BrachyBytes

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TRIUMPH-T Trial: The Study of Toxicity Rates in 2-Day APBI Treatment

The next big leap forward in breast brachytherapy is here! The TRI-faction Radiotherapy Utilized to Minimize Patient Hospital Trips, or the TRIUMPH-T Trial, is officially enrolling patients, and will explore treating patients with a 3 fraction course of brachytherapy delivered over 2-3 days.

Atif J. Khan, MD

A previous study by the Cancer Institute of New Jersey already demonstrated the safety of this approach. The TRIUMPH-T Trial will encompass a larger cohort of patients and will evaluate toxicity rates.

Clinical benefits of targeted radiation delivered by brachytherapy include reduced radiation exposure to healthy tissue, better cosmetic results, and fewer long-term side effects. A 2-day course of brachytherapy will enhance patient convenience, further reduce the amount of radiation delivered to normal tissue, and minimize delays in systemic/local therapy.

Dr. Atif J. Kahn, radiation oncologist and principle investigator of the TRIUMPH-T Trial, discusses the details of the trial, and the potential benefits a 2-day radiation treatment could provide to physicians and their patients.

What piqued your interest in pursuing a 2-day radiation treatment for women?

The usual five day course of partial breast irradiation is a great treatment. Still, some women find 5-9 days with an in-dwelling catheter troublesome. The wound does require care, and I usually ask my patients not to shower during treatment. A 2-3 day treatment obviates a lot of those issues.

What other sites are participating in the TRIUMPH-T Trial?

Arizona Breast Cancer Specialists (Scottsdale, AZ), Indiana University School of Medicine (Indianapolis, IN), Montefiore Medical Center (Bronx, NY), William Beaumont Hospital Radiation Oncology (Royal Oak, MI), Bryn Mawr Hospital Cancer Center (Bryn Mawr, PA), University of California San Diego Health System (La Jolla, CA), and 21st Century Oncology of Michigan (Farmington Hills, MI).

How many patients will you enroll and when do you anticipate accrual will be complete?

We expect to enroll 200 patients at a rate of approximately 10 patients per month. If we successfully enroll at that rate we should be fully accrued in under 2 years.

How was the dosimetry for this trial determined?

We have been working with Professor Roger Dale of the Imperial College in London. He is the world's foremost authority in radiobiological modeling for breast cancer. We have calculated this schedule to produce the same results in tissue as a fractionated course of radiotherapy to 50 Gy in 25 fractions.

The trial is looking to see if three doses of focused radiation delivered over 2-3 days is better than conventional courses over longer periods of time. What are your thoughts?

The trial is examining the equivalence of this shorter schedule of treatment with longer schedules by looking at side-effects, cancer control, and how the breast looks after treatment. We expect the longer and shorter treatments to be equivalent. Also, breast cancer patients may be choosing surgical options alone instead of the advantageous option of surgery plus radiation due to the length of time that traditional radiation is given. By further examining short courses of accelerated partial breast irradiation, there may be an opportunity to present additional treatment options to women who can't commit to longer treatments due to lifestyle or social challenges.

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If the results are promising, could this become a new standard for radiation therapy in early stage breast cancer?

We don't view this approach as a replacement to the conventional 5 day course of partial breast irradiation, or even to whole breast irradiation. Rather, if successful, we hope to provide patients and doctors with another tool in the toolbox to use in the appropriate situation.

Dr. Khan is a radiation oncologist and principle investigator of three breast fractionation trials; and associate professor of radiation oncology at Rutgers Robert Wood Johnson Medical School. He has authored or co-authored several papers and book chapters and serves as an oral examiner for the American Board of Radiology, the certifying body for radiation oncology trainees.

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