

This is a repository copy of *Treatment of Squamous Cell Carcinoma of the Anus, Unresolved Areas and Future Perspectives for Research: Perspectives of Research Needs in Anal Cancer.*

White Rose Research Online URL for this paper: <u>https://eprints.whiterose.ac.uk/181681/</u>

Version: Supplemental Material

Article:

Guren, MG, Sebag-Montefiore, D orcid.org/0000-0002-5978-9259, Franco, P et al. (6 more authors) (2021) Treatment of Squamous Cell Carcinoma of the Anus, Unresolved Areas and Future Perspectives for Research: Perspectives of Research Needs in Anal Cancer. Clinical Colorectal Cancer, 20 (4). pp. 279-287. ISSN 1533-0028

https://doi.org/10.1016/j.clcc.2021.09.006

© 2021, Elsevier. This manuscript version is made available under the CC-BY-NC-ND 4.0 license http://creativecommons.org/licenses/by-nc-nd/4.0/.

Reuse

This article is distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND) licence. This licence only allows you to download this work and share it with others as long as you credit the authors, but you can't change the article in any way or use it commercially. More information and the full terms of the licence here: https://creativecommons.org/licenses/

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



eprints@whiterose.ac.uk https://eprints.whiterose.ac.uk/ **Table 1** Proposed areas for future international collaborative research, and ongoing trials.

	Unresolved area	Trial
Etiology	Mechanism of carcinogenesis of HPV-	
	positive and HPV-negative SCCA	
	Potential role of HPV vaccination in	
	patients who have developed SCCA or	
	in the treatment of SCCA	
Biology	Increase understanding of SCCA	
	biology, guide development of clinical	
	trials with novel or targeted agents,	
	develop clinical biomarkers	
Staging	Determine the best staging procedures,	
	the role of MRI (and diffusion weighted	
	MRI) and PET/CT	
	Improve discrimination between	
	involved and uninvolved regional	
	lymph nodes	
Response evaluation and	Determine the role of MRI and PET/CT	
follow-up	for response evaluation	
	Prognostic and predictive role of MRI	
	and PET/CT	
	Determining the optimal follow-up	Planned NOAC9
	program	
Treatment of localized disease	Optimal radiation dose according to	
 Radiotherapy dose 	stage and known risk factors	
	Role of postoperative CRT after surgical	PLATO ACT3
	resection for T1N0 perianal tumour	
	Optimal/lower radiation dose for early-	PLATO ACT4, EA2182
	stage T1-2N0 SCCA	DECREASE
	Optimal/higher radiation dose to	PLATO ACT5
	locally advanced T3-4 or N1 SCCA	
	Possible role of high-dose boost to	
	tumour regions	
 Proton therapy 	Role of proton therapy	SWANCA, Planned
		DACG ReRad-III
 Adding check point 	Role of PD-1 inhibition in combination	CORINTH, RADIANCE,
inhibition to CRT	with CRT	EA2165
	Translational research of immune	
	response in relation to CRT	
 HPV negative tumours 	Improve outcomes for HPV negative	
	tumours	
 Elderly patients 	Optimal treatment for elderly SCCA	
	population	
Treatment of metastatic		
disease		
Limited metastatic	Role of extended-field CRT,	
disease	chemotherapy, surgery, or stereotactic	
	body radiotherapy for limited	
	metastatic disease	

	-	
Chemotherapy	Optimal or novel systemic therapy	
	Biology-driven trials for HPV-positive	
	and HPV-negative metastatic SCCA	
Check point inhibition	Effect of immune check point inhibition	POD1UM-
	in combination with chemotherapy or	303/InterAACT2,
	combinations of check point inhibition	EA2176, SCARCE,
		NCI9673
Biology	Importance of HPV positivity/negativity	
	and PD-1 expression	
Late effects and QOL	Assess outcomes after treatment for	
	SCCA including functional outcomes	
	and QOL	
Psychosocial impact	Understand impact at diagnosis and in	
	the context of cancer survivorship;	
	understand differences in various	
	demographics groups such as elderly,	
	HIV positive vs HIV negative	

Legends: SCCA: squamous cell carcinoma of the anus; HPV: Human Papilloma Virus; MRI: magnetic resonance imaging; PET/CT: positron emission tomography/computed tomography; CRT: concurrent chemoradiotherapy; PD-1: Programmed Death-1; HIV: Human Immunodeficiency Virus; QOL: quality of life.