

Enhancing Patient Comfort During Post-Radiotherapy Endoscopic Assessments of Nasopharynx by Reducing Number of Unnecessary Biopsies After Review of One-Year Results

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Introduction

- ▶ Radical radiotherapy (RT) +/- chemotherapy is the standard treatment for nasopharyngeal carcinoma (NPC).
- ▶ Internationally, there is no consensus on follow-up for the post-treatment NPC patients.
- ▶ In our department, we performed 6-site biopsies from bilateral posterior walls, roofs and lateral walls at 8 weeks Post-RT.
- ▶ The procedure can take up to 25 mins, and causes some pain, bleeding and discomforts to patients. Some patients may even require sedation.
- ▶ However, modern treatment of NPC provides high control rates of >90%.

In the era of high local control, is there still a need for this extensive biopsy?



Objectives and Methods

- ▶ Retrospectively reviewed post-treatment biopsy results of consecutive NPC patients who completed radiotherapy in 2012.

Results:

- ▶ 56 patients completed RT in 2012 with 336 biopsies
- ▶ Only one positive biopsy detected, so positive biopsy is 1/336 (0.30%)

→ **HIGH local control rate**

→ **Multiple random biopsies are NOT necessary**



Service Enhancement:

- ▶ From January 2013, biopsy is only taken at **2 sites** from each side of NP targeting at risk sites, **instead of previous 6-site** random biopsies.



Advantages

- 1) ↓ Patient's discomfort and pain
- 2) ↓ Need of sedation
- 3) ↓ Procedure time (25 min → 15min)
- 4) ↓ Staff workload (Both nursing staff and pathologists)

This service review resulted in change in protocol that has in improvement in multiple aspects.

