

Date: 09/08/2019

FREEDOM OF INFORMATION REQUEST FOI/014932 - Cutaneous Squamous Cell Carcinoma

Question 1 – How many adult patients with Cutaneous Squamous Cell Carcinoma have you seen / treated (example Surgery, Radiotherapy, Chemotherapy or combinations of these) in the last 6 months?  
Search of the Trust's local cancer database for patients with Squamous Cell Carcinoma ("M80703") and a diagnosis of "Other malignant neoplasms of skin" ("C44") where the patient was treated in the last 6 months at DGFT (Jan-Jun19)

- **130 patients treated here**

**Questions 2, 3 and 4** - The Trust records the TNM staging information so it's hard to tell what would be Perineural Invasion and local Lymphovascular or Bone involvement. There were no patients found with TNM stage of M1 (indicating metastatic disease).

Question 2 – How many adult patients with locally advanced (patients with Perineural invasion and local Lymphovascular or Bone involvement) or Metastatic Cutaneous Squamous Cell Carcinoma (patients with both local and distant Nodal involvement, as well as any other organ involvement) have you seen / treated (example Surgery, Radiotherapy, Chemotherapy or combinations of these) in the last 6 months?

Question 3 – Of these how many are not candidates for Curative surgery or Curative Radiation? \*

Question 4 – In the past 6 months, how many adult patients with locally advanced or metastatic Cutaneous Squamous Cell Carcinoma have you treated with the following:  
Complex surgery only (eg patients with significant comorbidities, large reconstructions or amputations leading to significant loss of function or disfigurement)

Surgery + Radiotherapy (adjuvant / neoadjuvant)

Radiotherapy

Chemotherapy\*\* only

Chemotherapy\*\* + Radiotherapy

Surgery + Chemotherapy\*\* (adjuvant / neoadjuvant)

Other (Please state)

Palliative Care / Best Supportive Care

Question 5 – Are you participating in any clinical trials for Cutaneous Squamous Cell Carcinoma (CSCC)?

- No

If yes, please state which?

\*Example of factors to consider when deciding if locally advanced patients are suitable candidates for surgery:

Disease recurrence after two or more surgical procedures and the treating clinicians expected that curative resection would be unlikely

CSCC in a anatomically challenging location where surgery would result in substantial complications or deformity or dysfunction significant local invasion that precludes complete resection

\* Example of factors to consider when deciding if locally advanced patients are suitable candidates for radiation:  
CSCC in a anatomically challenging location where radiation would be associated with unacceptable toxicity risk in context of the patients overall condition

Clinical judgement that tumour might not respond to RT

Factors / conditions contradicting for RT

Prior treatment with RT for CSCC, and further RT would exceed the threshold of acceptable cumulative doses

\*\* Chemotherapy such as Cisplatin, Doxorubicin, 5-Fluorouracil (5-FU), Capecitabine, Topotecan, Methotrexate or Etoposide