapy; BM: bone marrow; def: definition; opt: optimization; HT: hematologic toxicity; DP: dosimetric parameters; IMRT: intensity-modulated radiotherapy; 3DCRT: 3-dimensional conformal radiotherapy; 5-FU: 5-fluorouracil; Cape: capecitabine; MMC: mytomicin C; CT-based: computed tomography-based; WB: whole bone; <sup>18</sup>FDG-based PET: <sup>18</sup>F-fluorodeoxyglucose-based positron-emission tomography; <sup>ACT</sup>BM: active bone marrow; RTOG: Radiation Therapy Oncology Group; CTCAE: Common Terminology Criteria for Adverse Effects; WBC: white blood cells; ANC: absolute neutrophil count; Plt: platelets; Hb: hemoglobin; PBM: pelvic bone marrow; LSBM: lumbar–sacral bone marrow; IBM: iliac bone marrow; LPBM: lower pelvis bone marrow; EUD: equivalent uniform dose; V<sub>x</sub>: volume receiving the dose X Gy.

**Table 4. Dosimetric parameters with a correlation to hematologic toxicity in clinical series with tumors other than anal cancer.**

Author	Year	Setting	Pts	Technique	CHT	Bony regions	BM def	BM opt	HT scoring scale	End point	DP increasing HT risk
Yang et al.	2014	Rectal cancer	120	3DCRT IMRT	5-FU Cape	Pelvic bones	CT-based WB contour	No	CTCAE v 3.0	WBC, Hb nadirs	LSBM-V <sub>45</sub> Coxal BM-V45
Wan et al.	2015	Rectal cancer	93	Static IMRT	Cape	Pelvic bones	CT-based WB contour	No	CTCAE v 4.0	≥G2 overall HT	LSBM-V <sub>40</sub> ≥ 60%
Wang et al.	2016	Rectal cancer	35	Static IMRT	Cape + Oxa	Pelvic bones	MR-based <sup>ACT</sup> BM contour	Yes (pelvic bones)	RTOG	WBC, ANC, Plt nadirs	PBM-V <sub>5</sub>
Wang et al.	2016	Gastric cancer	25	Static IMRT	Cape	Based on the extent of PTV	MR-based <sup>ACT</sup> BM contour	Yes	RTOG	WBC, ANC, Plt nadirs	PBM-V <sub>5</sub> , -V <sub>20</sub> , -V <sub>30</sub>
Sini et al.	2016	Prostate cancer	121	Static IMRT VMAT, Tomo	None	Pelvic bones	CT-based WB contour	No	CTCAE v 4.0	≥ G2 lymphopenia	PBM-V <sub>40</sub> > 94.6 cc
Deek et al.	2016	NSCLC	52	3DCRT IMRT	CBDCA + Pacl	D1-D10 vertebrae Ribs, clavicles Scapulae, sternum	CT-based WB contour	No	CTCAE v 4.0	≥G3 leukopenia	MVD>23.9 Gy TV-V <sub>20</sub> > 56% TV-V <sub>30</sub> > 52.1%
Mell et al.	2006	Cervical cancer	37	IMRT	Weekly DDP	Pelvic bones	CT-based WB contour	Yes (some pts)	RTOG	≥G2 leukopenia ≥G2 neutropenia	PBM-V <sub>10</sub> > 90% PBM-V <sub>20</sub> > 75%
Albuquerque et al.	2011	Cervical cancer	40	3DCRT	Weekly DDP	Pelvic bones	CT-based WB contour	No	CTCAE v 3.0	≥G2 overall HT	PBM-V <sub>20</sub> > 80%
Rose et al.	2011	Cervical cancer	81	IMRT	Weekly DDP	Pelvic bones	CT-based WB contour	No	RTOG	≥G3 leukopenia	PBM-V <sub>10</sub> > 95% PBM-V <sub>20</sub> > 76%
Rose et al.	2012	Cervical cancer	26	IMRT	Weekly DDP	Pelvic bones	<sup>18</sup> FDG-PET-based <sup>ACT</sup> BM contour	Yes (pelvic bones)	RTOG	WBC, ANC, Plt, Hb nadirs	<sup>ACT</sup> BM-mean dose
Zhu et al.	2015	Cervical cancer	102	IMRT	Weekly DDP	Pelvic bones	CT-based WB contour	Yes (pelvic bones)	NA	Weekly reduction in WBC and ANC	PBM-V <sub>20</sub> , -V <sub>30</sub> , -V <sub>40</sub>



pts: patients; CHT: chemotherapy; BM: bone marrow; def: definition; opt: optimization; HT: hematologic toxicity; DP: dosimetric parameters; IMRT: intensity-modulated radiotherapy; 3DCRT: 3-dimensional conformal radiotherapy; VMAT: volumetric-modulated arc therapy; Tomo: tomotherapy; PTV: planning target volume; 5-FU: 5-fluorouracil; Cape: capecitabine; Oxa: Oxaliplatin; CBDCA: carboplatin; Pacl: paclitaxel; DDP: cisplatin; CT-based: computed tomography-based; MR-based: magnetic resonance based; WB: whole bone; <sup>18</sup>F-FDG-based PET: <sup>18</sup>F-fluorodeoxyglucose-based positron-emission tomography; <sup>ACT</sup>BM: active bone marrow; RTOG: Radiation Therapy Oncology Group; CTCAE: Common Terminology Criteria for Adverse Effects; WBC: white blood cells; ANC: absolute neutrophil count; Plt: platelets; Hb: hemoglobin; PBM: pelvic bone marrow; LSBM: lumbar–sacral bone marrow; TV: thoracic vertebrae; V<sub>x</sub>: volume receiving the dose *X* Gy; MVD: mean vertebral dose.