

Sylvester Researchers Join International Study of Penile Cancer

Rare cancers, like other orphan diseases, can be challenging to study and treat. Researchers often have difficulty finding enough patients to perform reliable studies, which puts clinicians in a bind. With little, if any, personal experience treating the disease, they cannot even go to the medical literature for answers. Penile cancer is a good example.



Node dissection.

“Penile cancer is pretty rare,” said Chad Ritch, M.D., a urologic oncologist and researcher at Sylvester Comprehensive

Cancer Center at the University of Miami Miller School of Medicine. “We’re a referral center, and we only see maybe 20 cases a year. Many urologists probably only see one or two in 10 years.”

To improve care, researchers from multiple sites are coming together to conduct the [International Penile Advanced Cancer Trial](#) (InPACT). The study is currently recruiting patients with high-risk penile cancer, in which the cancer may have spread to the lymph nodes.

In the trial, some patients will receive surgery; some will have surgery and chemotherapy; others will have surgery, chemotherapy, and radiation. Patients will be followed for two years to check their long-term progress. The goal is to identify the most effective sequence and combination of treatments for most patients.

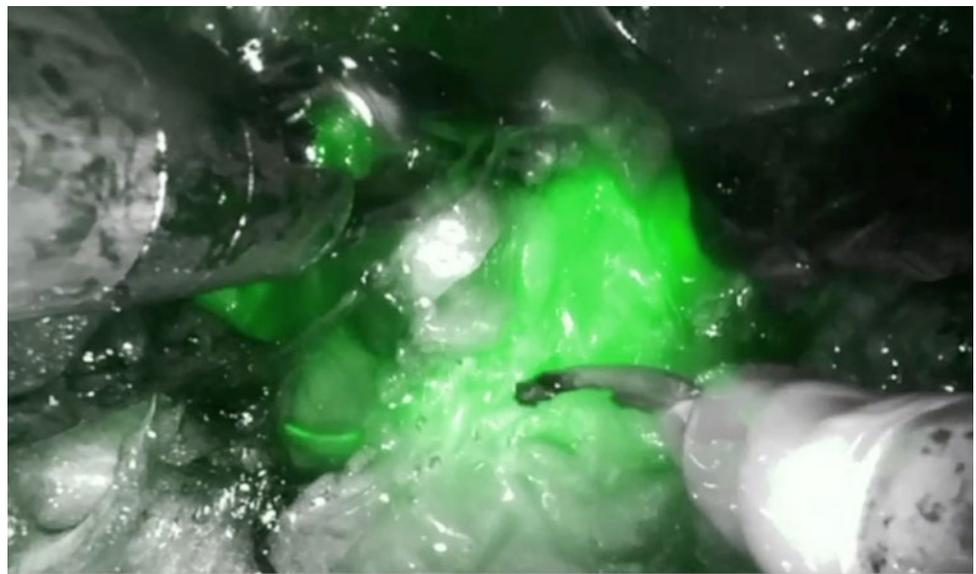
Increase survival time, reduce complications

Led by scientists at MD Anderson Cancer Center in Houston, the study has sites in the United Kingdom, Europe and South America and seeks to enroll around 400 patients. The ultimate goal is to increase survival time and reduce complications. In addition to researching treatments, tumor samples will be preserved for future genomic studies.

“Since it’s such a rare disease, we don’t know what the optimal treatment sequence is,” said Dr. Ritch, who is the principal investigator for this study at Sylvester and an associate professor of urology at the Miller School. “We don’t know if some men just need surgery and whether chemotherapy and radiation are best used before or after surgery. This will

show us the appropriate treatment approach for different patients.

“This is the currently the only major randomized control surgical trial I know of in penile cancer,” Dr. Ritch added. “Just having a decent sample size for a cancer like this will be an enormous boost.”



Fluorescent imaging using ICG.

The InPACT trial fits perfectly into Sylvester’s overall efforts to combat penile cancer. Dr. Ritch and colleagues have pioneered the use of robotic surgery to dissect suspicious lymph nodes in the groin area. Their work has dramatically reduced the risk of surgery and improved recovery times for many patients.

Fewer infections, shorter stays

“The old way of doing this was to make an incision along the groin, and that was a rough operation,” Dr. Ritch said. “Men were in the hospital for a few days and were at high risk for

infection. We were one of the first institutions to do this robotically and have one of the largest series in the country. We've experienced fewer wound infections and patients can typically go home the next day."

This expertise has made Sylvester a key destination for penile cancer patients – and an ideal site for the study.

"We're a resource for penile cancer patients across the nation," Dr. Ritch said. "That should help us a lot with this trial. We are actively recruiting, and we should be able to find answers that will help patients everywhere."

For more information on this trial, call 305-243-9674 or click [here](#).

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