Letters To The Editor

Metastatic Adenoid Cystic Carcinoma of Salivary Glands: Case Reports and Review of the Literature

To the Editor. -- I agree with the conclusions of Dr Spiers and colleagues[1] that while some agents are "active" in the treatment of this disease, there is no real evidence for any significant efficacy. In many patients, metastatic disease is indolent and may not need to be treated for some time.

Fast neutron radiotherapy is now widely regarded as the most effective form of treatment for patients with locally advanced/unresectable adenoid cystic carcinomas of major and minor salivary glands. At the University of Washington, we annually treat 70+ patients with advanced salivary gland malignancies (adenoid cystic carcinoma and other histologies). We continue with follow-up on these patients even after they have returned to their home area, and we are consulted at such times as these patients may develop metastatic disease. Hence, if someone had a "bright idea" regarding a chemotherapy trial for adenoid cystic carcinoma metastasis, it could be coordinated through our Center. A report on our series of adenoid cystic carcinomas of the minor salivary gland has been recently published.[2]

At the recent International Conference on Head and Neck Cancer in Toronto, we reported on approximately 150 patients with carcinomas arising in major salivary glands, 39 of whom had adenoid cystic histologies. On multivariate analysis, it appears that the presence or absence of lymph node metastasis is the main determining factor on the probability of a patient's developing subsequent metastatic disease; therefore, a "higher risk" subpopulation could be identified for a neoadjuvant protocol.

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