

贝伐珠单抗单药或与铂类联合腹腔内注射治疗难治性恶性腹水的临床疗效

《现代肿瘤医学》[ISSN:1672-4992/CN:61-1415/R] 期数: 2019年10期 页码: 1793-1795 栏目: 论著(综合治疗) 出版日期: 2019-04-08

Title: Clinical observation of refractory malignant ascites treated by intraperitoneal bevacizumab injection alone or in combination with platinum therapy

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关键词: 妇科肿瘤; 生活质量; 血管内皮生长因子

Keywords: gynecological tumors; quality of life; vascular endothelial growth factor

分类号: R737.3

DOI: 10.3969/j.issn.1672-4992.2019.10.032

文献标识码: A

摘要: 目的: 观察贝伐珠单抗单药或与铂类联合腹腔内注射治疗由盆腹腔恶性肿瘤引起的难治性恶性腹水的临床疗效。方法: 选取2016年1月至2017年12月在长海医院中医妇科收治的伴有难治性恶性腹水的患者10例。治疗方法: 腹腔内注射贝伐珠单抗(200 mg)+铂类治疗卵巢癌, 注射贝伐珠单抗(200 mg)单药治疗其他盆腹腔恶性肿瘤。按照WHO标准。对其临床疗效、不良反应等进行分析。结果: 5名患者(卵巢癌)达到完全缓解, 3名(转移性腹膜癌及宫颈癌)部分缓解, 其余2名(消化道肿瘤)无变化; 整体有效率为80%。仅观察到轻度不良反应, 包括1级骨髓抑制和1级恶心和呕吐。所有患者对症治疗后均好转。结论: 对于晚期盆腹腔恶性肿瘤特别是卵巢癌导致的难治性恶性腹水, 使用腹腔内注射贝伐珠单抗联合铂类的治疗方案安全有效, 是控制难治性恶性腹水, 提高患者生活质量的优选方案。

Abstract: Objective: To observe the clinical effects of intraperitoneal bevacizumab injection alone or in combination with platinum therapy for the treatment of refractory malignant ascites caused by abdominopelvic malignancy. Methods: Ten patients with refractory malignant ascites who were treated in the Department of Gynecology of Traditional Chinese Medicine of Changhai Hospital from January 2016 to December 2017 were selected. Treatment options: Ovarian cancer was treated with intraperitoneal injection of bevacizumab (200 mg)+ platinum therapy, other abdominopelvic malignant tumors were treated with bevacizumab (200 mg) monotherapy. A retrospective analysis was conducted on the clinical efficacy and adverse effects according to the standard of WHO. Results: The complete remission was achieved in 5 patients (ovarian cancer), partial remission was achieved in 3 patients (metastatic peritoneal and cervical cancer), and the condition of the remaining in 2 patients (digestive tumors) remained unchanged. The overall response rate was 80%. Mild adverse effects were observed, including grade 1 myelosuppression and grade 1 nausea and vomiting. Conditions of all patients were improved after the symptomatic treatment. Conclusion: Intraperitoneal bevacizumab injection in combination with the platinum therapy is safe and effective in the treatment of refractory malignant ascites caused by advanced abdominopelvic malignant tumors, especially for ovarian cancer. It can be considered as an optimal option for the control of the refractory malignant ascites and improvement of the patients' life quality.

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备注/Memo: National Natural Science Foundation of China(No.81603651);国家自然科学基金青年项目 (编号:)

更新日期/Last Update: 1900-01-01