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Aims

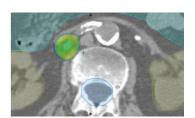
Metastases directed treatment is an emerging strategy for oligometastatic/oligorecurrent/oligoprogressive lymph node metastases from prostate adenocarcinoma. Aim of the present study was to evaluate outcome of patients treated with stereotactic body radiation therapy (SBRT) on lymph node metastases.

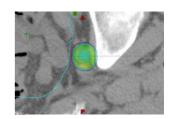
Methods

this is a multi-institutional retrospective analysis, including patients affected by lymph node metastases from prostate adenocarcinoma treated with SBRT. Patients with a maximum of 5 lymph node metastases were included. Concomitant treatment with systemic therapy was allowed. End-points of the analysis were local control (LC), out-of-field progression-free survival (OFPFS), overall progression-free survival (PFS) and overall survival (OS).

Results

80 patients and 157 lymph node metastases, treated from 2009 to 2018 were evaluated. Median age was 70.2 years and median PSA before SBRT was 1.88 ng/ml. Median diameter of treated lesion was 37 mm (range 7 – 40 mm). Dose delivered ranged from 25 to 48 Gy in 5 to 12 Gy per fractions (median BED3Gy 116.67, range 66.67-240). Androgen deprivation therapy was administered concomitantly in 72 lesions. With a median follow-up of 16 months, LC rates at 1- and 3-years were 93% and 86%. In-field progression of disease was observed in 11 (7%) lesions. One and 3-years OFPFS were 59% and 29% while PFS were 49 % and 20%. Median values of OFPFS and PFS were 15 and 11 months, respectively. Rates of OS at 1- and 3years were 100% and 95%.





Conclusions

SBRT in the management of lymph node metastases from prostate cancer seems to be an effective approach with high rates of in-field control. Prospective trials are necessary to better select patients who can benefit the most from this ablative focal treatment.