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## 尼妥珠单抗联合三维适形放疗及化疗治疗局部晚期鼻咽癌的初步临床研究

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### Primary Clinical Study on Nimotuzumab with 3D-CRT and Chemotherapy for Treatment of Locoregionally Advanced Nasopharyngeal Carcinoma

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摘要

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**摘要** 目的: 探讨尼妥珠单抗联合同期三维适形放疗(3D-CRT)及化疗治疗III、IV A期鼻咽癌的疗效及不良反应。方法: 经组织病理确诊的III、IV A期(2008分期)鼻咽癌初诊患者63例随机分为对照组(33例)和治疗组(30例), 均采用3D-CRT及同期和序贯紫杉醇顺铂方案化疗, 治疗组每周一放疗前行尼妥珠单抗100 mg治疗, 共6~7次。结果: 放疗结束后2个月原发灶CR率、颈部淋巴结CR率治疗组分别为100.0%、96.7%, 明显高于对照组的81.8%及75.8% (P均<0.05), 放疗后1年局部控制率、无转移生存率在治疗组及对照组分别达到100.0%vs.89.3%、95.5%vs.82.1% (P>0.05), 两组主要不良反应为放射性咽喉炎、放射性皮炎和恶心呕吐、白细胞减少、疲乏等, 耐受性较好。治疗组发生3度以上放射性咽喉炎(P<0.05)、放射性皮炎(P>0.05)较对照组偏高。结论: 尼妥珠单抗联合3D-CRT及紫杉醇及顺铂同期及序贯化疗治疗局部晚期鼻咽癌, 可提高近期完全缓解率及局部控制率, 耐受性较好, 远期生存率有待进一步观察研究。

**关键词:** 鼻咽癌 放疗 尼妥珠单抗 化疗 表皮生长因子受体

**Abstract:** Objective: To determine the safety and tolerability of nimotuzumab, a humanized anti-epidermal growth factor receptor monoclonal antibody, in combination with three-dimensional conformal radiotherapy (3D-CRT) and chemotherapy for locoregionally advanced nasopharyngeal carcinoma. Methods: A total of 63 patients with stages III - IV A nasopharyngeal carcinoma were enrolled and divided into two groups: a research group with 30 patients and a control group with 33 patients. All patients were treated with 3D-CRT as well as concurrent and sequential chemotherapy with paclitaxel and cisplatin. Patients in the research group were intravenously administered 100 mg of nimotuzumab weekly for 6 weeks to 7 weeks before radiotherapy. Results: Two months after radiotherapy, the complete response rates (CR) of nasopharyngeal cancer and cervix lymph nodes were 100% and 96.7%, respectively, in the research group, and 81.8% and 75.8%, respectively, in the control group. A significant difference was indicated (P<0.05). The 1-year locoregional control and distant metastasis-free survival rates were 71.4% and 95.5%, in the control group and the research group, respectively. No significant difference was indicated (P=0.068>0.05). Major side effects included oral mucositis, actinodermatitis, neutropenia, nausea, vomiting, and fatigue; however, these effects were tolerable. A significant difference was found in the frequency of grade 3 to grade 4 acute oral mucositis between the groups (P<0.05). Conclusion: Nimotuzumab combined with 3D-CRT and paclitaxel and cisplatin chemotherapy can improve the CR on locoregionally advanced nasopharyngeal carcinoma, with mild to moderate side effects. Further study may be conducted to observe the distant metastasis-free survival rates.

**Key words:** Nasopharyngeal carcinoma Radiotherapy Nimotuzumab Chemotherapy Epidermal Growth Factor Receptor

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- [1] 王春平,陆荫英,高旭东,王 铤,白文林,曲建慧,曾 珍,张敏娜,常秀娟. 索拉非尼治疗进展期肝细胞癌的疗效及预后因素分析[J]. 中国肿瘤临床, 2012, 39(9): 587-592.
- [2] 廖国清, 曲怡梅, 王红梅, 刘鹏辉, 李亮亮. 循环热灌注化疗治疗晚期胃癌合并腹腔积液的临床研究[J]. 中国肿瘤临床, 2012, 39(8): 452-454.
- [3] 严 岳, 张剑威, 赵洪云, 黄 岩, 胡志皇, 张 力. 乙肝病毒感染与肺癌患者化疗后肝功能损害的相关性研究[J]. 中国肿瘤临床, 2012, 39(8): 465-468.
- [4] 王凌云, 张 乐, 邓燕明, 王风华, 冯 芬, 陈永昌, 陈 翠, 王德深, 李 聪, 安 欣, 徐瑞华, 李宇红. 氟尿嘧啶类联合奥沙利铂方案治疗晚期转移性小肠癌的回溯性多中心研究[J]. 中国肿瘤临床, 2012, 39(7): 399-.
- [5] 刘凤永,王茂强,段峰,樊庆胜,宋鹏,王志军. 胰腺癌肝转移的介入治疗[J]. 中国肿瘤临床, 2012, 39(6): 331-335.
- [6] 陈海霞,金凤, 吴伟莉,李媛媛, 陈国焱,龚修云,龙金华. 时间调节诱导化疗联合放疗治疗鼻咽癌的单中心 II 期随机临床研究[J]. 中国肿瘤临床, 2012, 39(6): 336-339.
- [7] 庄海峰,张宇,蔡皎皓,沈建平. 右丙亚胺联合参麦注射液降低蒽环类药物心脏毒性的临床研究[J]. 中国肿瘤临床, 2012, 39(6): 348-351.
- [8] 洪熠,陈心华,李娜妮,林琳,李重颖,刘健. 白蛋白结合型紫杉醇治疗转移性乳腺癌的临床疗效与安全性观察[J]. 中国肿瘤临床, 2012, 39(6): 352-354.
- [9] 金哈斯, 宫丽平, 倪美兰, 孟文霞, 林美雄, 母立新. 腹膜后肿块为首发症状的恶性淋巴瘤临床特点分析[J]. 中国肿瘤临床, 2012, 39(6): 343-347.
- [10] 张贵海, 张先平, 文坤明, 胡 敏, 王 轶, 藏春宝, 李少林. 哇巴因抑制结直肠癌多药耐药细胞增殖及侵袭力的研究[J]. 中国肿瘤临床, 2012, 39(5): 254-258.
- [11] 蔡明志, 梁 寒, 综述, 潘 源, 审校. 单核苷酸多态性对消化道恶性肿瘤化疗药物反应和毒性的影响[J]. 中国肿瘤临床, 2012, 39(5): 296-300.
- [12] 沈文斌, 祝淑钗, 高红梅, 李幼梅, 刘志坤, 李 娟, 苏景伟. 肿瘤体积和放疗剂量对局部晚期非小细胞肺癌预后的影响[J]. 中国肿瘤临床, 2012, 39(5): 278-282.
- [13] 宋红林, 黄清华, 李 力. 新辅助介入化疗在局部晚期宫颈癌治疗中的价值[J]. 中国肿瘤临床, 2012, 39(5): 283-286.
- [14] 唐亚梅, 容小明, 邓彩虹, 彭 英, 沈庆煜. 放射性脑损伤鼻咽癌患者心理状况和生存质量的配对病例对照研究[J]. 中国肿瘤临床, 2012, 39(4): 221-.
- [15] 徐冬梅, 李 蕊, 王 辉, 刘 斌, 梅耀宇, 令狐华. 新辅助化疗后宫颈癌患者盆腔淋巴结内细胞凋亡检测[J]. 中国肿瘤临床, 2012, 39(3): 141-144.

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