

138例儿童颅外恶性生殖细胞肿瘤临床研究

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Title: Clinical observation of 138 children with extracranial malignant germ cell tumors

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摘要: 目的: 研究儿童恶性生殖细胞瘤(malignant germ cell tumor, MGCT)的临床及预后特征。方法: 回顾性分析1998年1月至2016年1月上海儿童医学中心收治的初发颅外MGCT患儿138例。对患儿的临床特点、疗效及预后做综合分析。结果: 按病理分期, I期患儿5年总生存期(overall survival, OS) OS为100.00%, II期患儿5年为94.44%, III期5年OS为96.43%, IV期5年OS为88.73%。多因素分析显示, 病理分期对生存率的影响有统计学差异($P < 0.01$), 年龄、性别及部位对于生存率的影响无显著统计学差异。本研究中共有13例I/II期患儿接受手术后临床观察, 有5例(38.5%)在2年内出现疾病复发进展的情况并接受化疗, 目前均达到临床缓解。结论: 通过以手术联合含铂类药物化疗并根据临床危险度的不同分层治疗MGCT瘤患儿, 可得到较好的临床疗效。

Abstract: Objective: To investigate the clinical and prognostic features of malignant germ cell tumor(MGCT).Methods: Between January 1998 and January 2016, 138 patients with extracranial(all stages) MGCT were enrolled in Shanghai Children's Medical Center(SCMC).The clinical characteristics, therapeutic efficacy and prognosis were retrospectively analyzed.Results: The 5-year overall survival(OS) of pediatric patients was determined as 96.1%, in detail 100.00% at stage I, 94.43% at stage II, 96.44% at stage III and 88.73% at stage IV.Multivariate analysis suggested that staging affected the survival significantly($P < 0.01$).13 cases through clinical observation on stage I/II pediatric patients post surgery, 5 cases(38.5%) were suffered from recurrence within 2 years and alleviated by chemotherapy treatment.Conclusion: The cisplatin-based combination chemotherapy can improve the outcome of childhood extracranial MGCT.

参考文献/REFERENCES

- [1] Sturgeon JF, Moore MJ.Non-risk-adapted surveillance in clinical stage I nonseminomatous germ cell tumors: The princess margaret hospital's experience [J].European Urology, 2011, 5: 556-562.
- [2] Olson TA, Murray MJ.Pediatric and adolescent extracranial germ cell tumors: The road to collaboration [J].Journal of Clinical Oncology, 2015, 11: 3018-3028.
- [3] Niramis R, Anuntkosol M, Buranakitjaroen V, et al.Longterm outcomes of sacrococcygeal germ cell tumors in infancy and childhood [J].Surg Res Pract, 2015, 2015: 398549.
- [4] Kim J, Lee NH, Lee SH, et al.Prognostic factors in children with extracranial germ cell tumors treated with cisplatinbased chemotherapy [J].Korean J Pediatr, 2015, 58(10): 386-391.
- [5] Dolci S, Campolo F.Gonadal development and germ cell tumors in mouse and humans [J].Seminars in Cell & Developmental Biology, 2015: 1-10.
- [6] Christina E.Application of stem cell markers in search for neoplastic germ cells in dysgenetic gonads, extragonadaltumours, and in semen of infertile men [J].Cancer Treatment Reviews, 2008, 34: 348-367.
- [7] Puumala SE, Ross JA.Pediatric germ cell tumors and parental infertility and infertility treatment: A children's oncology group report [J].Cancer Epidemiology, 2011, 35: 25-31.
- [8] Rogers PC, Olson TA, Cullen JW, et al.Treatment of children and adolescents with stage II testicular and stages I and II ovarian malignant germ cell tumors: A pediatric intergroup study-pediatric oncology

- group 9048 and children's cancer group 8891 [J] .J Clin Oncol, 2004, 22(17): 3563-3569.
- [9] Agarwala S, Mitra A, Bansal D, et al.Management of pediatric malignant germ cell tumors: ICMR consensus document [J] .Indian J Pediatr, 2017, 84(6): 465-472.
- [10] Cushing B, Giller R, Cullen JW, et al.Randomized comparison of combination chemotherapy with etoposide, bleomycin, and either high-dose or standard-dose cisplatin in children and adolescents with high-risk malignant germ cell tumors: A pediatric intergroup study-pediatric oncology group 9049 and children's cancer group 8882 [J] .J Clin Oncol, 2004, 22: 2691-2700.
- [11] Mann JR, Raafat F, Robinson K, et al.The united kingdom children's cancer study group's second germ cell tumor study: Carboplatin, etoposide, and bleomycin are effective treatment for children with malignant extracranial germ cell tumors, with acceptable toxicity [J] .J Clin Oncol, 2000, 18: 3809-3818.
- [12] He Kejun, Yuan Xiaojun.Efficacy of protocol JEB in 22 children with yolk sac tumors [J] .Chin J Clin Oncol, 2012, 39(15): 1043-1045. [何珂骏, 袁晓军.JEB 方案治疗22 例儿童卵黄囊瘤的临床疗效分析 [J] .中国肿瘤临床, 2012, 39(15): 1043-1045.]
- [13] Shaikh F, Cullen JW, Olson TA, et al.Reduced and compressed cisplatin-based chemotherapy in children and adolescents with intermediate-risk extracranial malignant germ cell tumors: A report from the children's oncology group [J] .J Clin Oncol, 2017, 35(11): 1203-1210.
- [14] Pashankar F, Frazier AL, Krailo M, et al.Treatment of refractory germ cell tumors in children with paclitaxel, ifosfamide, and carboplatin: A report from the children's oncology group AGCT0521 study [J] .Pediatr Blood Cancer, 2018, 26: e27111.
- [15] Yan QH, Tang JY, Pan Ci, et al.Study on the clinical outcomes of children with stage IV malignant extracranial germ cell tumors [J] .Journal of Clinical Pediatrics, 2017, 35(5): 321-324. [姚强华, 汤静燕, 潘慈, 等.儿童IV期颅外恶性生殖细胞肿瘤疗效观察 [J] .临床儿科杂志, 2017, 35(5): 321-324.]
- [16] Lu SY, Sun XF, Zhen ZJ, et al.Survival analysis of children with stage II testicular malignant germ cell tumors treated with surgery or surgery combined with adjuvant chemotherapy [J] .Chin J Cancer, 2015, 34(2): 86-93.

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