

# HEAD AND NECK CONFERENCE: THE MULTIDISCIPLINARY APPROACH

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## Metastatic laryngeal cancer

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Laryngeal cancer is one of the cancers of the upper aero-digestive tract that includes a group of tumors of the oral cavity, pharynx, larynx and sinuses of the face. These cancers require multidisciplinary care between ENT physicians, oncologists, radiation therapists and pathologist. The cancers of the superior aero-digestive ways are very lymphophyles, but the systemic metastases are rare, they represent 5% of the cases. The most frequent systemic metastatic sites are the bone, lung and liver. The treatment of the laryngeal metastatic cancers is based essentially on the chemotherapy, even if its profit still very modest. The chemotherapy uses drugs, mainly: The platinum (cisplatine), 5-fluorouracil, taxanes and méthotrexate. The target therapy: Cétoximab is a monoclonal Antibody typifies IgG1, who target and block the receiver of the Epidermal Growth Factor (EGFR) on expressed on the surface of tumoral cells. The immunotherapy which remains used in the second line mainly Nivolumab. By blocking the receiver PCD1 (Program Cell Death), Nivolumab raises the inactivation of the Lymphocyt T which attack the tumoral cells. The first-line protocols use the platinums, the 5-fluorouracil, and the cetoximab during 6 cycles, at the rate of a cycle every 21 days, then interviews by cetuximab with an objective answer of 36% and a global survival of 10.1 months. The protocols of the second line use: the Methotrixate every 14 days with an objective answer of 6% and a global survival of 6 months. And the immunotherapy with Nivolumab every 14 days, with an objective answer of 13% and a global survival of 7.5 mois. The purpose of the chemotherapy is essentially to obtain an improvement of the quality of life, by the local control of the disease; the chemotherapy does not improve the global survival which stays from 6 to 8 months.

## Biography

Tarik Djaout completed his studies in medical science at Algiers, 2003. He started his specialty (2011 to 2016) and He work at hospital in the South of Algeria(2016) where he consulted various types of patients and in particular sick cancer patients on various stages of evolution and where the patients with synchronous metastases because of the delays of diagnosis, raise us of real problems of care in particular as regards the comfort and the life expectancy after treatment.

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