survival as well as acute and late toxicities were retrospectively analyzed.

Results: Brachytherapy was performed as initially planned in all but one patient. 18 patients had a complete endoscopic response at the first follow-up examination. Loco-regional recurrence was observed in 24 patients after a median time of 3 months; 1- and 2-year recurrence-free survival rates were 51% and 51% for the patients treated for primary tumors and 11% and 6% for patients treated for tumor recurrence, respectively. Median overall survival was 18 months; estimated overall survival rates at 1, 2, and 3 years were 63%, 50%, and 30% after primary brachytherapy, and 60%, 25%, and 6% after treatment for recurrent cancers. Adenocarcinoma histology, non-complete remission after treatment and treatment for recurrent cancers were associated with significantly reduce prognosis. Mild to moderate dysphagia was the most common side effect in 17 patients; 8 patients suffered from loco-regional grade 3 toxicities, and no grade 4 or 5 toxicities were observed.

Conclusion: Endoluminal brachytherapy during the course of esophageal cancer treatment can be safely applied and results in good functional outcomes regarding dysphagia with moderate local toxicity and low side effects to the lung and heart.

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Treatment with high dose rate plesiotherapy and custom moulds in skin cancer. Long term results
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Purpose or Objective: To describe the technique used in our department for treatment of cutaneous tumors with HDR plesiotherapy using custom moulds and to analyze long term results.

Material and Methods:
Custom made mould fabrication: We used this applicator in irregular areas of skin. The treatment sequence is:
- Creation of the mould with thermoplastic material with a thickness of 5 mm.
- Parallel placement of transfer guide tubes with 1 cm of separation.
- CT simulation and definition of the volume treat. The volume has to be delimited 5 mm in deep.
- Dosimetry.
- Treatment of the patient. We used 3 different schedules:
  - 54 Gy in 18 fractions
  - 66 Gy in 33 fractions
  - 40 Gy in 10 fractions

Results: From September 2008 until September 2015, 53 patients had been treated with this technique. The average age was 77 years (63-91), the histology was squamous in 6 cases, basocellular in 46 cases, melanoma in situ in 1 case. The mean dose was 54.8 Gy (40-66). The treatment was adjuvant after surgery in 41.5% of the patients. After a mean time of follow up was 34.1 months there were 2 local relapses (3.77%) in the treatment location. No deaths related to disease were observed.

Conclusion: Treatment with HDR plesiotherapy using custom moulds is a technique used to treat small lesions and/or irregular surface locations. Planning with CT scan allows to know the dose in organs at risk using dose-volume histogram. This treatment offers a high local control of the disease and can be used alone or as adjuvant treatment after surgery in case of positive margins or presence of adverse factors.