



Results

It has been recognized that the most widely used treatment modality as new intensity modulated radiotherapy (IMRT), the RapidArc has also being used in current radiotherapy, delivering the treatment using the cyber knife since 2008. The side effects observed were different for each change in technology. Some side effects were common to more than one treatment option such as urinary incontinence. Urethral sloughing has reported only with the cryotherapy method. The best five-year outcome was observed with IMRT (100%) and worst five year outcome identified was with cryotherapy (36%) for low risk cancers. For intermediate risk cancers the best was with Brachytherapy (100%) and worst with conventional radiotherapy (26%).

Conclusions

Side effects are varying in each change in technology and there was no common side effect to all treatment methods on the published data studies.

Low risk and intermediate risk localized prostate cancer patients should be treated with IMRT, HIFU and Proton therapy.

IMRT appears to be the most favorable treatment method for localized prostate cancers. However, establishing an optimal mode of radiotherapy for prostate cancer remains controversial.

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Pattern of adult Acute Lymphoblastic Leukaemia (ALL) patients at the National Cancer Institute, Sri Lanka

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Introduction and Objectives

Haematological malignancies arise as a result of neoplastic proliferation of cells of the haemopoietic system. ALL is a common haematological malignancy which has a huge impact on patients and their families. The objective of this study was to describe the characteristics of adult ALL patients at the National Cancer Institute, Sri Lanka.

Methods

A descriptive cross sectional study was conducted among all adult cases diagnosed with ALL, presented to the National Cancer Institute for a duration of two years (2010 and 2011). Data was collected by using an investigator administered structured data sheet and analyzed by using Statistical Software for Social Sciences version 23.0.

Results

There were 131 adult ALL patients and the age ranged from 13 to 82 years (mean 33.14:SD17.45). The majority was between 21 and 40 years (N=54:41.2%). A significant male preponderance (N=89:67.9%) was identified ($\chi^2=16.86$; $p<0.001$). White Cell count at presentation ranged from 1.45×10^9 to 322×10^9 (mean 5.84×10^9 :SD=1.76 $\times 10^9$). The majority were T-ALL (N=54:52.9%). Only 6.9% had undergone cytogenetic studies. The majority presented with intermittent fever (N=86:65.4%) and 45% was found to have hepatosplenomegaly (N=59). 9.2% at presentation was reported to have CNS involvement (N=12). 61.5% of the cases were reported dead by mid 2016.