

《食道癌放射治療共識》

一、治療範圍

1. 食道腫瘤或腫瘤原發部位
2. 淋巴轉移病灶
3. 高風險淋巴轉移範圍

二、治療劑量 / 次數

▲輔助性放射治療 (手術後)

1. 總劑量
 - (a) 殘餘腫瘤 / 腫瘤原發部位：50Gy(50~50.4Gy) *
 - (b) 高風險範圍：48Gy(45~50.4Gy)
 - (c) 照射次數：27 次 (25~30 次)

▲根治性放射治療 (無手術)

1. 總劑量
 - (a) 腫瘤：50Gy(50~50.4Gy) *
 - (b) 高風險範圍：48Gy(45~50.4Gy)
 - (c) 照射次數：27 次 (25~30 次)

*上段食道癌可考慮增加劑量至 60~66 Gy；中下段食道癌可考慮增加劑量至 60 Gy。

▲前導性放射治療 (手術前)

1. 總劑量
 - (a) 腫瘤：48Gy(45~50.4Gy)

(b) 高風險範圍：48Gy(45~50.4Gy)

(c) 照射次數：27 次 (25~30 次)

或是

2. 總劑量

(a) 腫瘤：41.4Gy

(b) 高風險範圍：41.4Gy

(c) 照射次數：23 次

三、治療方式：

使用強度調控放射治療技術，包含弧形及螺旋放射規畫，可考慮搭配影像導引治療，治療選擇可使用同步照射高與低危險部位的方式或先給予整個照射部位部份劑量照射後，再針對高危險部位加強劑量。

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