



## 小细胞肺癌77例治疗及预后分析

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## Treatment and Prognosis of 77 Cases of Small Cell Lung Cancer

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摘要

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**摘要** 目的探讨小细胞肺癌治疗模式及预后因素。方法收集2002年以来我科收治的明确诊断小细胞肺癌患者77例临床资料, 分析其治疗过程和结果, 并进行随访, 对其治疗模式进行探讨。结果局限期患者43例, 1、2、5年生存率分别为80%、56%、21%[根治术后化疗4例, 全部存活, 平均43(12~73)个月[根治术后化疗+放疗中位生存期为51个月[未手术患者化疗、未手术患者化疗+放疗中位生存期分别为12、28个月。广泛期1、2年生存率为56%、25%, 中位生存期14.3个月。多因素分析显示分期是独立的预后因素, 单因素分析显示局限期患者放疗和手术可改善预后。颅内转移对预后无影响。结论对局限期患者, 放化疗联合治疗可作为首选的治疗方案, 对早期患者是否选择根治术尚需要进一步研究。广泛期患者采取多线治疗方案, 可改善生存。分期是预后相关的独立因素。

**关键词:** 小细胞肺癌 治疗 预后

**Abstract:** Objective To investigate the clinical treatment modality and prognosis of small cell lung cancer (SCLC). Method We retrospectively analyzed the clinical data of 77 SCLC patients who were admitted to our department after 2002. Results The disease was limited in 43 patients and extensive in 34 patients. For patients with limited SCLC, the 1-year, 2-year, and 5-year survival rate was 80%, 56%, and 21%, respectively. Four patients who had undergone surgical resection were all alive. Among patients who underwent adjuvant chemotherapy followed by radiotherapy, salvage chemotherapy, and salvage chemotherapy followed by radiotherapy, the median of survival period was 51 months, 12 months, and 28 months, respectively. For patients with extensive SCLC, the 1-year and 2-year survival rate was 56% and 25%, respectively. The median of survival period was 14.3 months. Stage was an independent factor in multifactor COX regression. Monofactor COX regression showed that radiotherapy and resection were factors correlated with survival. Brain metastasis had no impact on survival.

**Conclusions** Chemotherapy followed by radiotherapy is preferred for limited SCLC, while surgical resection remains questionable for early-stage patients. For extensive SCLC, multi-line chemotherapy may be helpful to improve the overall survival. Stage is an independent factor for predicting the prognosis.

**Keywords:** small cell lung cancer treatment prognosis

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