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临床医学

重组人血管内皮抑素联合吉西他滨及顺铂治疗晚期非小细胞肺癌的临床分析

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摘要:

目的 探讨重组人血管内皮抑素(YH-16)联合吉西他滨和顺铂(GP方案)治疗晚期非小细胞肺癌(NSCLC)的临床疗效及不良反应。方法 将80例晚期NSCLC患者随机分为观察组(40例)和对照组(40例),观察组给予YH-16联合GP方案化疗,对照组则单纯实施GP方案化疗;2个周期化疗结束后评价两组近期疗效,观察不良反应,并随访远期疗效。结果 观察组与对照组临床获益率分别为32.5%和25.0%,差异有统计学意义(P<0.05);但两组远期疗效及不良反应差异无统计学意义(P>0.05)。结论 YH-16联合GP方案治疗晚期NSCLC,可以提高患者的近期疗效,但不增加不良反应发生率。

关键词: 癌,非小细胞肺;重组人血管内皮抑素;吉西他滨;顺铂;化疗

Clinical analysis of recombinant human endostatin combined with gemcitabine and cisplatin therapy in advanced non-small cell lung cancer

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Abstract:

Objective To investigate the clinical efficacy and adverse reactions of recombinant human endostatin (YH-16) in combination with gemcitabine and cisplatin (GP) in the treatment of advanced non-small cell lung cancer (NSCLC). Methods 80 cases of advanced NSCLC were randomly divided into the observation group (40 cases) and the control group (40 cases). The observation group were treated with YH-16 combined with GP, and the control group accepted GP. After 2 cycles of chemotherapy, the curative effect and adverse reactions were evaluated. The long-term efficacy of the two groups was evaluated during follow-up. Results The clinical benefit rates in the observation group and the control group were 32.5% and 25.0% respectively, and the difference was statistically significant (P<0.05). But the long-term efficacy and adverse reactions in the two groups were similar (P>0.05). Conclusion YH-16 in combination with GP in the treatment of advanced NSCLC improves the patient's curative effect, but does not increase the incidence of adverse reactions.

Keywords: Non-small cell lung cancer; Recombinant human endostatin; Gemcitabine; Cisplatin; Chemotherapy

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