

**PI-08: Seong Gi Min (2012) A case of clinically complete remission of lung with hyperthermia and concurrent 5<sup>th</sup>-line chemotherapy in a disseminated NSCLC patient**



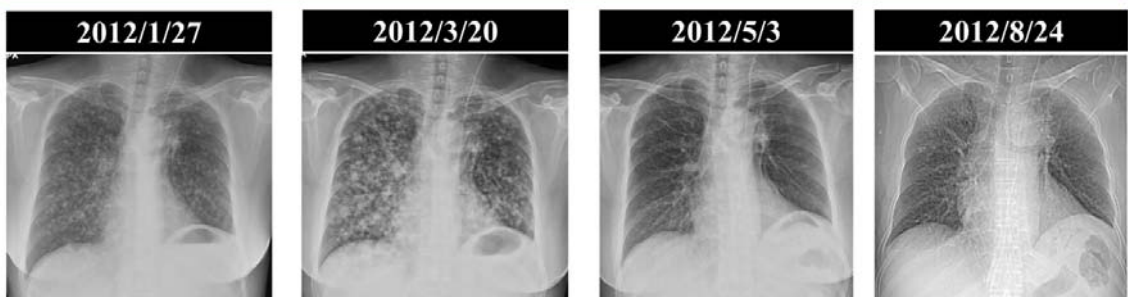
**A case of clinically complete remission of lung with hyperthermia and concurrent 5<sup>th</sup>-line chemotherapy in a disseminated NSCLC patient**  
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**Backgrounds**

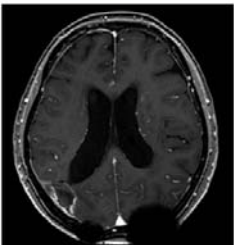
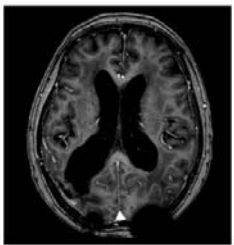
Lung cancer is the leading cause of cancer death worldwide. With combination chemotherapy, the median survival is 8-10 months. Besides chemotherapy, various modalities have been evaluated to get better survival. Hyperthermia is a new therapeutic approach and has synergistic effect with chemotherapy to control the disease and to improve the survival. Some clinical characteristics, i.e., female, adenocarcinoma, and never-smoker, show good prognosis. However, the efficacy of 5<sup>th</sup>-line chemotherapy for disseminated NSCLC is doubtful. Recently, we experienced the excellent response of one case of lung-to-lung metastatic NSCLC being clinically nearly complete remission of lung with hyperthermia (EHY-2000) and concurrent 5<sup>th</sup>-line chemotherapy.

**Case presentation**

**Patient:** Female/53, never-smoker  
**Pathology, lung:** adenocarcinoma, EGFR mutation (-)      **The date of diagnosis:** May, 2007  
**Current status:** metastases to lung-to-lung, brain, bone, pleura  
**Past medical history & present illness:** She had received LUL lobectomy on May/17/2007 followed by adjuvant CCRT. In May, 2009, the recurrence, brain, lung and bone metastasis was developed. After GKS on May/27/2009, palliative chemotherapy was administered. Those chemotherapeutic regimens were gemcitabine/cisplatin, gefitinib, and pemetrexed from August/3/2009 to November/3/2011. In June, 2011, she also had received craniotomy & tumor removal of right parietal lobe followed by whole brain radiotherapy (November/22-25/2011). Since January 2012, an agent in clinical trial had been administered. With progressive disease, the agent was switched to 5<sup>th</sup>-line palliative chemotherapy, docetaxel on March/21/2012. Hyperthermia, EHY-2000 system (Oncotherm GmbH, Troisdorf, Germany) had been applied on her chest since February/7/2012. **After 3<sup>rd</sup> cycle of hyperthermia, clinically nearly complete response was observed on chest X-ray and chest CT.**  
**Conclusion:** The concurrent therapy of hyperthermia and chemotherapy would be promising in disseminated NSCLC.



**Agent in clinical trial (2012/1/27-3/20) Docetaxel (2012/3/21-2012/8/24)**

Hyperthermia (2012/2/7-2012/7/9)	
	<p>Metastatic Brain Tumor</p> <p>June/ 2011 Controlled Hydrocephalus with Ommaya reservoir</p>
	<p>Metastatic Brain Tumor</p> <p>August/2012 Aggravated Hydrocephalus &amp; Leptomeningeal seeding</p>

**Non Hyperthermia**