Conclusion
We determined the optimal cutoffs for the main dosimetric variables studied, but the accuracy is low. The clinical and dosimetric variables were not associated with the development of moderate to severe late radiation proctitis. We stimulate the conduction of similar studies for data validation and evaluation of hypofractionation SBRT.

Introduction / Purpose
Given that endoscopic classification of chronic radiation proctitis keeps a prognostic correlation with the successful treatment of rectal bleeding, we intend to evaluate if the clinical and dosimetric variables of patients with prostate cancer undergoing three-dimensional conformal radiotherapy (3D-CRT) are able to predict severe chronic radiation proctitis and also determine the optimal cutoff values for different points of the DVH.

Methods
Retrospective, single-institutional, through direct analysis of medical records of patients diagnosed with prostate cancer that were treated with 3D-CRT and presented late rectal bleeding. The proctitis was classified as mild, moderate or severe according to the endoscopic findings (undergraduate Zinicola A, B and C, respectively). Patients were allocated in a dichotomized way: 1) “Grade A” or 2) “Grade B or C”, and the comparison with clinical and dosimetric parameters was performed using the chi-square test. ROC curves were analyzed for dosimetric parameters in order to find a good cutoff value for predicting the degree B or C. For the analyzes, it was considered significant p-value <0.05. Analyses were performed using SPSS version 21.

Results
RESULTS: Data from 59 patients who met the inclusion criteria were collected. There was no statistically significant correlation between grade B or C and: dosage of PSA (p = 0.60), Gleason score (p = 0.58), clinical T stage (p = 0.13), risk stratification (p = 0.92), pelvic irradiation in the first phase (p = 0.58), smoking (p = 0.20), diabetes mellitus (p = 0.68), inflammatory bowel disease (p = 0.30), chronic use of aspirin (p = 0.18) and age at initiation of RT (p = 0.16).

There were no significant association between dosimetric parameters and moderate or severe proctitis.

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