


24<sup>th</sup> March 2021  
**DAY 2**

Current issues and updates on  
clinical management and  
treatment of NPC



# Clinical Experience in Endoscopic Endonasal Transpterygoid Nasopharyngectomy (EETN) in local Residual or Recurrent Nasopharyngeal Carcinoma

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Endoscopic endonasal transpterygoid nasopharyngectomy (EETN) has emerged as a viable treatment option for local residual or recurrent NPC. Multidisciplinary discussion is needed to determine patient's eligibility for EETN. The factors that exclude patients from EETN surgery include extensive involvement of parapharyngeal space, internal carotid artery, cavernous sinus with multiple cranial nerve palsies, extension into brain parenchymal and presence of distant metastasis. A retrospective clinical record review was carried out for EETN cases done in Sarawak General Hospital from June 2013 till May 2017. A total of 55 locally recurrent NPC patients (rT1–rT4) underwent EETN with curative intent performed by single skull base surgeon, with postoperative adjuvant chemotherapy but without postoperative radiotherapy. There were no major postoperative complications. During a mean follow-up period of 18-month (range 12–48 months) post surgery, five patients (9.1%) had residual disease or recurrence at the primary site. All five patients underwent re-surgery. One patient at rT3 passed away 6 months after re-surgery due to distant metastasis complicated with septicaemia. The 1-year local disease-free rate was 93% and the 1-year overall survival rate was 98%. In conclusion, EETN is an emerging treatment option for locally recurrent NPC, with relatively low morbidity and encouraging short-term outcome. However, successful surgical outcome requires an experienced team and highly specialised equipment. Long-term outcome is yet to be determined due to the lack of longer follow-up and bigger cohort study

# EBNA1-guided imaging and therapy for EBV-associated cancers

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Epstein-Barr virus (EBV) is aetiologically linked to at least seven distinct types of human cancers. With all the EBV-associated tumours collectively imposing a dramatic global health burden estimated to reach 200,000 new cases annually, their complete eradication is highly imperative and is only achievable through our goal of a well-coordinated, multidisciplinary programme of fundamental research. Theranostics is the combination of diagnostic agents and targeted therapeutics that specifically permit the diagnosis of disease in individuals. By individualizing treatment, theranostics transforms from conventional therapy to a contemporary personalised and precision medicine approach. Herein, this seminar will show our development of dual-modality theranostics techniques (Optical, positron-emission tomography - PET and magnetic resonance imaging - MRI) for inhibition of EBV-associated cancers.