University of BRISTOL

University Hospitals Bristol NHS
NHS Foundation Trust

headandneck 5000

**Analysis of UK clinical practice and its impact on outcomes for non-surgically managed head and neck cancer patients**

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**Scientific Outline**

**Summary**

Head and neck squamous cell carcinoma (HNSCC) is the 6th most common malignancy worldwide and accounts for approximately 1-2% of all cancer deaths. Survival in head and neck cancer is predicted primarily by anatomical site, stage, and Human Papillomavirus (HPV) status (1). The standard treatment of choice for locally advanced head and neck squamous cell carcinoma (LAHNSCC) is non-surgical; radiotherapy +/- concurrent systemic agents. Toxicity rates associated with this are often high. Despite published guidance and much general consensus, there remains a degree of variability among treating oncologists with regard to radiotherapy volumes, regimens and concurrent systemic treatment. The successful recruitment of patients from multiple centres across the UK to Head and Neck 5000 provides a unique opportunity to study the variation in everyday practice within UK clinical oncology departments. The design of Head and Neck 5000 has produced a detailed database which includes information on many aspects of patient management and provides an exciting opportunity to gain insight into the patient experience through treatment, recovery, and beyond.

As clinical oncologists working in a department active in clinical trials, we will use our specialist experience and knowledge to enhance the impact of Head and Neck 5000. Our project will focus on the analysis of non-surgical clinical practice across the UK, including radiobiological implications of different regimens, and apply our experience to interrogating the follow-up data with specific regards to patient outcomes. We will build upon the exciting research already underway in Head and Neck 5000, and strengthen links between our Clinical Oncology department and Bristol University research departments

Keywords: Radiotherapy, chemoradiotherapy, toxicity, clinical outcomes, radiobiology