#### T3 larynx

Van den Bogaert presented on behalf of the writing committee this proposal for a joint study (by the Head and Neck Group and the Radiotherapy Group) of radiotherapy versus "upfront" chemotherapy followed by radiotherapy in the treatment of T3 laryngeal carcinoma. The Steering Committee was not in favour of going ahead with this study.

#### Quality Control Project Site visits

In 1988 three Italian radiotherapy departments have been visited by the physicists and radiotherapists. Five other centers will be visited in the near future. A total of 28 centres have been visited up to now and there has been a 71% increase in participation in the last two years. If financially possible this program will be pursued.

### Mailed TLD program

This program runs smoothly. Seventeen centers have participated in the in water calibrations and 8 in the in-vivo measurements. The results were excellent (90% of the dosimeters agreed within 4%).

### Quality control workshop

This workshop is planned for April 13, 1989 in Louvain prior to the next group meeting. A physicist and a radiotherapist from each of the centers participating in the Quality Control Project will be invited to present reports and make proposals for discussion.

Pilot study on alternative methods of fractionation in the treatment of gliomas (an update)

D.G. GONZALEZ and E. van der SCHUEREN

Up to now it has been possible to deliver high doses in a short period of time (60 Gy in 12 days) in three fractions per day. With a good technique the reactions are only mild.

Information and follow up on experimental work on new bioreductive drugs

J.C. HORIOT

Horiot gave further details on the work of Adams on the newest bioreductive drugs. They seem to be less toxic and considerably more radiosensitizing. Clinical experience might be started early at the phase I level.

## Next meetings

The Spring meeting will be held in Louvain, April 14 and 15, 1989.

The Autumn meeting will most probably take place in Pisa.

REPORT EORTC LUNG CANCER WORKING PARTY (Belgium) MEETING. Brussels, November 19, 1988

Chairman : J. Klastersky (Brussels)

# Review of ongoing studies

NSCLC (EORTC 07861): phase II randomized study comparing cisplatin + etoposide versus carboplatin + etoposide combination. 124 patients have been evaluated. Final results expected for early 1989.

SCLC (EORTC 07871): phase III randomized study comparing an intensive multiple drug chemotherapy versus standard combination: 97 patients registered so far

Biomarkers in lung cancer (EORTC 07851): 327 patients so far entered into this study, 182 with non-small cell lung cancer and 145 with small cell lung cancer.

## Pilot studies

NSCLC: phase II study of cisplatin + vindesine + 5-fluorouracil + mitomycin C in advanced disease: 34 patients have been registered.

Second-line treatment for SCLC: patients relapsing after treatment in the 07853 protocol (CEV vs EV) are now treated with a cyclophosphamide + adriamycin + vincristine combination (CAVi) potentiated by ampholiposomes. Thirteen have been included. In 11 evaluable patients, 6 partial responses have been obtained.

Ifosfamide + ACNU as salvage therapy for patients with SCLC and failing in protocol 07871: this phase II study is now open. Patients will be evaluated separately according to their randomization in the first-line study. ACNU is given in a dose of 75 mg/m $^2$  in one day and ifosfamide at 4 g/m $^2$  (24 h infusion + mesna) on the same day.

#### Biomarkers in lung cancer

Body showed results obtained in both SCLC and NSCLC, where squamous cell carcinoma (SCC), lipid-associated scialic acid (LSA), calcitonine, CEA and neurone specific enclase (NSE) were measured.

#### New studies

Protoadjuvant chemotherapy in inoperable non metastatic NSCLC: the Group has agreed to write a protocol where all patients will receive 3 courses of combination chemotherapy (three drugs regimen). Responders and patients with no change will be randomized between chest irradiation and 3 further courses of chemotherapy. However, patients whose tumor will become resectable should be subjected to surgery. The protocol will be written by Sculier and Donnadieu (chemotherapy), Van Houtte (radiotherapy) and Monteau and Rocmans (surgery).

New SCLC study: a weekly schedule of combination chemotherapy including GM-CSF in supportive management will be studied.

Adjuvant immunotherapy in completely resected lung cancer: a phase II trial of CGP 19 835 A Lipid (MTP-PE in liposomes) will be started at Institut J. Bordet in patients with advanced NSCLC, in order to evaluate the tolerance to the drug and to determine antitumoral activity and macrophage activation.

# Closed study

EORTC protocol 07853 (phase III randomized study comparing etoposide + vindesine versus cisplatin + etoposide + vindesine in SCLC) is undergoing final analysis. Part of the results were presented.

## New plenary session

The next plenary session is scheduled in Brussels on March 11, 1989.

J.P. SCULIER, M.D. Secretary