

## Esophageal carcinoma in el-gharbia governorate, Egypt: Clinico-epidemiologic study and treatment outcome

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**Background:** Esophageal carcinoma (EC) is rare all over the world and little is known about them in Egypt. Gharbia population-based cancer registry (GPBCR) is the first population based cancer registry in Egypt located in the Tanta cancer center (TCC). It has been successfully functioning, since January 1999, covering a population of 4.1 million.

**Methods:** This is a retrospective study. Between January 2000 and December 2002, 70 cases with histologically confirmed ECs were identified in the GPBCR; 35 cases of whom were treated at TCC.

**Results:** The median age was 60 years (range, 18-83 years) with male predominance (63%). Dysphagia was the most common presentation (75%). The lower third was the commonest site (55%) followed by the middle third (25%). Squamous cell carcinoma (SCC) was the commonest histology (66%) followed by adenocarcinoma (AC; 24%). Majority of ACs (70%) were located in the lower esophagus while SCC had no site of preference ( $p=0.04$ ). Less than one third of patients were candidates for radical treatment while the majority of patients received palliative and supportive treatment. Surgery, radiotherapy and chemotherapy were employed in 43%, 20% and 34% of patients respectively. The median progression free survival (PFS) and overall survival (OS) were 6 and 7 months, respectively. Site, histology, stage and treatment modality had no significant impact on survival.

**Conclusions:** Esophageal carcinoma in Gharbia Governorate, Egypt is characterized by predominance of male gender, lower third location and squamous histology. Overall and progression free survivals are dismal.

**Keywords:** Egypt, Gharbia population-based cancer registry, Esophageal cancer.

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## Current trends in radionuclide therapy with special reference to malignant conditions

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The current developments in SPECT (CT) and PET (CT) imaging have put a step forward in personalized radionuclide therapeutic medicine in particular reference to a wide variety of malignant conditions. The factors affecting such a targeted radionuclide therapy include fraction of absorbed radionuclide, radiosensitivity, degree of uptake, locoregional distribution as well as intratumoural retention pattern of radiopharmaceuticals administered which can be further optimized by bringing the radionuclide in the close vicinity of the tumour cell as well as selective targeting with radionuclide possessing particulate emission and a gamma emission to permit simultaneous imaging. The radiolabels of choice would be Re-188, Sm-153, Lu-177 and Ho-166. There are many other emerging radionuclides with promising characteristics and can offer optimized therapeutic efficacy in a wide variety of malignant conditions using MIBG-I 131 therapy, intrarterial therapy, intracavitary therapy, radioimmunotherapy, radiopeptide therapy and labeled hormone therapy. After systematic and dedicated use of such innovative and systemic radionuclide therapy, the monitoring of therapy response can also be effectively achieved by using PET CT imaging. This would enable further optimization of therapeutic index of emerging radionuclide therapy with reference to malignant diseases.

### Biography

A. K. Shukla has done his Ph.D. in Biomedical Physics and has been engaged in research in the areas of medical physics, radiation safety, radiation dosimetry in nuclear medicine and diagnostic imaging and has published more than 65 papers apart from about ten book chapters. He has served as members of expert group in IAEA as well as many other national and international organizations. He is currently on the editorial board of journal of Medical Physics and is a referee to many prestigious journals. He is a member in governing body of a tertiary care institute.

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