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Title: The Clinical Management and Radiotherapy Delivery in the instance of Tumour Induced Carotid Sinus Syndrome: Radiation Therapist's Perspective

Body: BACKGROUND: The complexity of the head and neck patient cohort is indisputable. This case study outlines the experience of carotid sinus syndrome (CSS) manifestation. A course of chemo-radiotherapy for cT2N3b hypopharynx tumour entailed treatment interruptions, hospital admissions and pacemaker placement. The optimisation of Radiotherapy was imperative, amidst evolving care co-ordination.

METHODS: While on treatment, the patient presented with two episodes of syncope and ongoing falls. Treatment was held for a week to facilitate further investigation. A permanent pacemaker (PPM) was placed. Syncope episodes resulted in skull fracture and contusion, and clinical management was compounded by exponential weight loss.

RESULTS: A revised radiotherapy plan was created, with PPM estimation. A planning rescan with a new mask, to encompass accurate PPM position and weight loss was acquired. Analgesia was required due to skull fracture, and bi-daily radiotherapy fractions were delivered, with daily PPM monitoring from cardiology, to compensate for treatment interruptions. Chemotherapy was ceased. Multi-disciplinary input occurred weekly, including CNS, SLT, Dietician.

CONCLUSION: This case emphasises the fundamental need for multi-disciplinary collaboration in the delivery of head and neck radiotherapy; disciplines such as cardiology, neurosurgery, emergency medicine, dietician in this instance. This patient is continuing SLT, dietician and cardiology outpatient care.

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