

- Clinical Trials Exploring New Directions in Radiation Therapy
- Quality of Life Research
- Translational Research

What is the RTOG?

RTOG was established in 1967 as a cooperative effort of physicians, physicists, biologists, and biostatisticians to pursue clinical investigations designed to increase survival and improve the quality of life of patients with cancer. Over 300 academic and community-based facilities in the United States, Canada and internationally participate in RTOG clinical trials, including nearly 90 percent of all NCI-designated comprehensive and clinical cancer centers. Since its inception, RTOG has opened more than 460 protocols, enrolled over 75,000 patients to its studies, and published more than 700 papers reporting the results of its findings.

RTOG maintains a roster of 40 active studies devoted to the group's primary disease sites: central nervous system, head & neck, lung, gastrointestinal (esophagus, stomach, pancreas, anal canal, and rectum), genitourinary (bladder and prostate), breast, and cervix.

Over 60 RTOG staff members provide administrative, data management, statistical, quality assurance, and protocol development support for group investigators. The administrative and biostatistical staff is headquartered in the American College of Radiology Clinical Research Center in Philadelphia. RTOG receives National Cancer Institute funding as well as corporate support.

Information

- Semi-annual membership meetings feature discussions of current and planned research as well as scientific and educational symposia.
- Electronic newsletters, protocol updates, press releases and informational broadcasts keep members up-to-date with group activities.

To receive periodic electronic updates on RTOG activities send an email to:

info@rtog.org

To participate in or support the RTOG contact:

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RTOG's Mission

- Improve the survival outcome and quality of life of adults with cancer through the conduct of high-quality clinical trials.
- Evaluate new forms of radiotherapy delivery, including stereotactic radiotherapy, brachytherapy, 3-dimensional conformal radiotherapy (3-DCRT), and intensity-modulated radiotherapy (IMRT) in the context of clinical research.
- Test new systemic therapies in conjunction with radiotherapy, including chemotherapeutic drugs, hormonal strategies, biologic agents, and new classes of cytostatic, cytotoxic, and targeted therapies.
- Employ translational research strategies to identify patient subgroups at risk for failure with existing treatments and identify new approaches for these patients.

A Leader in Defining More Effective Cancer Therapies

For 40 years RTOG has conducted studies designed to improve the survival and quality of life of cancer patients. RTOG continues to define new national standards of care for cancer patients.

Brain Tumors – RTOG found that oligodendroglioma and anaplastic oligoastrocytoma patients with missing chromosomes 1p and 19q were more likely to respond to aggressive treatment with chemotherapy and radiotherapy and their progression-free survival increased by almost 5 years.

RTOG is also the first US research organization to coordinate an international brain tumor trial. This landmark study, employing high-dose temozolomide after radiotherapy for newly diagnosed glioblastoma patients, is a joint effort between the RTOG and the European Organization for Research and Treatment of Cancer (EORTC). The RTOG coordinated study enrolled 1174 patients from RTOG member institutions in the US and Canada, and from EORTC members across Europe.

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Brain Metastases – RTOG improved survival more than 33% for patients with a single brain metastasis by using whole brain radiotherapy followed by stereotactic radio-surgery instead of whole brain treatment alone.

Head and Neck Cancer – In a study for patients with high-risk head and neck cancer RTOG found that participants who received chemotherapy together with their radiotherapy after surgery were far less likely to have a recurrence of their cancer.

Lung Cancer – RTOG found that healthier patients with inoperable non-small-cell lung cancer had better results if they received chemotherapy during their course of radiotherapy rather than prior to radiotherapy.

Pancreatic Cancer – An Intergroup trial led by RTOG showed significantly improved survival for patients with advanced pancreatic adenocarcinoma when gemcitabine was given in addition to standard therapy after surgery.

Prostate Cancer – RTOG determined that radiotherapy combined with long-term hormone suppression significantly improves survival for men with high-grade prostate cancer (Gleason Score 8-10). However, men with locally advanced prostate cancer (Gleason Score 2-6) benefit most from hormonal suppression prior to radiotherapy.

How Can You Participate?

Patients – Talk to your doctor about participating in an RTOG sponsored research study. Visit our Web site to find out more information about RTOG, clinical trials, and other NCI sponsored groups.

Researchers – Join RTOG and participate in the future of national clinical trials research. Members have access to RTOG protocols as well as treatment drugs and devices that are only available through the RTOG. Membership is open to academic and community-based facilities.

Corporate Supporters – Support from industry allows RTOG to pursue research in emerging pharmaceuticals and technologies. Corporate sponsorship of group meetings, study-specific research, and educational programs helps RTOG fund projects not supported by grants. In addition, the RTOG Foundation allows corporate and private donors to give unrestricted contributions to further the Group's mission.

Visit our Web site or contact the RTOG Group Administrator for more information.

www.rtog.org

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