Aims:
Whole Brain Radiotherapy (WBRT) following local treatment of intracranial metastases of melanoma with neurosurgery and/or stereotactic irradiation is controversial. The WBRT in Melanoma (WBRT Mel) Trial is being conducted to investigate this scenario. Previous WBRT trials in other histologies have been plagued by problems with accrual, accentuated by a reluctance to randomise by both opponents and proponents of WBRT.

Methods:
A phase III randomised controlled trial is open at 18 hospitals across Australia and overseas (Fogarty et al, 2011). The primary endpoint is distant intracranial failure as assessed by regular MRI scanning. Secondary endpoints include the effect of WBRT on neurocognitive function and overall survival. Extensive quality assurance activities have been implemented, including an MRI audit process performed by a neuro-radiologist.

Results:
60 patients have been accrued to date including 18 patients from international sites. The ANZMTG 01.07 WBRT Mel Trial has the highest recruitment rate of a WBRT trial to date. The full protocol involves 200 randomised patients.

Conclusion:
The ANZMTG 01.07 collaborative group WBRT Mel Trial is recruiting well and should answer the question of whether WBRT should be used in this scenario. Continuing to work closely with the existing active centres, as well as supporting new national and international collaborations, will be crucial to successfully meeting recruitment targets.

References:

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