

QUAD SHOT RADIOTHERAPY IN ADVANCED HEAD & NECK CANCER

Prospective study of tumour response, symptom relief and quality of life

PRIMARY RESULT

62.5%

overall tumour response  
(CR + PR; n = 48 assessable)

QUALITY OF LIFE

Global health  
42.3 → 64.7      p < 0.001

CLINICAL QUESTION

QUAD SHOT may provide tumour response and symptom palliation.

STUDY DESIGN

n = 52

prospective single-arm

n = 48

assessable for response + QoL

Stage III–IV / metastatic HNSCC  
• ECOG 2–3  
RECIST 1.1 • EORTC QLQ-C30 / H&N3 • CTCAE v5.0

QUAD SHOT REGIMEN

3.7 Gy

3.7 Gy

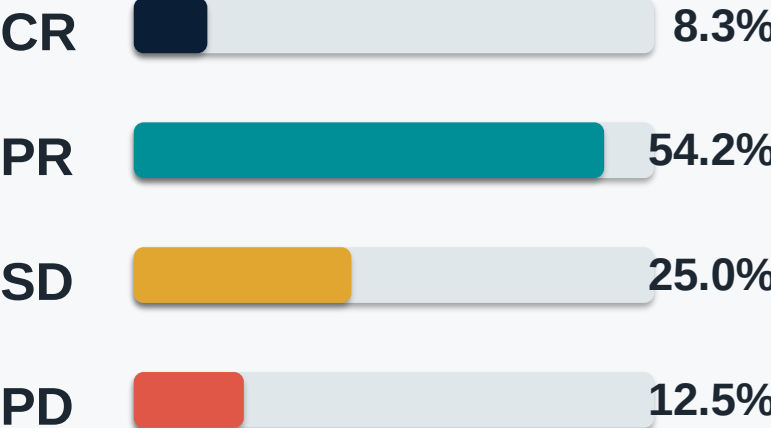
3.7 Gy

3.7 Gy

14.8 Gy / 4 fractions / 2 days

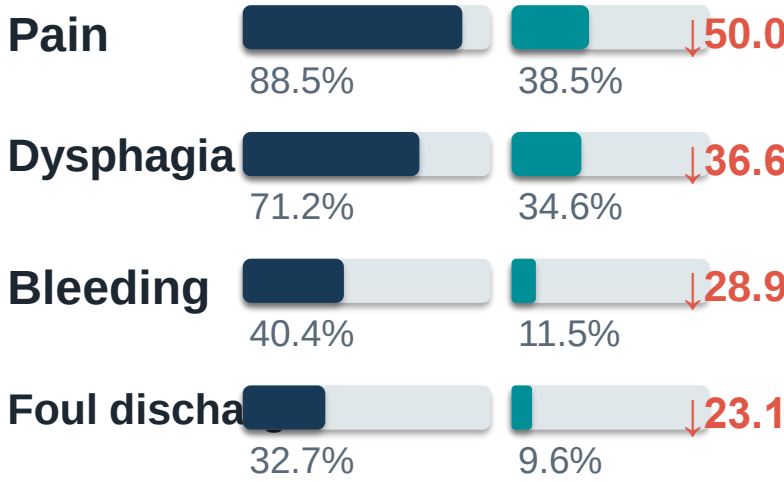
≥6 h apart • q3–4 weeks • up to 3 cycles

TUMOUR RESPONSE



CR + PR 62.5% response

SYMPTOM RELIEF

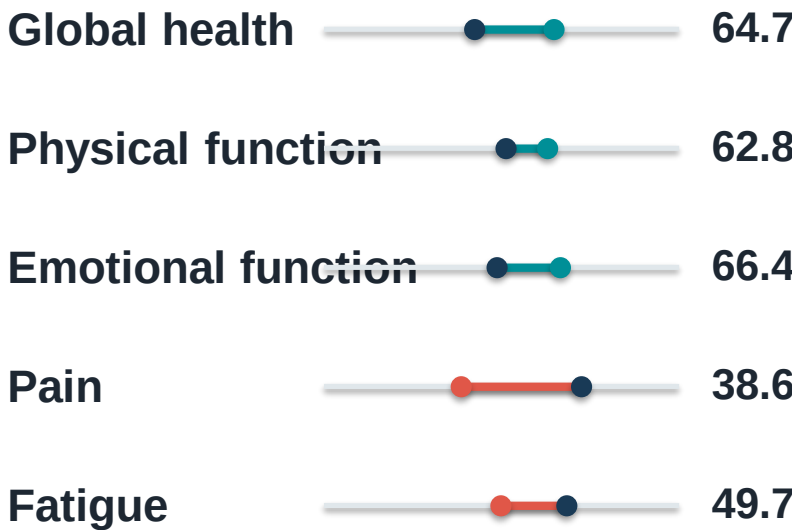


Baseline → post-treatment | percentage points

TREATMENT COMPLIANCE

92.3% ≥1 cycle      69.2% 2 cycles      46.2% 3 cycles

QUALITY OF LIFE



SAFETY

GRADE 1–2 most adverse events  
GRADE 3 minimal; mainly mucositis  
GRADE 4 none reported

TOXICITY



CLINICAL TAKE-HOME

QUAD SHOT was associated with tumour response, rapid symptom palliation and significant QoL improvement, with predominantly low-grade toxicity.

LIMITATIONS

- Single-arm design • modest sample size (n=52)
- Limited follow-up; long-term survival benefit not established

CONCLUSION

QUAD SHOT was associated with tumour regression, symptom relief and QoL gains, with no grade 4 toxicity or treatment-related death reported.

REFERENCES

Liu et al., Front Oncol 2026 • Toya et al., Oral Oncol 2024