

GP 方案双路腹腔温热灌注化疗并全身化疔治疗晚期胰腺癌临床观察

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Clinical Observation on GP Combined Intravention with Intraperitoneal Hyperthermic Perfusion Chemotherapy for Advanced Pancreatic Cancer

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摘要 目的 探讨晚期胰腺癌腹腔双路温热灌注化疗并全身化疔的效果。方法 选择经病理确诊的晚期胰腺癌患者26例,行腹腔单点穿刺灌注40℃的0.9%的生理盐水2500ml~3500ml+顺铂80~100mg/m²+地塞米松10mg+速尿40mg的混合液d1。腹腔给药的同时,静脉滴注林格氏液1500ml+硫代硫酸钠(STS) 20~40g,12h滴完,顺铂与STS的用量比例为1:200。次日STS的剂量减半静脉滴注12h;吉西他滨1.0~1.25g/m²ivdripd1,8。3~4周为1周期,共4周期。并观察其疗效及毒副反应。结果 按WHO实体瘤近期疗效评价标准评价,26例患者均可评价,其中位生存期8个月,总有效率为38.5%,主要毒副反应为骨髓抑制。其他毒副反应较轻,一般可以耐受。结论 GP方案行双路腹腔温热灌注化疔治疗晚期胰腺癌的临床疗效较好,值得进一步探讨。

关键词: 胰腺癌 温热化疔 全身化疔

Abstract: Objective To explore the effect of combined intravention with intraperitoneal hyperthermic perfusion chemotherapy for the advanced pancreatic cancer. Methods Twenty-six patients with advanced pancreatic cancer diagnosed by pathology were chosen as our subjects. Every subject was treated with the following regimen, administered every 21~28 days. 2500~3500 ml normal saline of 40 ℃ mixed with cisplatin 80~100 mg/ m² plus dexamethasone 10 mg plus furosemide 40mg were perfused by abdomen puncture , on d1 . Followed by Ringer 1500 ml plus STS 20~40 g by iv within 12 hours. And the next day , half dose of STS by iv within 12 hours also. Simultaneously gemcitabine 1. 0~1. 25 g/ m² by iv on d1 , d8 . 21~28 days were 1 cycle , All the patient s received 4 cycles. And effect and toxicity were observed. Results Twenty-six cases could be evaluated according to Response Evaluation Criteria in Solid Tumors , the median survival time was 8 months. The total response rate was 38. 5 % , myelosuppression was the main toxicity. Nonhematological toxicity was mild and tolerable. Conclusion The GP combined intravention with int raperitoneal hyperthermic perfusion treatment is an effective regimen in the treatment of advanced pancreatic cancer , and we should study it further.

Key words: Pancreatic cancer Chemical Treatment Intrapertoneal hyperthermic perfusion

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