

## Oropharynx Cancer Responds Well to Neck Dissection with Radiotherapy

Many methods are used to treat oropharynx squamous cell carcinoma. Patients with small primary tumors (T1–T2) without nodal metastasis will have similar outcomes in terms of local control and disease-free survival with either surgery alone or radiation therapy alone. But when bulky nodal disease (N2 or greater) is present, there is no consensus on the best treatment.

Now, research at Johns Hopkins shows that treating small oropharynx primary tumors presenting bulky nodal disease with early initial neck dissection followed by radiation therapy (with or without

chemotherapy) demonstrates excellent overall and disease-free survival rates.

All 16 patients whose cases were reviewed for the study survived; in all but one (94 percent) there was no evidence of the disease at last follow-up (follow-ups ranged from six to 75 months). The study shows a significant improvement in outcomes in selected patients with T1/T2 primaries and stage III/IV disease.

### FULL ARTICLE

Reddy A, Eisele D, Forastiere A, Lee D, Westra W, Califano J. Neck dissection followed by radiotherapy or chemoradiotherapy for small primary oropharynx carcinoma with cervical metastasis. *Laryngoscope*. 2005;115:1196–1200.

