

# Cardiac Effects of Radiation Therapy

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**DCEG Radiation Epidemiology and Dosimetry Course 2019**

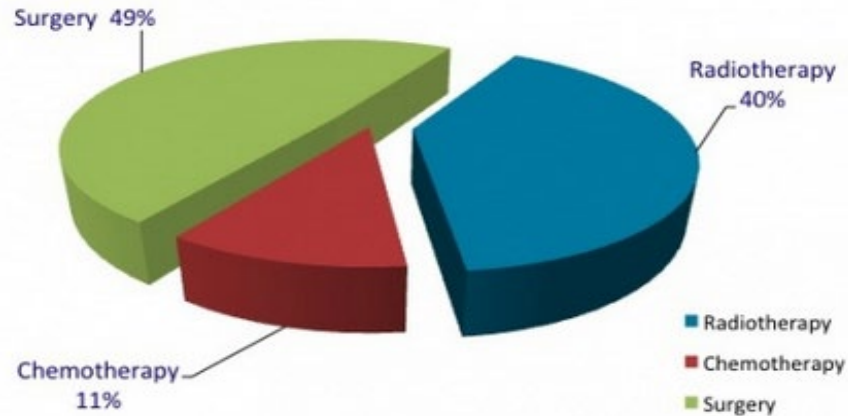


CANCER  
RESEARCH  
UK



# Radiotherapy cures cancers

What can currently cure cancer?



Professor Sir Mike Richards, NCRI 2011

DH Cancer Reform Strategy 2007 – Aim - 'World Class Radiotherapy'

# Types of Epidemiological Study

1. Descriptive studies
2. Randomised trials
3. Cohort studies
4. Nested case-control studies

# Types of Epidemiological Study

## 1. Descriptive studies 1900s-1970s

Case reports

Case series

# Descriptive studies

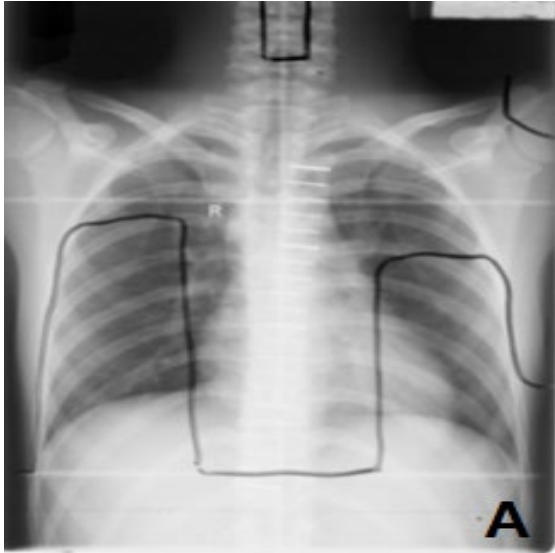
## MANTLE IRRADIATION IN HODGKIN'S DISEASE *An Analysis of Technique, Tumor Eradication, and Complications*

RICHARD J. CARMEL, MD, AND HENRY S. KAPLAN, MD

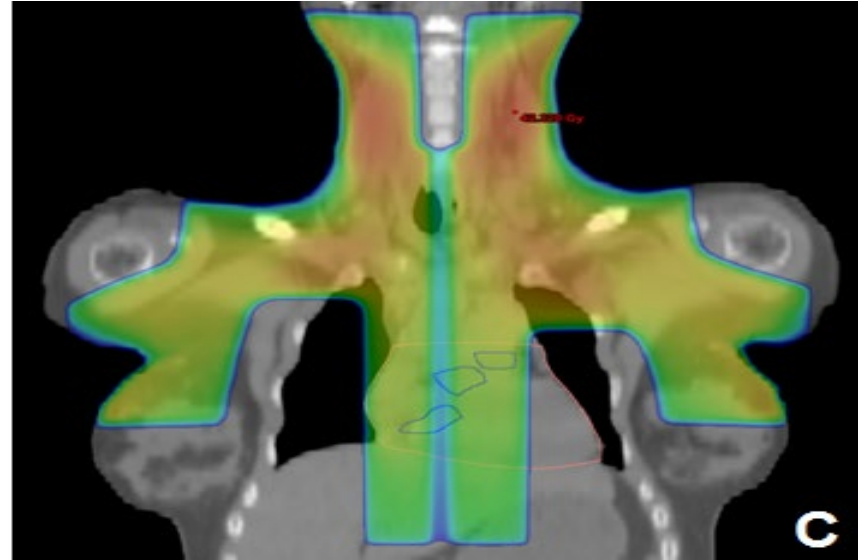
**T**HE "MANTLE" IS A SINGLE ANTEROPOSTERIOR radiation therapy field designed to treat in continuity the major lymph node-bearing areas above the diaphragm w

# Descriptive studies

## Mantle irradiation, Hodgkin Lymphoma



Radiotherapy  
planning X-ray



Dose reconstructed with  
modern techniques.

# Descriptive studies

## MANTLE IRRADIATION IN HODGKIN'S DISEASE

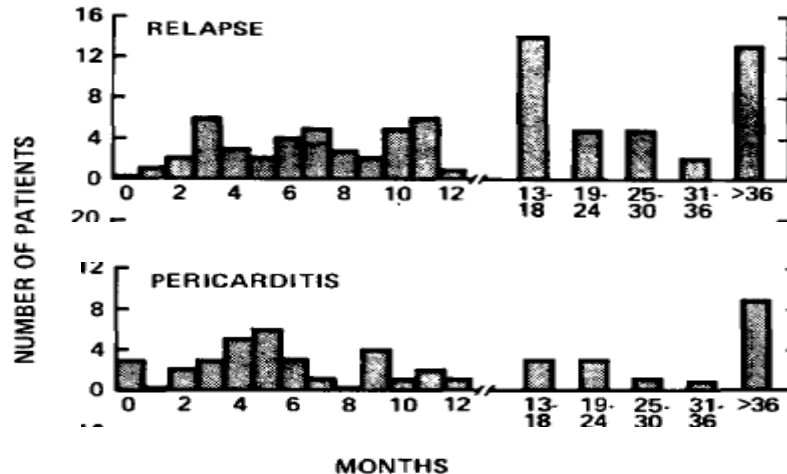
*An Analysis of Technique, Tumor Eradication, and Complications*

RICHARD J. CARMEL, MD, AND HENRY S. KAPLAN, MD

### Mantle Treatment

The 377 patients within the study received mantle irradiation with a mean midline dose to the mediastinum of 4410 rads.

5 deaths from pericarditis

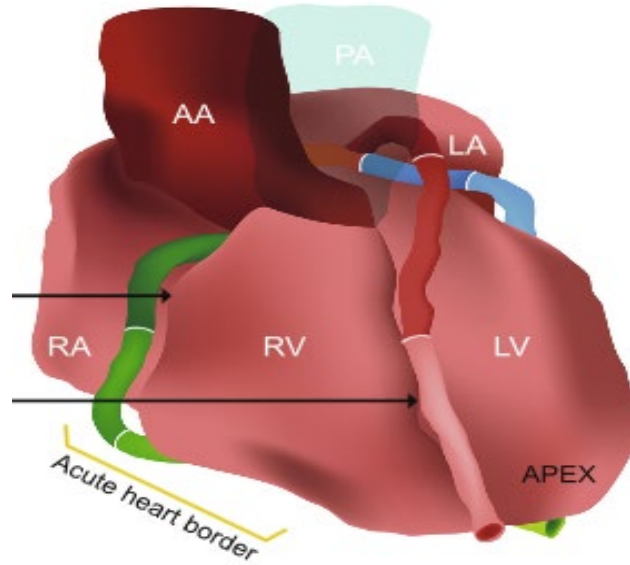


Interval from completion of radiotherapy to relapse/pericarditis

*Cancer* 37:2813-2825, 1976.

# Cardiac Anatomy

- Pericardium
- Coronary arteries
- Valves
- Muscle





# Types of Epidemiological Study

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# Randomised trial

**Experimental:** Randomization to exposure



Exposure:

Yes: 😊😊😊😊😊



Disease:

No: 😊😊😊😊😊



# Randomised trials

## Randomised to radiotherapy versus not

75 trials, 40,000 women, median entry 1983

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Type of surgery	No. of trials	No. of women	Deaths with no recurrence
Mastectomy (for cancer)	36	16,156	2921
Breast conserving (for ca.)	18	11,655	1270
Various (for cancer)	17	9066	1666
<b>All trials</b>	<b>75</b>	<b>40,781</b>	<b>6064</b>

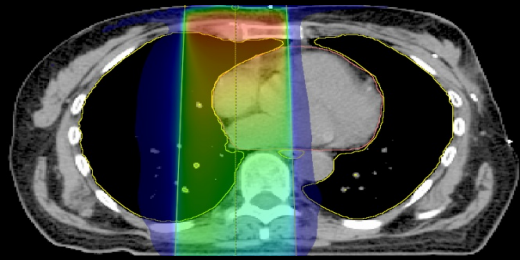
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# Randomised trials

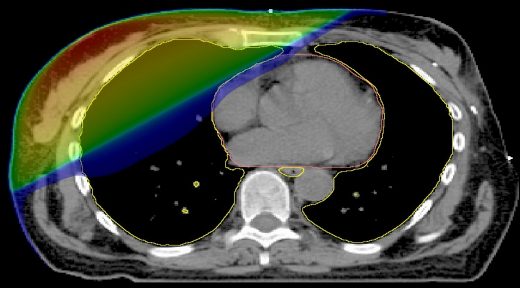
## Heart disease mortality

Cause	Total deaths	Excess deaths	Rate ratio (95% CI)	2p
<b>Heart disease</b>	<b>1253</b>	<b>143</b>	<b>1.30 (1.15-1.46)</b>	<b>&lt;0.0001</b>
Ischaemic heart dis.	751	90	1.31 (1.13-1.53)	0.0005
Heart failure	96	28	1.94 (1.27-2.98)	0.002
Valve disease	46	14	1.97 (1.07-3.67)	0.03
Other heart disease	360	11	1.08 (0.86-1.35)	0.52

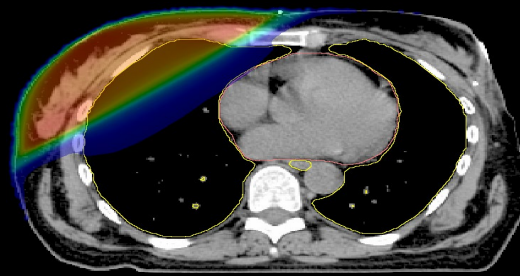
# Radiotherapy by decade in trials



1970s

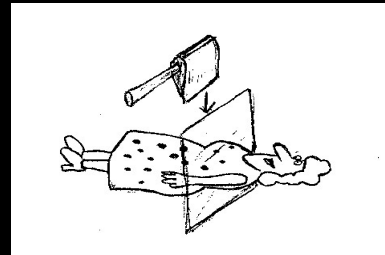


1980s



1990s

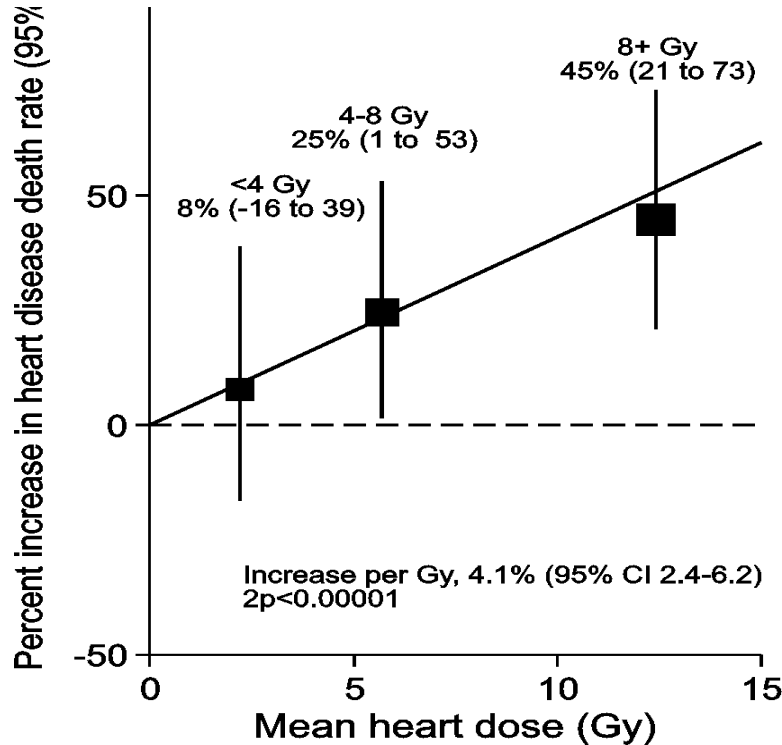
c/o Dr Fran Duane



# Randomised trials

## Heart dose-response relationship

1253 cardiac deaths in 40,000 women



*Very approximate information on heart dose based just on trial description*

**4.1% (2.4 - 6.2)**

## Still need .....

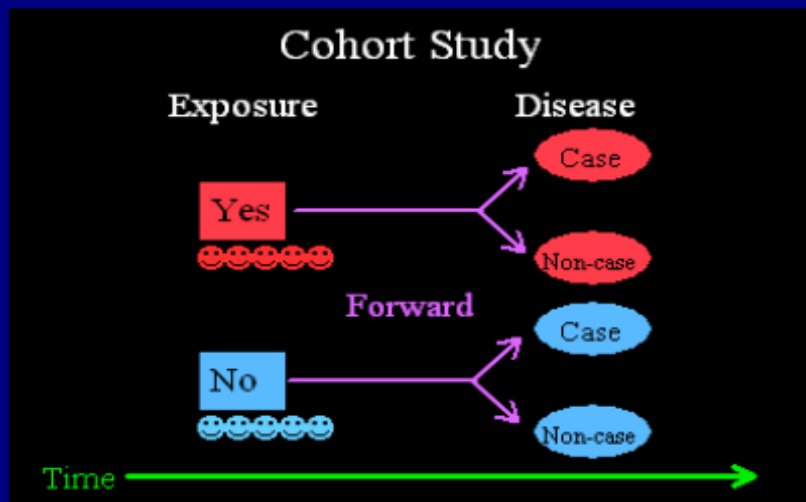
- Large studies in the *general* patient population
- Data on non-fatal and fatal events
- More detailed studies:
  - Individual information on radiation heart dose
  - Medical history at time of cancer diagnosis including, eg pre-existing heart disease



# Types of Epidemiological Study

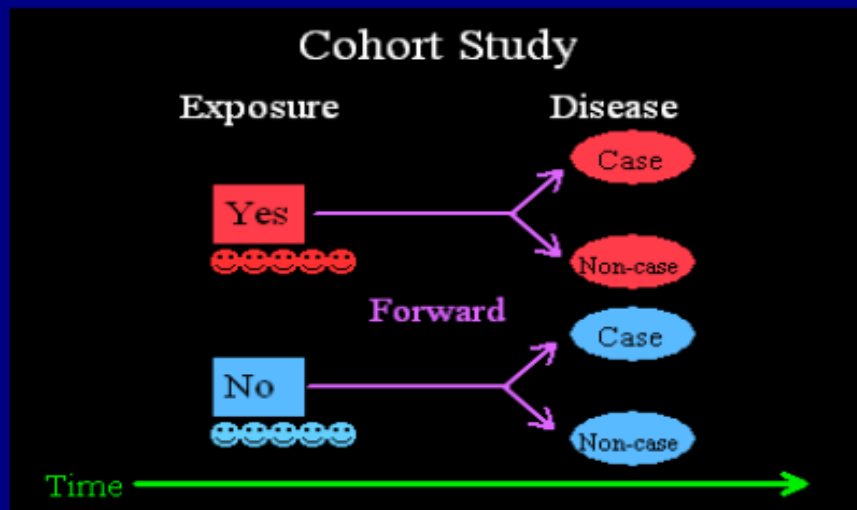
1. Descriptive studies
2. Randomised trials
3. **Cohort studies**
4. Nested case-control studies

# Cohort Study



- Compare disease status in exposed vs. non-exposed
- Prospective
- May take many years to follow-up the cohort

# Cohort Study



- Compare disease status in exposed vs. non-exposed
- Prospective
- May take many years to follow-up the cohort

# Cohort studies

## Cardiac mortality: Radiotherapy *versus* not

~2 million women

57 cancer registries in 22 countries

55,000 deaths from heart disease

53% irradiated

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Cardiac mortality ratio, RT *versus* not (95% CI)

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All women

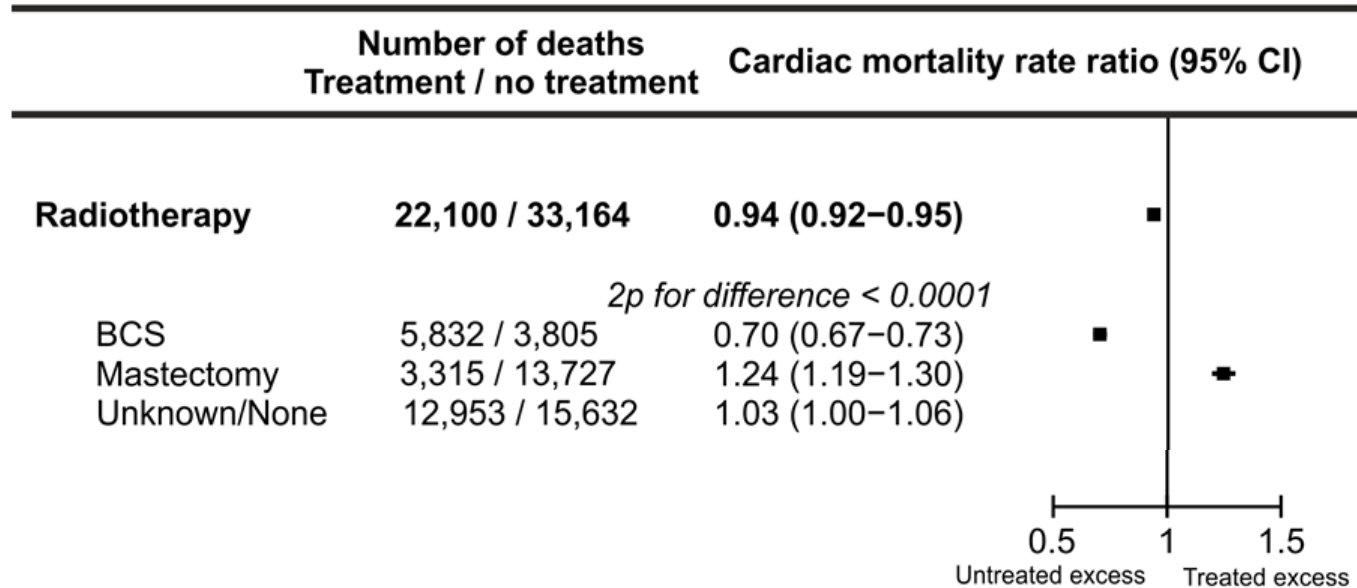
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0.94 (0.92-0.95)

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# Cohort studies

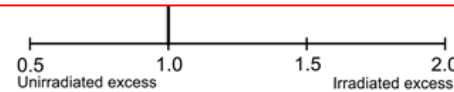
## Cardiac mortality: Radiotherapy *versus* not

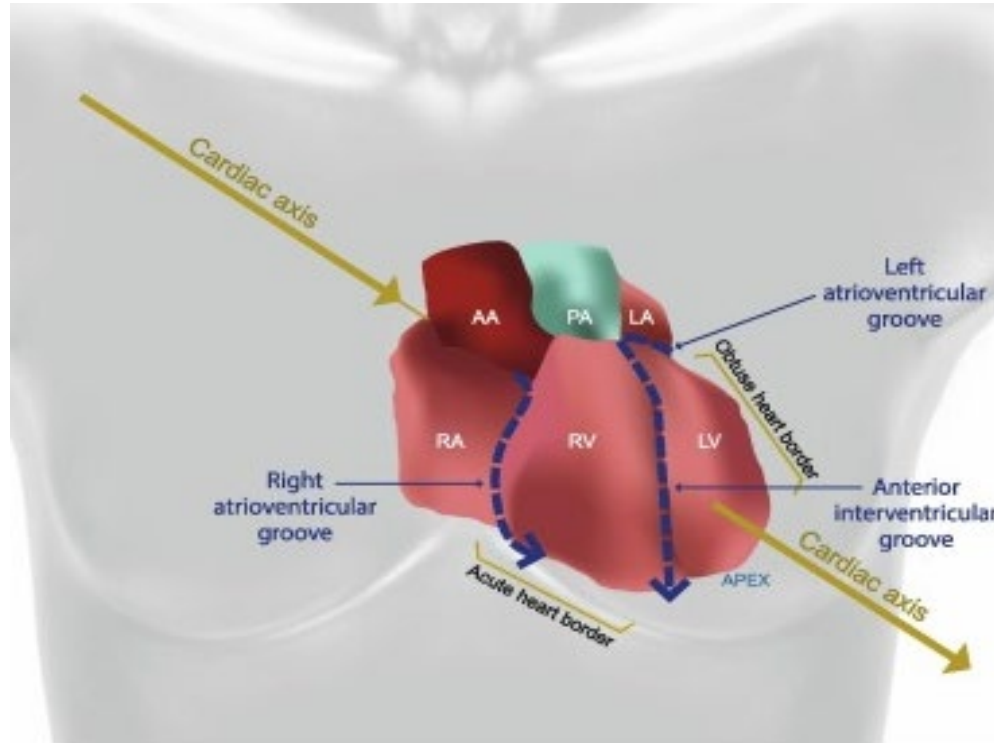


No. of deaths		Cardiac mortality rate ratio (95% CI)
Radiotherapy	no radiotherapy	
<b>Europe: Britain &amp; Ireland</b>		<i>2p for difference: 0.0003</i>
BCS	812 / 388	0.86 (0.76-0.97)
Mastectomy	514 / 793	1.18 (1.05-1.32)
Unknown / None	1,407 / 2,385	0.85 (0.79-0.90)
<b>Europe: Nordic countries</b>		<i>2p for difference: 0.002</i>
BCS	423 / 141	0.80 (0.65-1.00)

**\*\*\*\*\* WARNING \*\*\*\*\***

***The comparison of irradiated and unirradiated women outside the context of a randomised trial may not provide information about the risk of radiation-related heart disease***



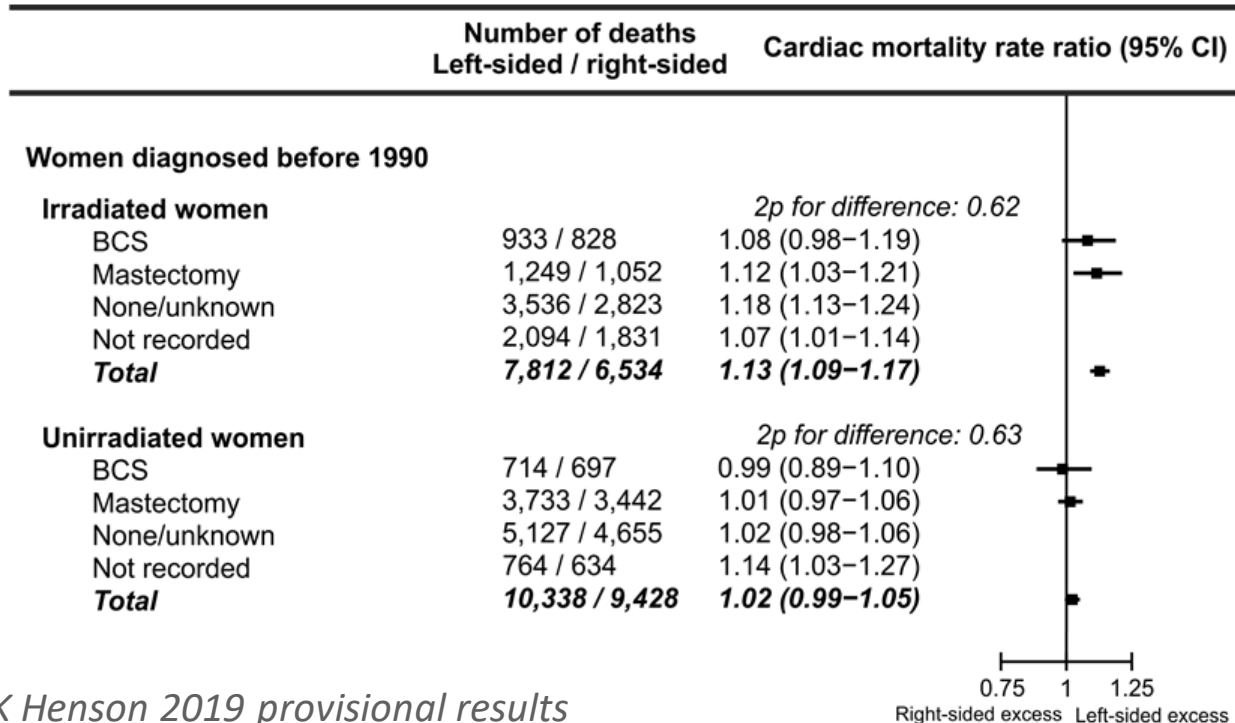


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# Cohort studies

## Cardiac mortality ratios

### Left-sided vs right-sided breast cancer





# Cohort studies

- If the decision to give radiotherapy did not depend on laterality of the breast cancer, then .....
- we can regard the heart disease rates in women with left-sided and right-sided breast cancer as equivalent to a randomised trial.

# Cohort and case control studies

- Large studies in the general patient population
- Data on non-fatal and fatal events
- More detailed studies:
  - Individual information on radiation heart dose
  - Medical history at time of cancer diagnosis

# Cohort studies



Contents lists available at ScienceDirect

Radiotherapy and Oncology

journal homepage: [www.thegreenjournal.com](http://www.thegreenjournal.com)



Cardiac morbidity

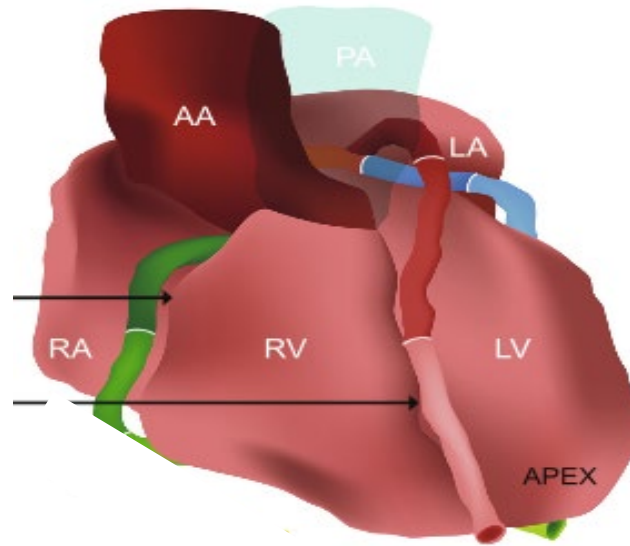
Incidence of heart disease in 35,000 women treated with radiotherapy for breast cancer in Denmark and Sweden

Paul McGale<sup>a</sup>, Sarah C. Darby<sup>a,\*</sup>, Per Hall<sup>b</sup>, Jan Adolfsson<sup>c</sup>, Nils-Olof Bengtsson<sup>d</sup>, Anna M. Bennet<sup>b</sup>, Tommy Fornander<sup>e</sup>, Bruna Gigante<sup>f</sup>, Maj-Britt Jensen<sup>g</sup>, Richard Peto<sup>a</sup>, Kazem Rahimi<sup>h</sup>, Carolyn W. Taylor<sup>a</sup>, Marianne Ewertz<sup>i</sup>

Left vs right-sided breast cancer:  
Heart disease incidence ratios

# Cardiac Anatomy

- Pericardium
- Coronary arteries
- Valves
- Muscle



# Cohort studies

## Left vs right-sided breast cancer:

35,000 women given breast cancer radiotherapy

Disease category	Events left/right	Incidence ratio, left vs. right (95% CI)	P
Ischaemic heart disease	878/712	1.18 (1.07-1.30)	0.001
Pericarditis	60/36	1.61 (1.06-2.43)	0.03
Valvular heart disease	94/60	1.54 (1.11-2.13)	0.009
Conduction disorders	445/453	0.94 (0.82-1.07)	0.35
Heart failure	310/315	0.95 (0.81-1.11)	0.51
<b>All heart disease</b>	<b>2275/2016</b>	<b>1.08 (1.02-1.15)</b>	<b>0.01</b>

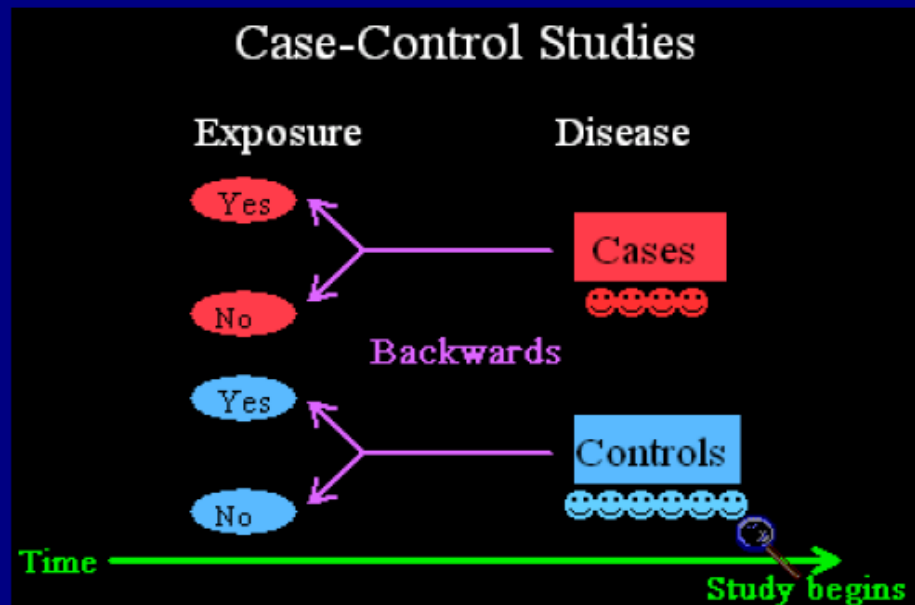
# Cohort and case control studies

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# Types of Epidemiological Study

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# Case-Control Study



- Compare exposure in cases vs. controls
- Retrospective



# Case control studies

*The* NEW ENGLAND  
JOURNAL *of* MEDICINE

ESTABLISHED IN 1812

MARCH 14, 2013

VOL. 368 NO. 11

## Risk of Ischemic Heart Disease in Women after Radiotherapy for Breast Cancer

Sarah C. Darby, Ph.D., Marianne Ewertz, D.M.Sc., Paul McGale, Ph.D., Anna M. Bennet, Ph.D.,  
Ulla Blom-Goldman, M.D., Dorthe Brønnum, R.N., Candace Correa, M.D., David Cutter, F.R.C.R.,  
Giovanna Gagliardi, Ph.D., Bruna Gigante, Ph.D., Maj-Britt Jensen, M.Sc., Andrew Nisbet, Ph.D.,  
Richard Peto, F.R.S., Kazem Rahimi, D.M., Carolyn Taylor, D.Phil., and Per Hall, Ph.D.

Nested in cohort study

Danish Breast Cancer Cooperative

Group and Swedish Cancer Registry

# Case control studies

## Population-based case-control study of major coronary events

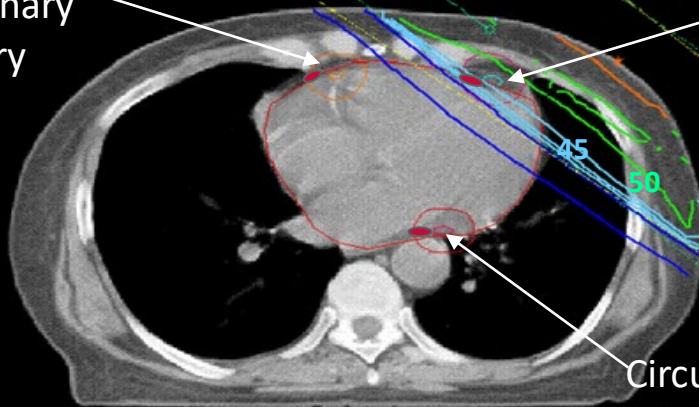
- Population: Women irradiated for breast cancer
- 963 cases (Major Coronary Events)
- 1205 controls also irradiated for breast cancer
- Information from oncology records (medical history and radiotherapy plans)

# Case control studies

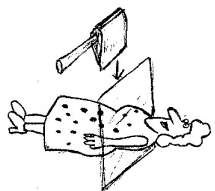
## Individual patient doses

Right coronary artery

Left anterior descending coronary artery

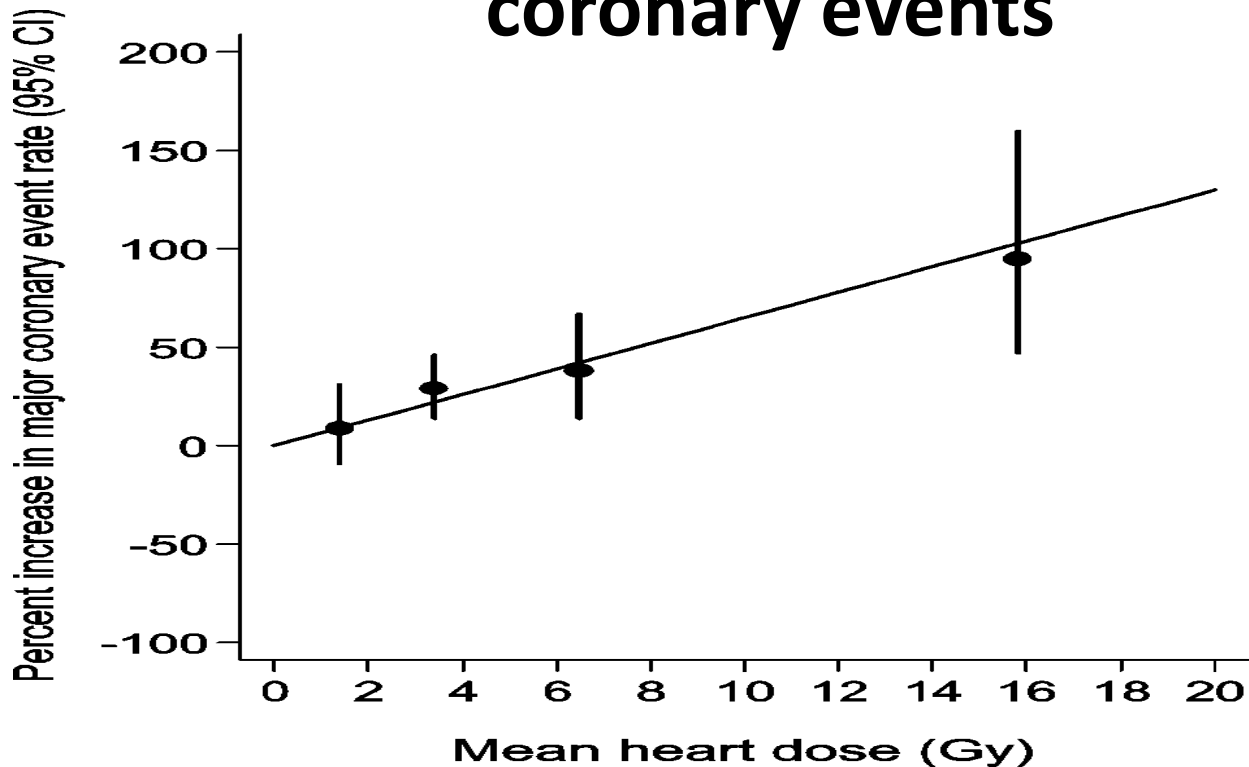


Circumflex coronary artery



# Case control studies

## Dose-response relationship for major coronary events



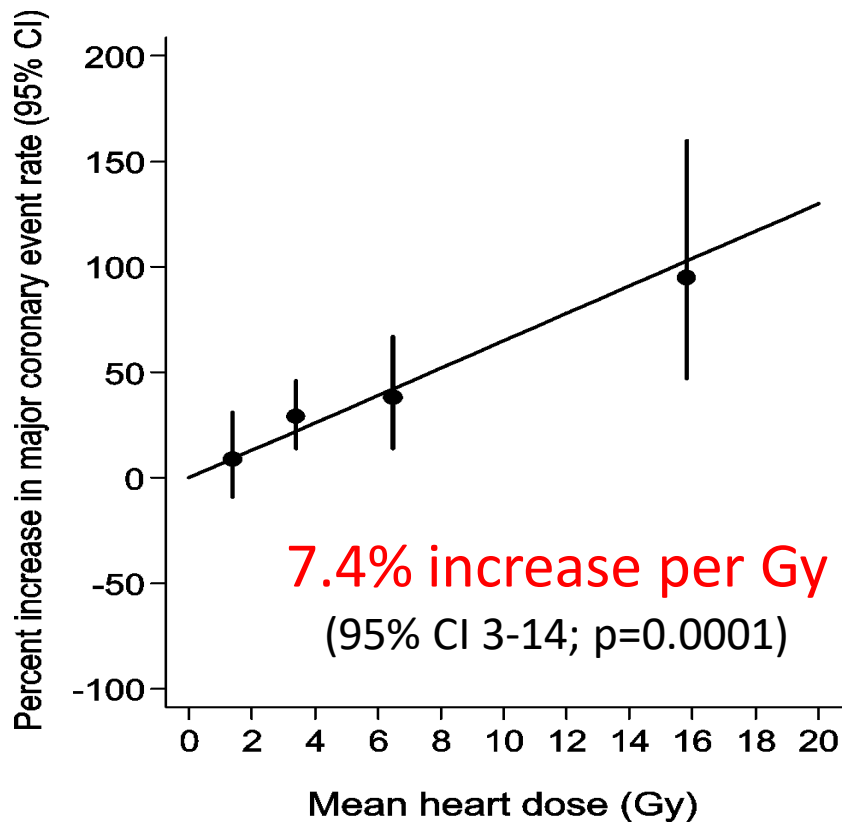
*t al, NEJM 2013*

# Case control studies

Major coronary event rate per Gy mean heart dose

		Average dose to heart (Gy)	% increase in MCE rate/Gy (95%CI)	2p for diff
Cardiac risk factor	No	5.1	7.4 (2.0-20.3)	0.99
	Yes	4.9	7.4 (1.2-20.1)	

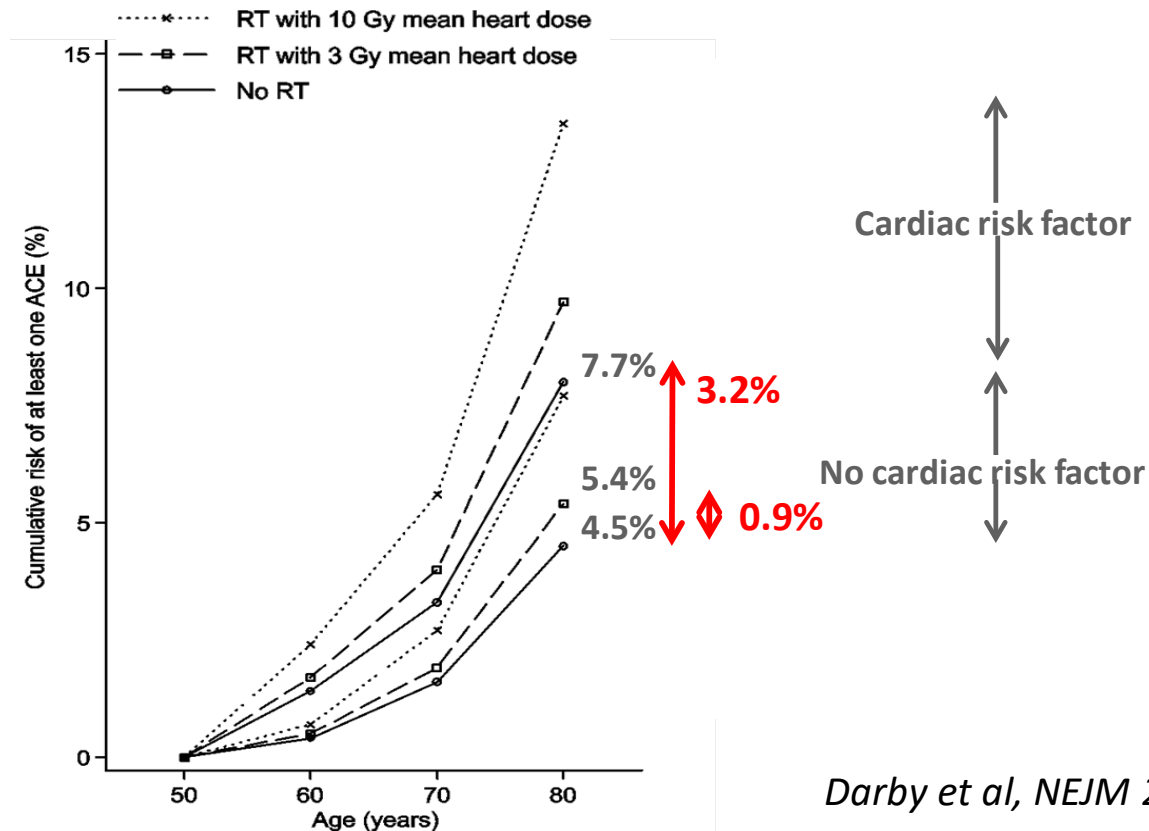
# Case control studies



*Same slope for women with and without cardiac risk factors at time of breast cancer diagnosis*

# Case control studies

## Risks by age 80 of radiotherapy at age 50



Darby et al, NEJM 2013

# Ischaemic Heart Disease:

## Current position

- Risk proportional to whole heart dose
- No known threshold
- Radiation-related risk multiplies pre-existing risk
- Risk starts within first 5 years, continues for several decades



# Case control studies

ARTICLE

## Risk for Valvular Heart Disease After Treatment for Hodgkin Lymphoma

David J. Cutter\*, Michael Schaapveld\*, Sarah C. Darby, Michael Hauptmann, Frederika A. van Nimwegen, Augustinus D. G. Krol, Cecile P. M. Janus, Flora E. van Leeuwen, Berthe M. P. Aleman

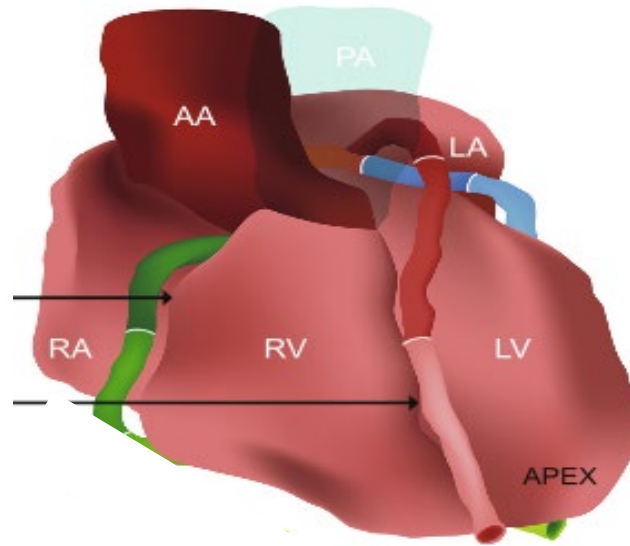
5-year survivors Hodgkin lymphoma

Nested in cohort of 1852 patients

Cases = valvular heart disease after radiotherapy

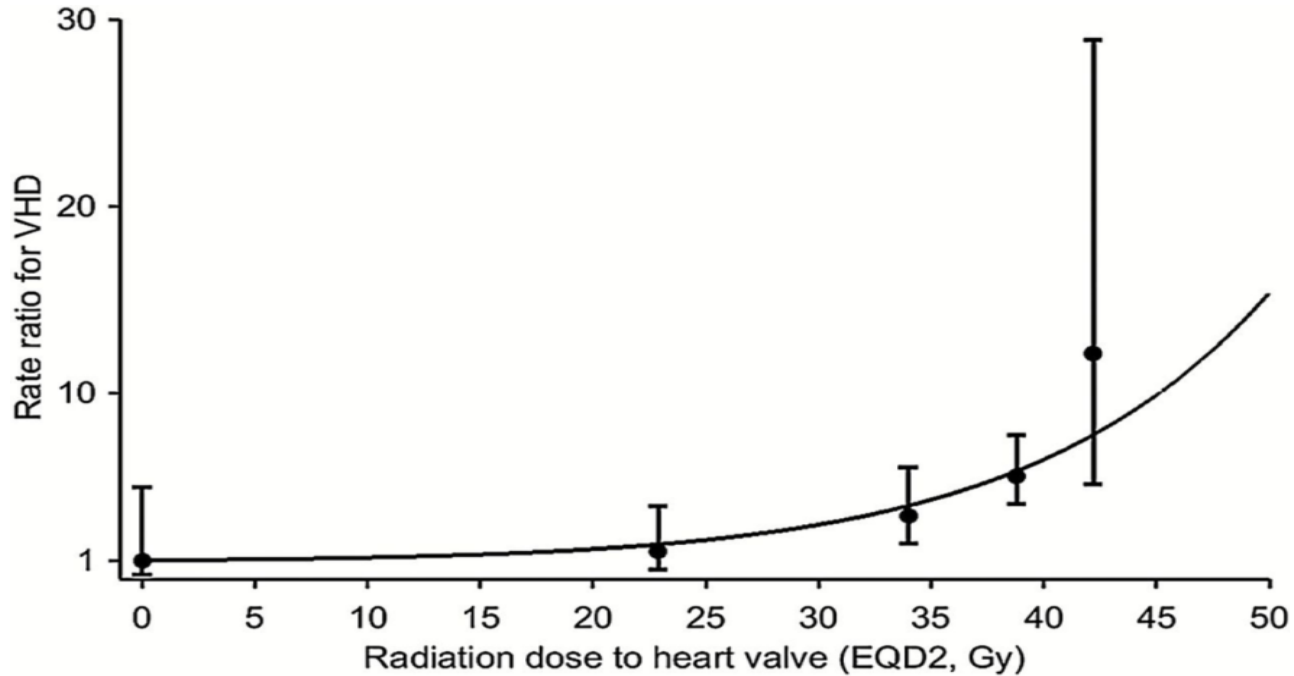
# Cardiac Anatomy

- Pericardium
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# Case control studies

## Valvular heart disease



# Case control studies

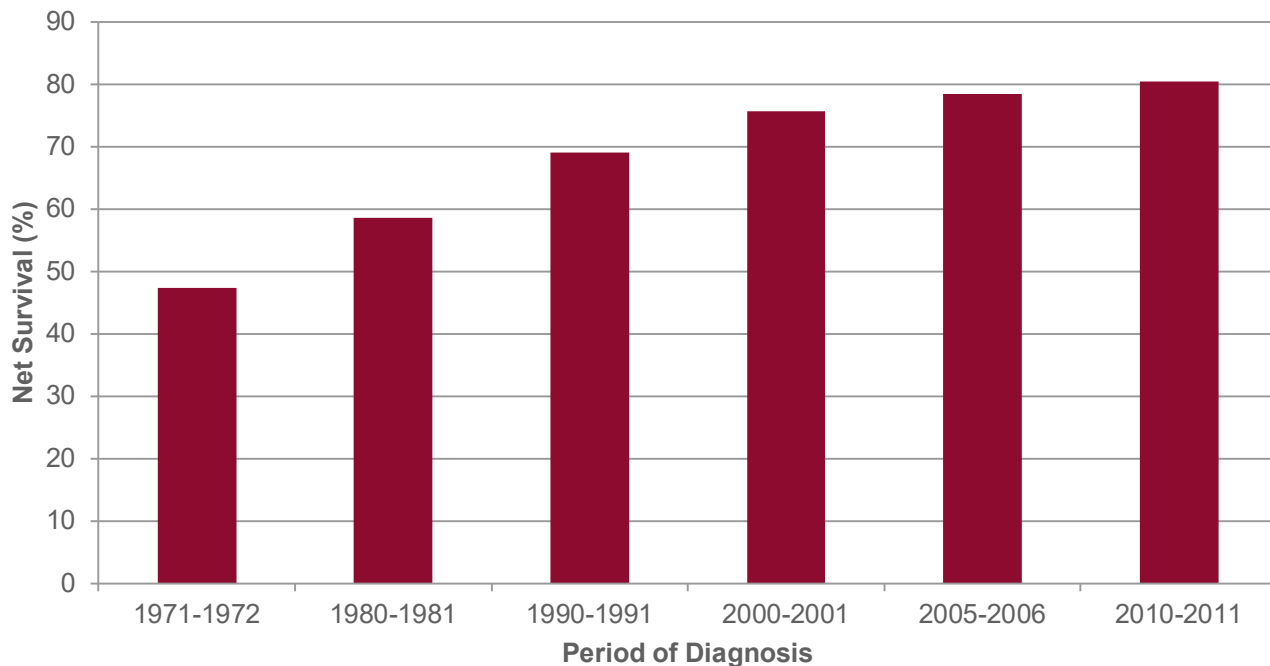
## Valvular Heart Disease: Current position

- Radiation increases the risk at  $>30$  Gy
- Little evidence of risk from lower doses
- Risk starts after 10 years

- Muscle: Heart failure can be caused by chemotherapy. Unclear about radiotherapy.

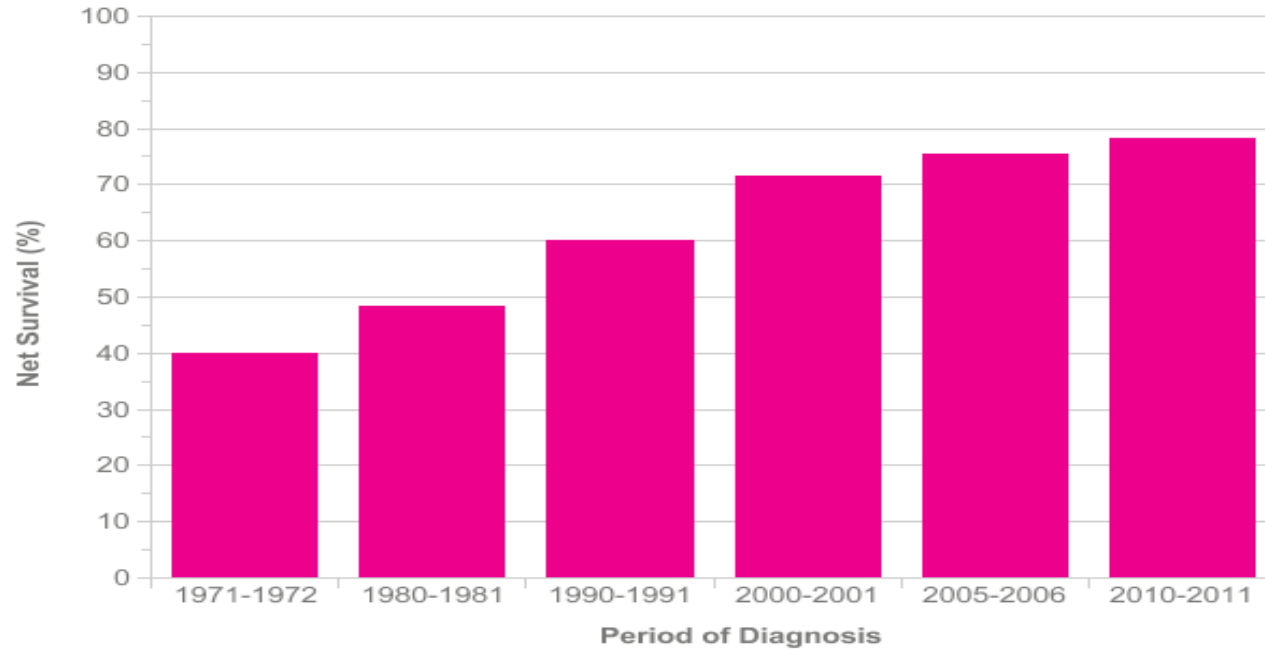
- Examples given for Hodgkin lymphoma and breast cancer.
- Good survival – many patients live a long time

# Ten-year survival Hodgkin Lymphoma



Age-Standardised Ten-Year Net Survival,  
England and Wales

# Ten-year survival Breast cancer



Age-standardised ten-year net survival,  
England and Wales

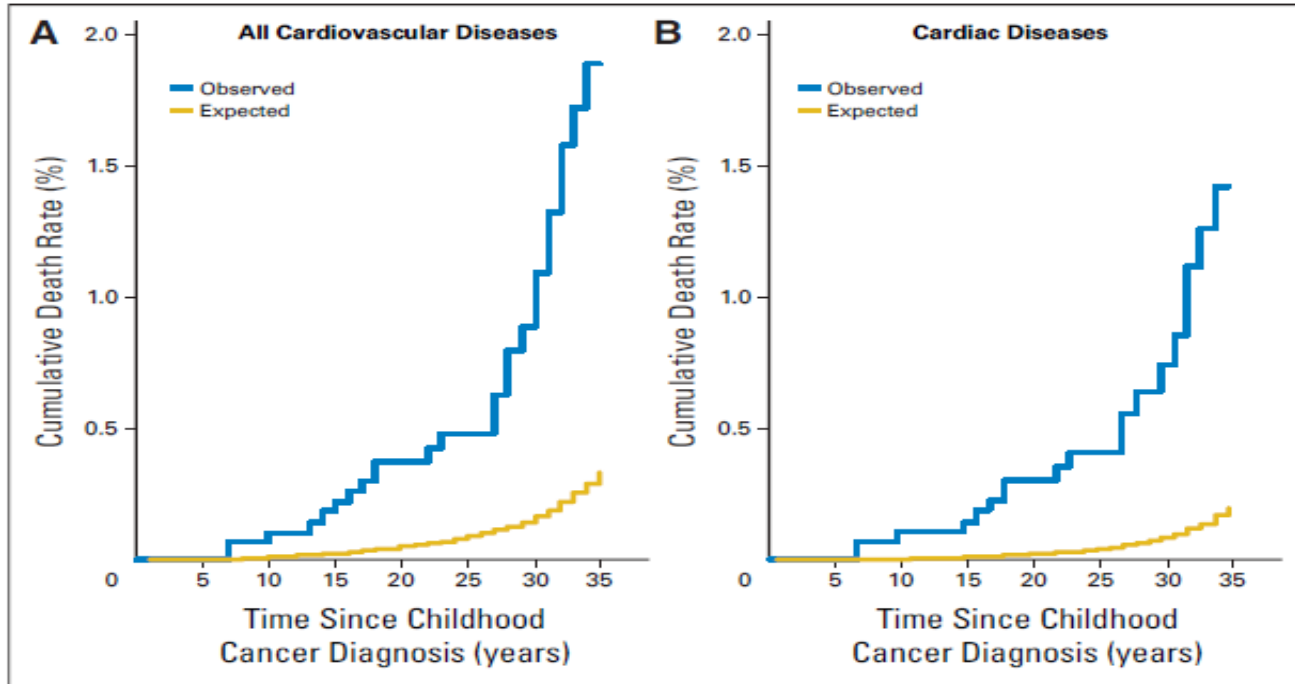


- Other adult cancers where radiotherapy involves heart:
  - Lung cancer
  - Oesophageal cancer

Survival poorer – few live a long time

# Cohort study

## Childhood cancer



# Cohort study

## Childhood cancer

- Linear relationship between heart dose and risk of cardiac mortality
- Estimated increase: 60% per Gy (7.4% for adults)
- Irradiating heart in childhood may affect growth of the heart

# Clinical decisions

Clinicians need absolute risks ...

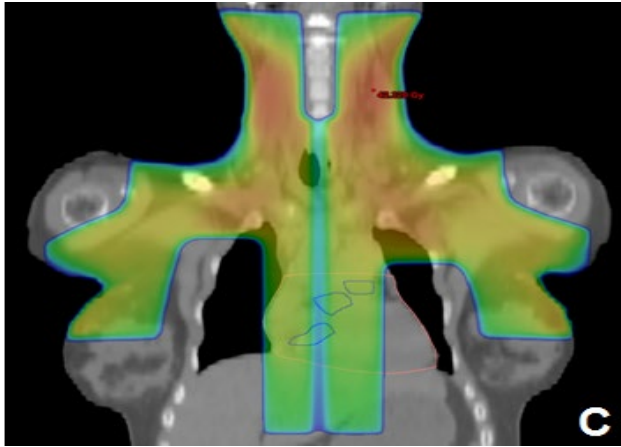
Heart  
disease



Cancer  
recurrence

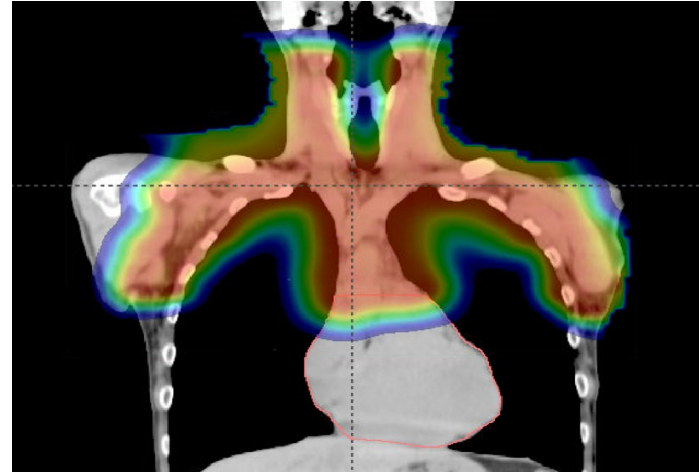
Balance absolute benefit and absolute risk

# Radiotherapy has changed Hodgkin lymphoma



1970s

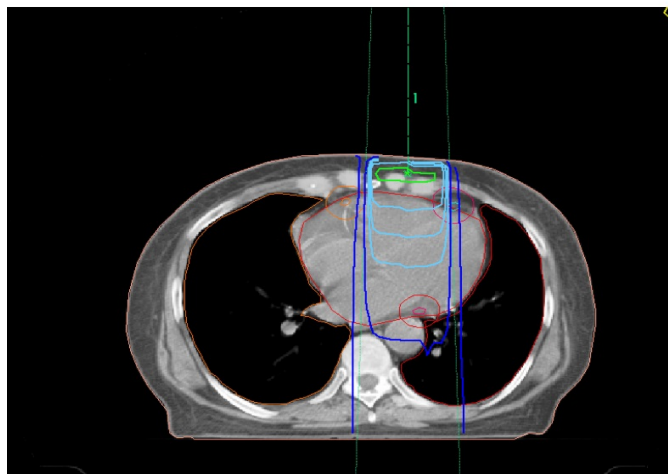
*c/o Dr David Cutter*



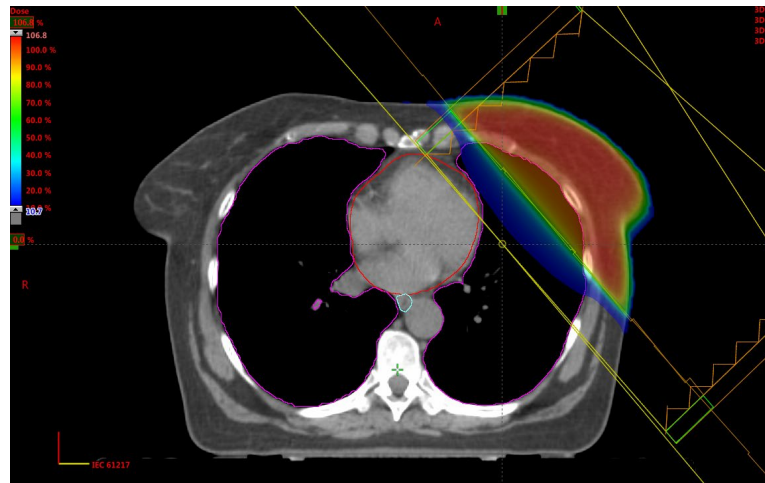
2010s

*c/o Dr Georgios Ntentas*

# Radiotherapy has changed Breast cancer



1970s



2010s

Thank you

# Quiz 1

The commonest type of radiation-induced heart disease is:

- a) Heart failure
- b) Ischaemic heart disease
- c) Valve disease



# Quiz 1

The commonest type of radiation-induced heart disease is:

- a) Heart failure
- b) Ischaemic heart disease
- c) Valve disease

## Quiz 2

Heart radiation doses from today's radiotherapy are similar to doses from 1970s radiotherapy

True/False

# Quiz 2

Heart radiation doses from today's radiotherapy are similar to doses from 1970s radiotherapy

True/False

# Quiz 3


The cardiac risks from modern radiotherapy outweigh the benefits for most patients

True/False

# Quiz 3

The cardiac risks from modern radiotherapy outweigh the benefits for most patients

True/False



U.S. Department of Health & Human Services  
National Institutes of Health | National Cancer Institute

[cancer.gov/dceg](https://cancer.gov/dceg)

1-800-4-CANCER

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