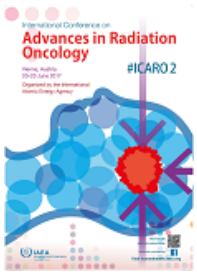

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The role of low dose rate brachytherapy for carcinoma of the cervix at Zaria, Nigeria

Friday, 23 June 2017 10:30 (5 minutes)

Introduction:This is a retrospective study at the Radiotherapy and Oncology Centre, Ahmadu Bello University Teaching Hospital, Zaria, Nigeria using Low Dose Rate (LDR) remote after-loading brachytherapy for the treatment of carcinoma of the uterine cervix. This is a resource poor setting with patients usually presenting with advanced stages of cervical cancers. Factors supporting the existing LDR brachytherapy at Zaria include ease of application, economic consideration, waste management and radiation protection.
Methodology: From October 1995 to September 2015, four hundred and ten (410) patients with histologically confirmed carcinoma of the cervix were treated. The patients were staged according to FIGO staging system following clinical examinations and investigative work-up. The treatment was by intracavitory insertion using Caesium-137 radioisotope with Delouche type or Vaginal cylinder applicators after external beam radiation. 85% of the patients presented at advanced stages of their diseases. A single fraction of 20-25 Gy to Manchester Point A or surface of the cylinder was prescribed. Bladder and Rectal doses were not recorded during the applications. The patients were analysed for local control and late radiation complications.
Results: The median follow-up was 70 months (12 to 240 months). The overall local control achieved was 65%. The overall vesico-vaginal fistulae recorded was 20% and recto-vaginal fistulae was 15%.
Conclusion: The LDR brachytherapy is a useful component and retains a significant role in the treatment of cervical cancer in a resource poor setting. The bladder and rectum should be properly displaced during brachytherapy. No need for source exchange since installation of equipment but weekly QA checks done. Equipment down times and excessive industrial unrest in the health sector were responsible for the number of patients treated during the period. Treatment interruption was responsible for the longer period patient spent for treatment and the treatment interruption chart developed by our centre is useful.

Country

Nigeria

Institution

Ahmadu Bello University Teaching Hospital, Zaria

Primary author: OLASINDE, Tajudeen Ayodeji (Ahmadu Bello University Teaching Hospital, Zaria, Nigeria)

Presenter: OLASINDE, Tajudeen Ayodeji (Ahmadu Bello University Teaching Hospital, Zaria, Nigeria)

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