

P-22: Yun Hwan Kim, Woong Ju, Cheol Kim (2012) Electro-hyperthermia for refractory ovarian cancer patient having bone marrow depletion as a consequence of long-term chemotherapy: Case report

Electro-hyperthermia for refractory ovarian cancer patient having bone marrow depletion as a consequence of long-term chemotherapy : Case Report

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Abstract

Modulated electro-hyperthermia is an emerging complementary treatment option for refractory solid tumor. Early experience suggests that it may have advantages over conventional hyperthermia with exceeding efficacy, and less complication. Herein, we describe a case of platinum-resistant, refractory ovarian cancer successfully controlled by the combination of electro-hyperthermia and dose-dense chemotherapy. On the way of repeated treatment for advanced or relapsed ovarian cancer, we finally encountered uncontrollable tumor growth simultaneously with multi-drug resistance and bone-marrow depletion. In this case, we observed stable disease over long time (1 year <) without any significant hematologic complications by applying electro-hyperthermia and weekly single chemo-agent. The gross lesion was disappeared on CT scan and PET imaging with the decline of serum CA-125 marker. Electro-hyperthermia combined with dose-dense chemotherapy could be a good treatment option for the selected, refractory ovarian cancer patients without significant hematologic complications.

Case

Refractory ovarian cancer patient aged 62 was transferred at May 2011.
 2010.1.20 Debulking operation (Epithelial Ovarian cancer, Stage IIIc)
 2010.1-2010.9 Paclitaxel-Carboplatin #9 → Complete Remission
 2011.1.4 Recurrence (liver metastasis was detected by PET)
 2011.1-2011.7 Belotecan-Cisplatin # 6 → Partial Remission but suffered from severe bone marrow depletion
 2011.7 Transferred for electro-hyperthermia (Oncothermia) treatment
 2011.8-2012.2.20 Weekly Cisplatin #4 + Oncothermia (x3/week) → Partial remission without hematologic complications
 2012.3 Regimen changed to Weekly Paclitaxel + Oncothermia due to elevation of tumor marker → Stable disease

Images & Tumor marker (CA 125)

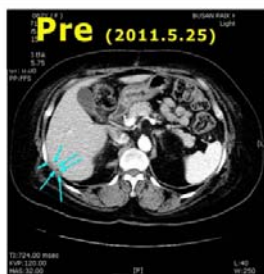


Figure 1. CT scan follow-up.
 Liver metastasis was disappeared after dose-dense chemotherapy and concomitant oncothermia

Figure 2. serum CA125 follow-up.
 Serum level had declined after dose-dense chemotherapy and concomitant oncothermia

