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Advanced Squamous Cell Carcinoma in Slovenia; A Call for Novel Treatment Options

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Introduction: Most squamous cell carcinomas (SCC) are cured by conventional surgery and/or radiotherapy (RT). Advanced SCC (aSCC) is poorly understood disease defined as locally/loco regionally advanced tumor that cannot be cured by excision and/or RT. Apromising new anti PD-1 therapy has been introduced recently with 46% overall response rate and acceptable safety profile. The aim of our study was to elucidate the possible impact of new SCC therapy on Slovenian population of patients.

Methods: For the first time data of patients with aSCC diagnosed from 2010 until 2017 were extracted from Cancer registry of Slovenia and analyzed with SPSS program. Overall survival (OS) was calculated with Kaplan-Meier survival curves and compared using log-rank test. p value < 0.05 was considered statistically significant.

Results: 57 patients were diagnosed with aSCC, 31.6% female and 68.4% male patients with mean age 75.6 years. Median follow up was 26 months. The anatomic location of tumor was; head 56.1%, neck 3.5%, trunk 14%, extremities 22.8% and unknown primary 3.5%. 59.6% of patientshad regional metastases. Patients were treated with surgery in 12.3%, RT 22.8% and surgery + RT in 64.9% of cases. Only 12.3% additionally received systemic chemotherapy. 3-year OSof patients treated with surgery was 71%, RT 38%, surgery + RT 45% and systemic chemotherapy 41%, p = 0.447.

Conclusion: In Slovenia aSCC is rare disease of predominantly older male patients. Poor survival of patients with current indication for RT and chemotherapy could be improved with novel systemic treatment.