

Many lung cancer patients get radiation therapy that may not prolong their lives

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A new study has found that many older lung cancer patients get treatments that may not help them live longer. Published early online in *CANCER*, a peer-reviewed journal of the American Cancer Society, the findings suggest that physicians should not routinely use radiation after surgery to treat lung cancer that is advanced but has not widely spread, at least in older patients.

Patients with locally advanced lung cancer, which has spread to only certain lymph nodes, usually undergo surgery to remove their tumors. Unfortunately, the cancer often comes back, so physicians frequently use radiation therapy to decrease patients' risk of [cancer recurrence](#). To see if this additional treatment actually extends their survival, Juan Wisnivesky, MD, DrPH, of the Mount Sinai School of Medicine in New York City, and his colleagues analyzed information from the Surveillance, Epidemiology and End Results (SEER)-Medicare registry, which links [cancer incidence](#) and survival data to a master file of Medicare records. The investigators identified 1,307 cases of locally advanced lung cancer between 1992 and 2005.

In all, 710 patients (54 percent) received radiation following their surgery, but they were not more likely to survive longer than patients who did not receive radiation. "Our results show that we need more information about the potential benefits of radiation therapy before it is used routinely to treat this subset of [lung cancer patients](#)," said Dr. Wisnivesky. Such information may come from the Lung Adjuvant Radiotherapy Trial (LungArt), which is an ongoing phase III randomized

controlled clinical trial evaluating the effectiveness of radiation following surgery in patients with locally advanced lung cancer.

More information: "Postoperative radiotherapy for elderly patients with stage III lung cancer." Juan P. Wisnivesky, Ethan A. Halm, Marcelo Bonomi, Cardinale Smith, Grace Mhango, and Emilia Bagiella. *CANCER*; Published Online: February 8, 2012 ([DOI: 10.1002/cncr.26585](https://doi.org/10.1002/cncr.26585)).

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