U wordt vriendelijk uitgenodigd op de openbare verdediging van het proefschrift van

Vincent VINH-HUNG

‘Impact of radiotherapy on survival of locoregional breast cancer and lymph node ratio revisited as a prognostic factor’

Situering van het proefschrift

The dissertation makes a synthesis of our series of studies starting from population data and investigating two local-regional procedures applied in early breast cancer: axillary lymph node dissection and adjuvant (post-operative) radiotherapy.

1) Though the extent of axillary lymph node dissection as measured by the number of lymph nodes removed appeared to be an important prognostic factor, the other factor coming to the fore as being even more important was in fact the lymph node ratio (number of involved lymph nodes divided by the total number of lymph nodes removed). Since then, research on the lymph node ratio – not only in breast cancer but also in other tumours – has been a rapidly expanding domain taken over by other investigators.

2) Our studies on adjuvant radiotherapy established that both population data and randomized clinical trials indicated a significantly improved overall survival in patients receiving radiotherapy as compared with those who did not receive radiotherapy. The improved survival was observed regardless of the extent of surgery, and regardless of the extent of nodal involvement in node-positive patients. This result was in contradiction with a systemic concept of breast cancer.

3) In a further study that investigated how tumour size and nodal involvement related with survival, it was established that the effect of tumour size on survival was functionally and quantitatively independent of the extent of nodal involvement. In other words, this latter result argued that tumour growth and metastasis independently contributed each to the risk of death.

The dissertation concludes that exclusive consideration of breast cancer as a systemic disease is an over-simplification that masks the complexity of the disease. Optimal treatment of breast cancer requires careful consideration of its local-regional management.

Curriculum Vitae

Vincent Vinh-Hung was born in 1951 in Paris (France). He lived in Saigon (Viet-Nam) where he graduated the Baccalaureat des Sciences de la Nature in 1969. He moved to Belgium at the end of 1969. He worked several years as manual labour in various factories, from molding plastics to cement through manufacturing of washpowder, canned foods, soft drinks, participated in community cultural activities, and attended some courses in mathematics. He started medical studies at the Liege University in 1972. With the help of the Public Assistance on one hand, and the help of a part-time job counting the “Tierce” horseracing bets on the other hand, he graduated as medical doctor in 1980. He briefly did medical residencies and medical-surgical watches in a community hospital for a living, then was accepted for Radiation Oncology specialisation by Prof. Closon. He graduated the University diploma of Radiotherapy with mention “Très Bien” in 1984 and was board certified in Radio-radiumtherapy the same year. He worked between 1985 and 1992 at several community hospitals and departments, radiotherapy-chemotherapy Baudour, radiology watches Charleroi, radiotherapy Verviers, then from 1993 at the radiotherapy department of the Vrije Universiteit Brussels Academic Hospital, under the direction of Prof. Storme. He graduated the VUB diploma of Master post Master in the Management of Healthcare Data in September 2005. He is also a certificate holder in electrocardiography, and in the radio-protection in (nuclear) reactors. His family life is devoted to four children, his daughter Que-Mai now aged 23, and his sons Kim 18, Sam 17, and Nam 15.