

Clinical Question:

Maxillary Sinus Squamous Cell Carcinoma – What is the role of radiation therapy in the clinically node negative neck?

Evidence summary

A meta-analysis (Abu-Ghanem et al., 2015) addressed this clinical question.

The meta-analysis included four retrospective studies (n=129 patients) (Jiang et al., 1991, Le et al., 2000, Hinerman et al., 2011, Brown et al., 2013) with low levels of between studies heterogeneity.

The meta-analysis showed that elective neck irradiation significantly reduced the risk of regional (neck) nodal recurrence (fixed effects model: OR=0.16; 95% CI=0.04–0.67; p=.01; random-effects model: OR=0.17; 95% CI=0.04–0.76; p=.02) compared to management by observation.

Recommendation:

Elective nodal irradiation to the neck in T3-T4 maxillary sinus squamous cell carcinoma patients should be considered.

Quality/Level of Evidence: Low

Grade of recommendation: Weak

Good practice point

All patients should be discussed at a multidisciplinary team meeting and referred to a radiation oncology centre with a specialist interest in head and neck cancer (e.g. specialist dental care including prosthodontics, dietician, speech and language therapy, radiation therapy and mould room expertise, specialist nursing support, psycho-oncology, social work, physiotherapy).

References

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