Cervical cancer (IIB-IVA): Radiotherapy vs. radiotherapy + chemotherapy

The aim of our investigation was to find optimal therapy that would offer the best measurable results. Eighty-six patients with advanced cervical cancer (Ca PUV) were treated with intracavitary and transcutaneous radiation (B1, n=38), or with radiotherapy plus chemotherapy (CDOP-potentional) (B2, n=48). Most patients were in stage III of the disease. At the admission, the patients were between 50 and 59 years old. Squamous cell carcinoma was most often histological diagnosis. Preparation of patients for radiotherapy and planning were conducted according to the optimal European and world standards. In this stage of the researching we could evaluate only postirradiation sequellae (French-Italian classification). It is not possible to give valuable data about patients' survival, local relapse or metastatic disease after three months only. Results did not show any enhancement in toxicity of combined treatment and irradiation treatment alone.