CASE STUDY

PATIENT AGES: 79 & 67 | SEX: MALE
TYPE: CUTANEOUS SQUAMOUS CELL CARCINOMA | LOCATIONS: RIGHT FOREARM
PRESENTATION: TWO PATIENTS WITH SOLITARY VISIBLE LESIONS ON THE RIGHT FOREARM 2 TO 3 CM IN WIDTH

RADIOThERAPY SYSTEM: XSTRAHL 150

DIAGNOSIS AND PRESCRIPTION
Treating Radiation Oncologist: Professor Gerald Fogarty

<table>
<thead>
<tr>
<th>PATIENT</th>
<th>TYPE</th>
<th>LOCATION</th>
<th>FIELD SIZE</th>
<th>NO. OF TREATMENTS</th>
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<tbody>
<tr>
<td>1</td>
<td>SCC</td>
<td>RIGHT FOREARM</td>
<td>5CM</td>
<td>6</td>
</tr>
<tr>
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KEY FACTS
• Both patients presented with lesions on their right forearms and were medically unfit due to age and pre-existing conditions.
• The patient homeostatic mechanisms appeared defective resulting in necrotic debris that was slow to respond post treatment.
• Demonstrates that sterilization of the treated area can occur despite a lack of clinically apparent response, especially in medically unfit patients.

Clinicians need to be aware of this phenomenon in order to avoid unnecessary salvage surgery.

TREATMENT OUTCOMES
• Patient 1 was treated with 36 Gray with a 150kV surface beam in 6 fractions. The lesion showed a regression from three to two centimetres four weeks after radiotherapy.
• Patient 2 was treated with 36 Gray with a 100kV surface beam in 6 fractions. The lesion showed no clinical regression during review four weeks after radiotherapy.
• Both patients had excisions showing no evidence of malignancy.

12-MONTHS POST TREATMENT
• Both patients showed no regrowth 12 months after treatment
• The patient maintained excellent cosmesis following radiotherapy and lesion excision.

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