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Technical note

Radiation oncology crossword: Genitourinary cancer



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ARTICLE INFO

Article history:

Received 1 August 2018

Received in revised form

20 January 2019

Accepted 23 March 2019

Available online 5 April 2019

Keywords:

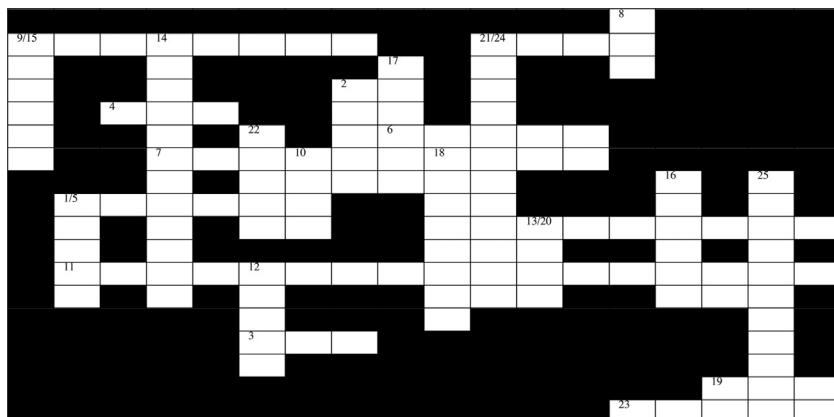
Crossword

Genitourinary cancer

Radiation oncology

A continuation of our homage to the original Radiation Oncology crossword, updated to reflect the changes in our field in the quarter century since.¹

Following our recent focus on the central nervous system, the focus of this crossword is genitourinary cancer.²



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<https://doi.org/10.1016/j.rpor.2019.03.004>

1. Following radical prostatectomy, the median actuarial time to metastases from the time of PSA level elevation is ____ years.³
2. Once men develop metastatic disease following radical prostatectomy, the median actuarial time to death is ____ months.³
3. The Phoenix definition for biochemical failure after definitive radiation therapy for prostate cancer is a PSA rise of at least ____ ng/ml above the nadir PSA.⁴
4. In intermediate/high-risk prostate cancer, the duration of neoadjuvant androgen deprivation therapy (ADT) which reduces prostate cancer-specific mortality, distant progression and all-cause mortality compared to radiotherapy alone is ____ months.⁵
5. The 10-year prostate cancer specific mortality of radiotherapy alone for intermediate/high-risk disease is 22 percent. Addition of the optimal duration of neoadjuvant ADT reduces this mortality to ____ percent.⁵
6. For each 0.1 ng/ml increase in post-prostatectomy PSA before the initiation of salvage RT, ____ percent of freedom from biochemical failure (i.e. relapse-free survival) is lost.⁶
7. In locally advanced prostate cancer, the 10 year cancer-specific mortality for ADT alone is ____ percent versus 12 percent for ADT with the addition of 70 Gy.⁷
8. An independent predictor of PSA progression after salvage RT is a PSA doubling time of ____ months or less.⁸
9. For a pre-salvage RT PSA of 1.01–2.0 following radical prostatectomy, the 10-year cumulative incidence of distant metastases for node-negative patients is ____ percent.⁹
10. For a pre-salvage RT PSA of 0.20 or less following radical prostatectomy, the 10-year cumulative incidence of distant metastases for node-negative patients is ____ percent.⁹
11. A multicenter randomized trial found _____ to be noninferior to conventional external beam radiation therapy for intermediate-risk prostate cancer.¹⁰
12. According to EORTC 22911, the 10-year biochemical progression-free survival of observation alone for patients with high-risk features following radical prostatectomy is approximately ____ percent.¹¹
13. Of the three randomized controlled trials comparing adjuvant RT to observation following radical prostatectomy, the only trial not allowing salvage RT for biochemical failure in the control arm was conducted by ____.^{11–13}
14. In the ProtecT trial, the treatment modality with the fewest prostate cancer deaths per 1000 person years was ____.¹⁴
15. Compared to the United States population, the ProtecT trial underrepresented black patients by ____ percent.¹⁵
16. More than ____ percent of warty/basaloid penile cancers are HPV-related.¹⁶
17. No more than ____ percent of each kidney should receive 8 Gy or higher when patients are treated with RT for Stage I or II seminoma.
18. In bladder cancer treated with radical cystectomy, ____ percent of patients were upstaged from clinical staging after surgery.¹⁷ (two words)
19. In bladder cancer treated with radical cystectomy, ____ percent of patients were downstaged from clinical staging after surgery.¹⁷
20. The main treatment of localized muscle-invasive bladder cancer in Europe is ____.¹⁸
21. In muscle-invasive bladder cancer, the addition of _____ and mitomycin C to radiotherapy significantly improves locoregional control and metastasis-free survival while reducing cystectomy rates.¹⁹
22. T2 renal cell carcinoma is greater than ____ centimeters, according to the AJCC Staging.
23. The single most common location of tumor in penile cancer is in the ____.
24. Approximately ____ percent of patients presenting with microscopic hematuria will have bladder cancer.²⁰
25. The chemotherapeutic agent with comparable disease-specific survival to radiation therapy in Stage I seminoma is ____.²¹

Answers:

1. EIGHT
2. SIXTY
3. TWO
4. SIX
5. ELEVEN
6. THREE
7. TWENTYFOUR
8. TEN
9. TWENTY
10. NINE
11. HYPOFRACTIONATION
12. FORTY
13. SWOG
14. RADIOTHERAPY
15. THIRTEEN
16. EIGHTY
17. FIFTY
18. FORTYTWO
19. SIX
20. SURGERY
21. FLUOROURACIL
22. SEVEN
23. GLANS
24. FIVE
25. CARBOPLATIN

Down

1. EIGHT
2. SIXTY
8. TEN
9. TWENTY
10. NINE
12. FORTY
13. SWOG
14. RADIOTHERAPY

16. EIGHTY
17. FIFTY
18. FORTYTWO
21. FLUOROURACIL
22. SEVEN
25. CARBOPLATIN

Across

3. TWO
4. SIX
5. ELEVEN
6. THREE
7. TWENTYFOUR
11. HYPOFRACTIONATION
15. THIRTEEN
19. SIX
20. SURGERY
23. GLANS
24. FIVE

Conflict of interest

Dr. Mitin receives research funding from Novocure. No author has any pertinent conflicts of interest.

Financial disclosure

This study was not funded. Dr. Mitin receives research funding from Novocure. No other author has financial disclosures.

Acknowledgements

No funding was received for this project.

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