

# **Provincial Laryngeal Cancer Treatment Guidelines**

Approved at the Provincial Head and Neck Cancer Guideline Meeting May 8, 2015

Clinical practice guidelines have been developed after multi-disciplinary consensus based on best available literature. As the name suggests, these are to be used as a guide only. These guidelines do not replace physician judgment which is based on multiple factors including, but not limited to, the clinical and social scenario, comorbidities, performance status, age, available resources and funding considerations. The Saskatchewan Cancer Agency disclaims all liability for the use of guidelines except as expressly permitted by the Agency. No portion of these guidelines may be copied, displayed for redistribution to third parties for commercial purposes or any nonpermitted use without the prior written permission from the Agency.

Recommendations for drug treatment presented in the Cancer Agency guidelines for a cancer site may not reflect provincial cancer drug funding. Please refer to the current Saskatchewan Cancer Agency drug formulary at www.saskcancer.ca for information on cancer drug listing and funding.

Benefits and risk of the proposed should be discussed with patient.

Participating in clinical trials is encouraged when available. Involvement of a multidisciplinary team is strongly recommended.

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- <u>Glottic</u>
- <u>Supraglottic</u>
- Subglottic

## GLOTTIC:

- Tis:
  - Endoscopic Laser, or
  - o RT
- T1-T2 N0:
  - RT, or
    - Partial laryngectomy
- T3 N0-N3:
  - RT + chemo, surgery for residual or recurrence, or
  - Total laryngectomy with neck dissection if N1. PORT (+ chemo if positive margin, extranodal extension, multiple Lymph Nodes positive)
  - Induction chemotherapy followed by RT+Chemo is controversial, may be considered to attempt to convert unresectable to resectable
- T4 N0:
  - Total laryngectomy + PORT ± Chemo

- T4 N1:
  - Total laryngectomy with ipsilateral neck dissection. PORT (+ chemo if positive margin, extranodal extension, multiple Lymph nodes positive)
- T4 N2-3:
  - TL + neck dissection. PORT + chemo.

### SUPRAGLOTTIC:

- T1-2 N0:
  - o RT alone, or
  - Partial laryngectomy or trans-oral laser, selective neck dissection Level II-III
- T3 N0:
  - RT + chemo, Surgery for residual or recurrence
  - TL + elective neck dissection Level II-III.
- Any T N1-3, T4 N0:
  - TL + neck dissection. PORT ± chemo
  - RT + chemo if not fit for Surgery

#### SUBGLOTTIC:

- Rare, advanced at presentation, airway compromise
- TL ± neck dissection. PORT ± chemo
- RT + chemo if not fit for Surgery

#### Chairperson: Dr. Shazia Mahmood

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Attendees: Dr. Aisha Ahmed, Joe Andreas, Dr. Monica Behl, Dr. Janine Benoit, Dr. Bryan Brunet, Jennifer Cameron-Turley, Lorna Campbell, Dr. Peter Chang, Dr. Tineyi Chikukwa, Dena Colleaux, Dr. Wojciech Dolata, Dr. Ali El-Gayed, Lacey Fondrick, Christel Foord, Bertha Foote, Pauline Fox, Josh Giambattista, Dr. Kamal Haider, Dr. Rick Jaggi, Dr. Miroslav Jancewicz, Dr. Debra Korol, Lana Kruger, Dr. Shazia Mahmood, Courtney McKay, Dr. Mohamed Mohamed, Dr. William Moyer, Lori Muz, Dr. Mark Ogrady, Dr. Lenny Pillay, Dr. Florence Plaza Arnold, Dr. Evgeny Sadikov, Dr. Muhammad Salim, Judy Shaw, James Smetaniuk, Dr. Derek Suderman, Dr. Niranjan Venugopal, Brenda Wilde, Michelle Zahayko, Dr. Adnan Zaidi, Dr. Bill Ziegler