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Gichuhi, S; Irlam, JJH

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Abstract:

Background: Squamous cell carcinoma of the conjunctiva is a rare, slow-growing tumour of the eye, normally affecting elderly men around 70 years of age. In Africa, however, the disease is different. The incidence is rising rapidly, affecting young persons (around 35 years off age), and usually affecting women. It is more aggressive, with a mean history of three months at presentation. This pattern is related to the coexistence of the HIV/AIDS pandemic, high HPV exposure, and solar radiation in the region. Various interventions exist, but despite therapy, there is a high recurrence rate (up to 43%) and poor cosmetic results in late disease. This review was conducted to evaluate the interventions for treatment of conjunctival squamous cell carcinoma in HIV-infected individuals. Objectives: To evaluate the effect of interventions for treating squamous cell carcinoma of the conjunctiva in HIV-infected individuals on local control, recurrence, death, time to recurrence, and adverse events. Search strategy: Using a sensitive search strategy, we attempted to identify all relevant trials, regardless of language or publication status, from the following electronic databases; Medline/PubMed, CENTRAL, AIDSearch, EMBASE, LILACS, African Healthline, Cochrane HIV/AIDS Specialised Register, and the Cochrane Cancer Network Specialised Register. We searched the clinical trial register of the US National Institutes of Health, searched the international conference proceedings of AIDS and AIDS-related cancers, and contacted individual researchers, research organisations, and pharmaceutical companies that manufacture the drugs used as interventions. Searches were one between September 2005 and June 2006. Selection criteria: Randomised controlled trials (RCTs) involving HIV-infected individuals with ocular surface squamous neoplasia. Data collection and analysis: We independently screened the results of the search to select potentially relevant studies and to retrieve the full articles. We independently applied the inclusion criteria to the potentially relevant studies. No studies were identified that fulfilled the selection criteria. Main results: No RCTs of interventions currently used against conjunctival squamous cell carcinoma in HIVinfected individuals were identified.

Authors' conclusions:

Implications for practice: Current clinical practice in treatment of squamous cell carcinoma of the conjunctiva rests on a weak evidence base of case series and case reports. Implications for research: Randomised controlled trials for treatment of this disease are needed in settings where it occurs most frequently. Preventive interventions also need to be identified. HIV/AIDS research has not focused on treatment of this tumour.