

39.6 The efficacy of surgery for recurrent nasopharyngeal carcinoma

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The primary treatment modality for nasopharyngeal carcinoma (NPC) is radiotherapy. When malignant tumour recurs or persists either in the neck or in the nasopharynx after radiation, then surgical salvage is still possible when appropriately performed.

When recurrence is localized in the neck, radical neck dissection (RND) should be performed and this could achieve 66% control of tumor in the neck. The 5-year actuarial survival was 37%. RND is the treatment of choice as determined by pathological studies. Step serial section of 43 whole RND specimens showed that 70% of specimens contained more tumor-bearing lymph nodes than clinically evident, and over 60% of the lymph nodes exhibited extracapsular tumor extension. Radical resection is necessary for successful salvage.

Recurrent NPC in the nasopharynx after radiotherapy which are of less than 1 cm in diameter can be managed with the split palate insertion of gold grain as brachytherapy source. This has been done for 95 patients and the 5-year tumor control rate is over 75%.

Even larger tumors in the nasopharynx or those that have extended to the paranasopharyngeal space can be surgically removed via the anterolateral approach. The entire maxillary antrum attached to the anterior cheek flap can be swung laterally to expose the tumor. A total of 60 patients underwent the operation in the Department of Surgery, The University of Hong Kong Medical Center at Queen Mary Hospital from 1989 to 1998. Curative resection was achieved in 49 of them. The associated morbidity is low and this included trismus, palatal fistula and ectropion. The 5-year local tumor control rate of this selected group of patients was 52% and the 5-year actuarial survival rate was 43%.

39.7 Analysis of a major road traffic accident involving the overturn of a double decker bus

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The aim of the study is to review the mechanism of injury & outcome of all trauma patients of a major Road Traffic Accident involving the overturn of a high speed double decker bus with mass casualties.

On 30th January 1998, a double decker bus overturned whilst making a sharp turn at high speeds. A large number of passengers were injured from the incident. All the medical records of the 52 patients who received medical treatment on the day of the incident were reviewed.

52 patients were taken to three Accident & Emergency departments and subsequently admitted to two regional hospitals on Hong Kong island. There was found to be an equal distribution of male and female patients (27:25), with 8 children and 44 adults with a mean age of 42 years of age. Of these patients, one third suffered minor soft tissue injuries and were discharged home after assessment. Two patients were dead before arrival. The remaining 32 patients were admitted to hospital for treatment.

4 patients had isolated head injuries and were admitted to the Neurosurgical unit and 18 patients had multi-organ injuries. 10 patients had severe injuries with an I.S.S. score of > 15. 7 of these patients required emergency operations, and 4 subsequently needing ICU care. Of these patients, there were 2 hospital mortalities. The rest remain alive with variable morbidity.

Correlation of the seating plan of the bus and possible mechanisms of injury will be discussed.