

QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

## ELECTROCHEMOTHERAPY IN ELDERLY, NONSURGICAL, SKIN MALIGNANCIES OF THE HEAD AND NECK PATIENTS: CLINICAL OUTCOME AND QUALITY OF LIFE MANAGEMENT

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Introduction: Skin malignancies (SM) of the Head and Neck inflict significant structural, functional, and cosmetic burdens upon those affected and are often treated with surgical resection. Electrochemotherapy (ECT) is a non-thermal tumour ablation accepted in clinical practise and effective on solid tumours. It offers several advantages over surgery including higher preservation of normal surrounding tissue, decreased morbidity, shorter hospitalization.

Objective: The objective of this retrospective study was, to evaluate the efficacy of ECT as a palliative treatment of SM of the Head and Neck in nonsurgical patients, especially in those who were elderly or in a poor general condition.

Materials and Methods: Retrospective analysis of 33, SM, head and neck patients who underwent ECT. Treatment consisted of intravenous bleomycin followed by locally delivered electric pulses. Loco regional tumour response was evaluated in accordance to Response Evaluation Criteria in Solid Tumours (RECIST). Side-effects rate was assessed according to the CTCAE.

Results: Twelve of thirty-three patients had only one treated lesion, whilst 21/33 patients were treated for multiple lesions around their face, scalp, neck. Overall, 27/33 (82%) patients reached a CR and 6/33 (18%) patients a PR. When considering the 12, single lesion, patients, a CR of 100% was reached, whilst in 21 multiple lesions patients, CR of 71% and PR of 29% were obtained. Local control of the disease was maintained for a median time of 9.5 months (range 0.3 - 52.7). A necrotic area, observed in 8/33 patients, resolved 1-2 months after ECT. Oedema was seen in the treated area of 6/33 patients few weeks after treatment. All side effects were easily managed and resolved naturally.

Conclusions: ECT represents a favourable procedure with minimal side effects; therefore,











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elderly patients, particularly when frail or presenting with physical and physiologically impaired functions, may represent suitable candidates for this local less invasive approach.





