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临床研究与应用

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同步放化疗联合伽马刀治疗伴盆腔淋巴结转移宫颈癌的临床研究

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Clinical study of concurrent chemoradiotherapy combined with gamma knife therapy for cervical cancer with positive pelvic lymph node

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摘要

目的: 评价同步放化疗联合伽马刀治疗伴盆腔淋巴结转移宫颈癌的疗效及不良反应。方法: 回顾性分析42例内蒙古医科大学附属医院说明放疗科同步放化疗治疗伴盆腔淋巴结转移宫颈癌患者。外照射三维适形调强放疗(IMRT)的盆腔剂量PTV为50.4 Gy/28F, 淋巴结剂量为PGTVnd 59.92Gy/28F, 联合腔内照射剂量为36Gy/6 F。同步化疗方案为顺铂40mg/m²/周, 静脉滴注。同步放化疗结束后3个月复查, 对淋巴结仍有残存患者行局部伽马刀治疗, 剂量为10~15Gy/3~4 F。结果: 3个月近期疗效为83.3% (35/42)。6、9、12个月局部控制率分别为88.1% (37/42)、83.3% (35/42)、80.0% (32/40)。1、2年生存率分别为77.5% (31/40)、70.0% (28/40)。主要不良反应包括放射性小肠炎[11.9% (5/42)]、直肠炎[38.1% (16/42)]、膀胱炎[7.1% (3/42)]、消化道反应[90.5% (38/42)]与粒细胞减少[85.7% (36/42)], 其中绝大多数为1~2级反应。结论: 同步放化疗联合伽马刀治疗伴盆腔淋巴结转移宫颈癌疗效较好, 不良反应在可接受范围之内, 是临床可行的治疗手段。

关键词: concurrent chemo-radiotherapy, gamma knife therapy, cervical cancer

Abstract:

Objective: To evaluate therapeutic efficacy and adverse reactions of synchronous chemoradiotherapy combined with gamma knife therapy for pelvic lymph node metastasis of cervical cancers. Methods: Data of 42 cervical cancer patients who suffered from residual pelvic lymph node metastasis and received concurrent chemoradiotherapy were retrospectively analyzed. Intensity-modulated radiotherapy was used in the treatment. The prescribed doses of planning target volume and pelvic metastasized lymph node of the planned gross tumor volume were 50.4 Gy/28F and 59.92Gy/28F, respectively. The combined internal irradiation dose was 6 Gy/6 F. Concurrent chemotherapy was administered with 40mg/m²-w cisplatin. Three months after chemoradiotherapy was completed, the patients with residual pelvic positive lymph node received additional dose ranging from 10Gy to 15Gy at three or four fractions by using a gamma knife. Results: Near-term efficacy was 83.3% (35/42) in three months. Local control rates were 88.1% (37/42), 83.3% (35/42), and 76.2% (32/42) in 6, 9, and 12 months, respectively. The 1- and 2-year survival rates were 77.5% (31/40) and 70.0% (28/40), respectively. The incidence rates of radiation enteritis, proctitis, cystitis, gut toxicity, and neutrocytopenia were 11.9% (5/42), 38.1% (16/42), 7.1% (3/42), 90.5% (38/42), and 85.7% (36/42), respectively, and the majority of these conditions were classified as grades I and II. Conclusion: Synchronous chemoradiotherapy combined with gamma knife therapy is an effective and feasible treatment method for pelvic lymph node metastasis of cervical cancer; this method exhibits a minimal adverse reaction.

Key words: concurrent chemo-radiotherapy gamma knife therapy cervical cancer

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