VÄSTRA GÖTALANDSREGIONEN
SAHLGRENSKA UNIVERSITETSSJUKHUSET

GÖTEBORGS UNIVERSITET

Isolerad hyperterm perfusion

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Isolerad hyperterm perfusion

Regional behandling

- Extremiteter (Arm, Ben)
- Organ (Lever, Lunga)

- Hög lokal koncentration av cytostatika
  - Melphalan (Alkeran®)
  - TNF-alpha (Beromun®)
- Låg systemisk toxicitet
- Synergistisk effekt av hypertermi

1958

Chemotherapy of Cancer: *

Regional Perfusion Utilizing an Extracorporeal Circuit

OSCAR CREECH, JR., M.D., E. T. KREMENTZ, M.D., ROBERT F. RYAN, M.D., JAMES N. WINBLAD, M.D.

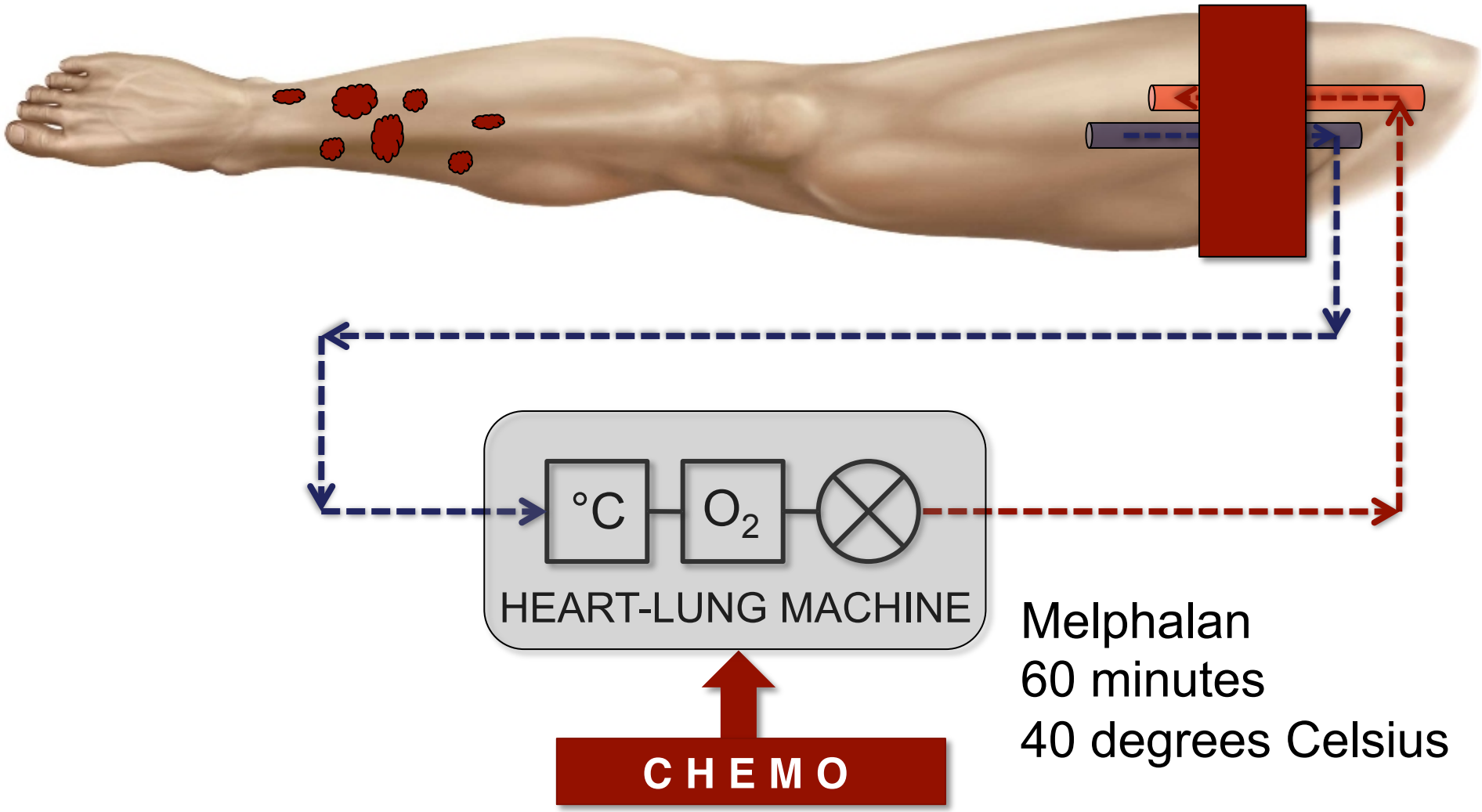
From the Department of Surgery, Tulane University School of Medicine and the Tulane Surgical Services of Charity Hospital and Touro Infirmary, New Orleans, La.

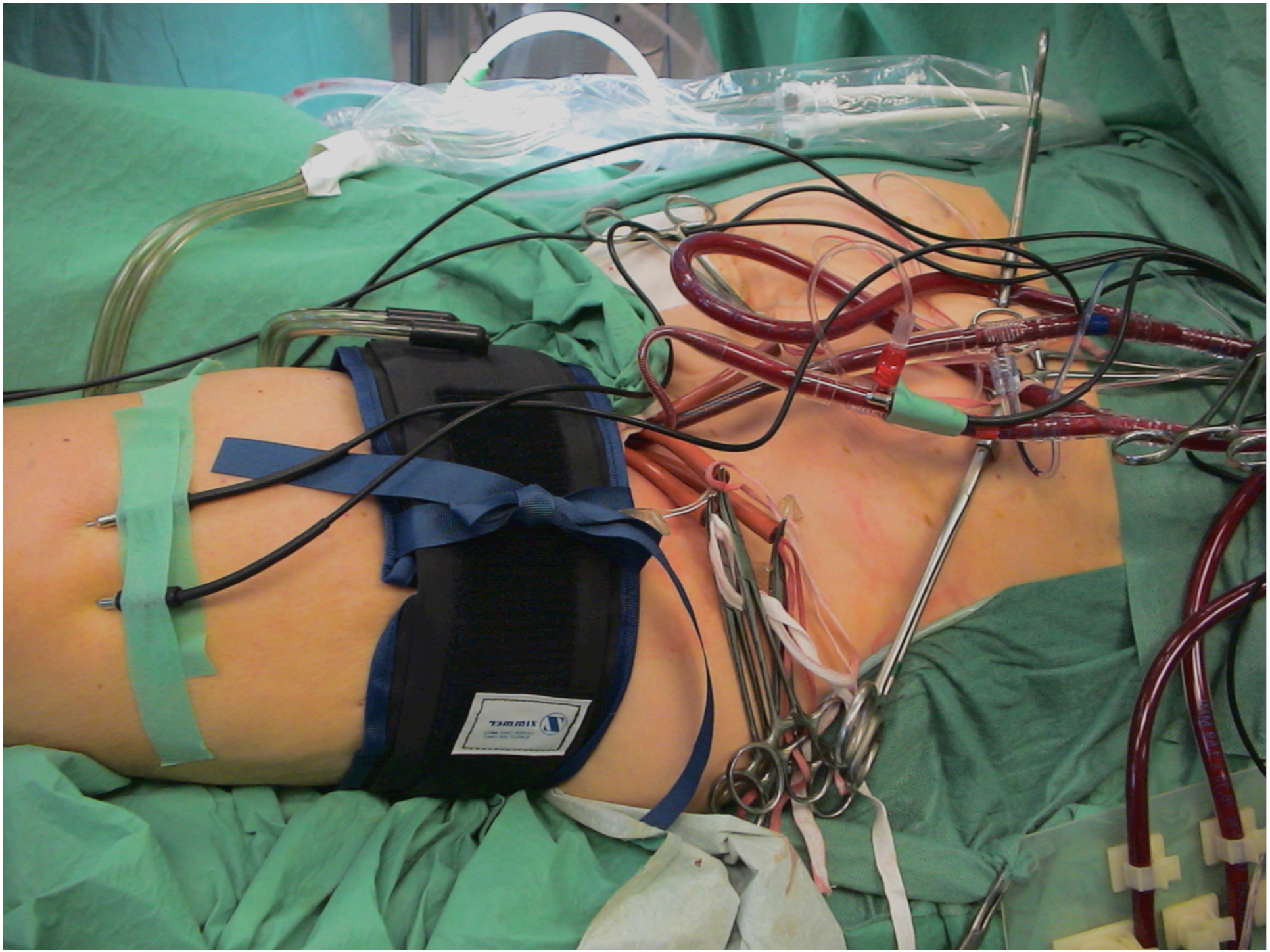
CHEMOTHERAPY of cancer began about 15 years ago as a result of studies to determine the biologic action of the mustard compounds.[4-6] These studies revealed that the B-chloroethyl amines and sulfides have a cytotoxic effect on cells unlike that of other chemical agents and closely resembling that of x-rays. Since cellular susceptibility appeared to be related to the [illegible]

pression of hemopoiesis and transient gastro-intestinal disturbances, while larger doses are hazardous to life because of severe involvement of these two systems.

In an attempt to avoid the systemic toxic effects and at the same time increase the dose of nitrogen mustard, Klopp and associates [10] developed technics for the intra-[illegible]

Isolated limb perfusion





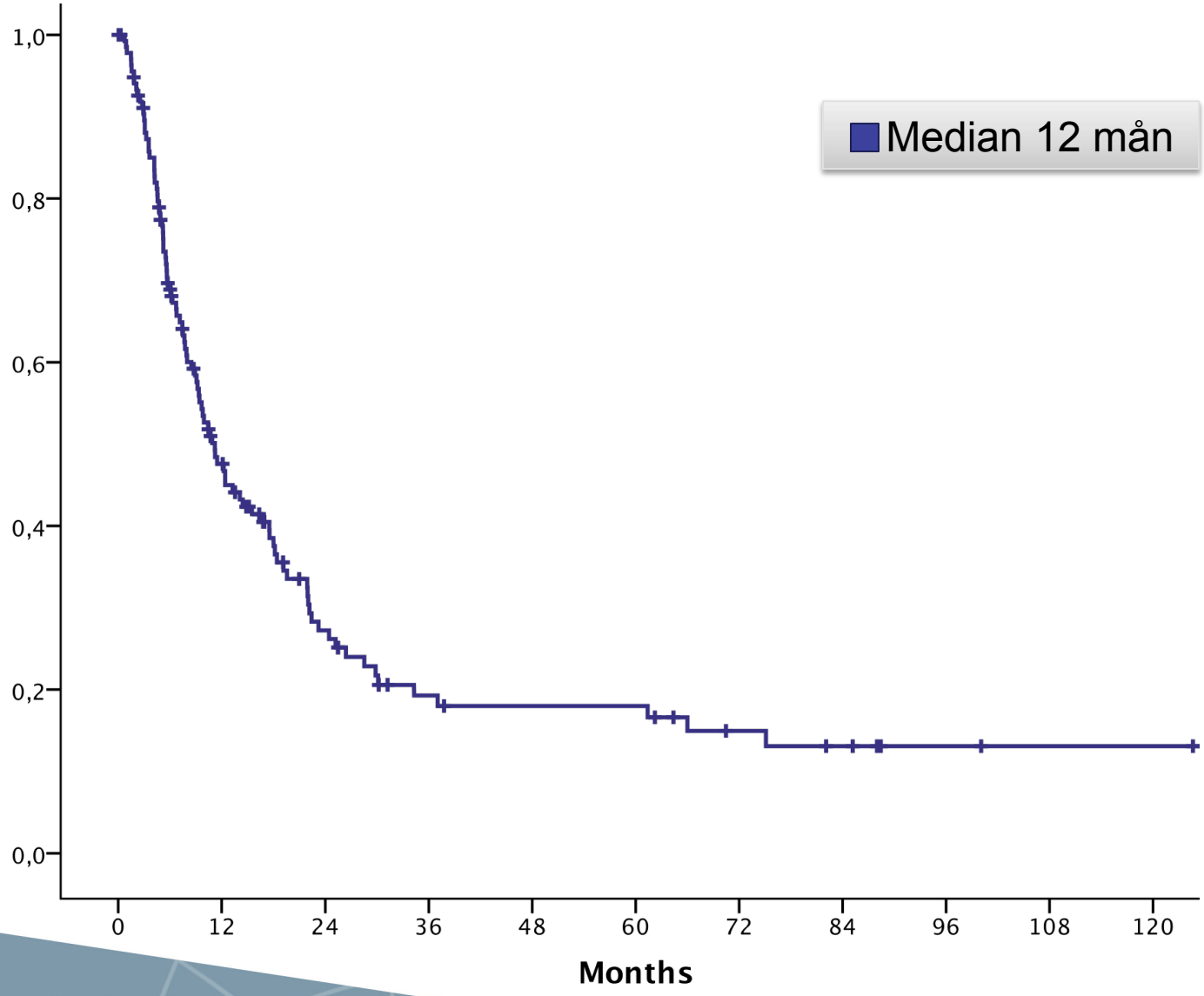

7.51
21
3.5
-1
39.8
100
35.0
5.7
0.87
70
CYBERMED

Resultat

- CR 65%
- PR 21%
- SD 11%
- PD 3%

} 86% respons

Lokalrecidiv



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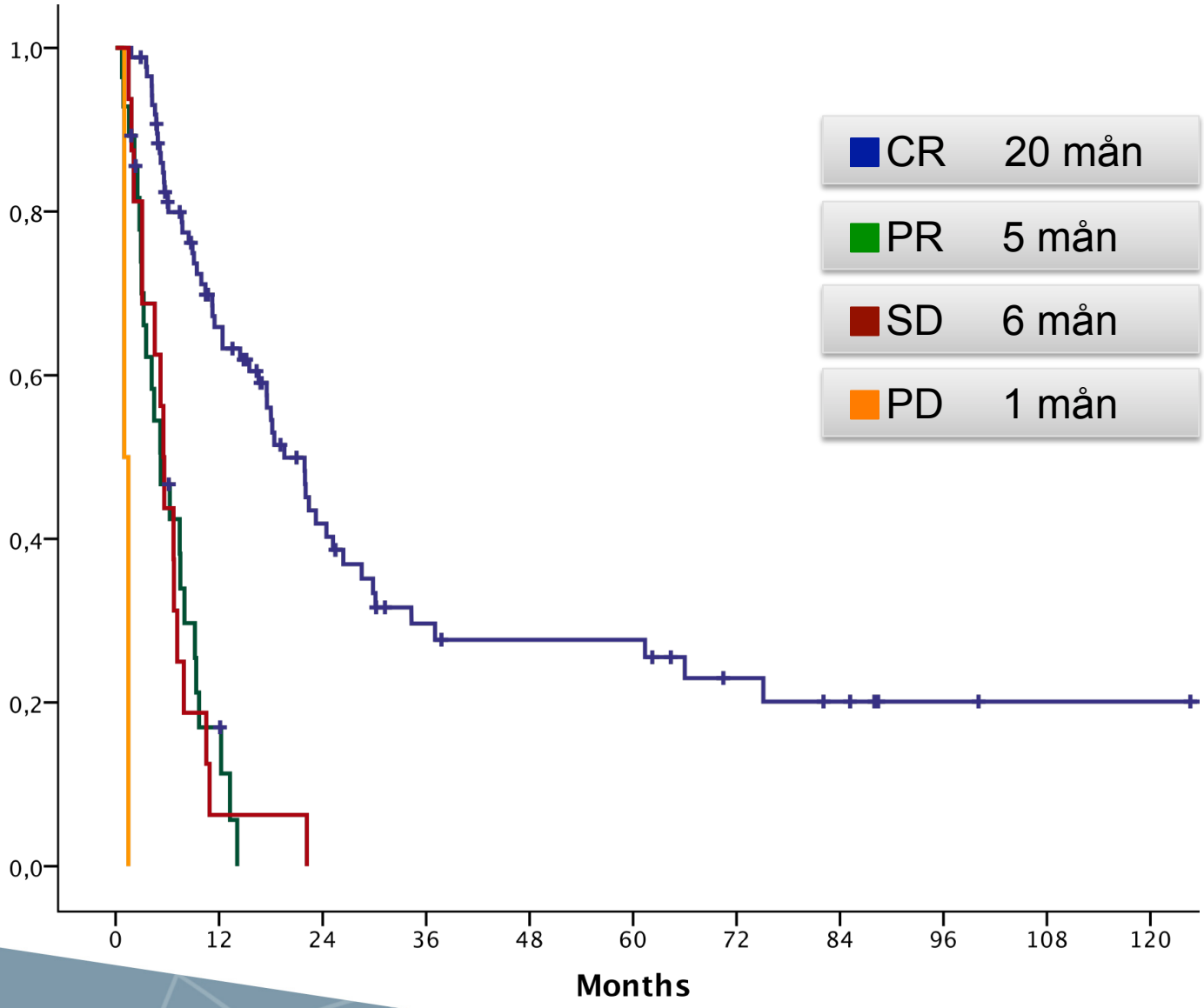
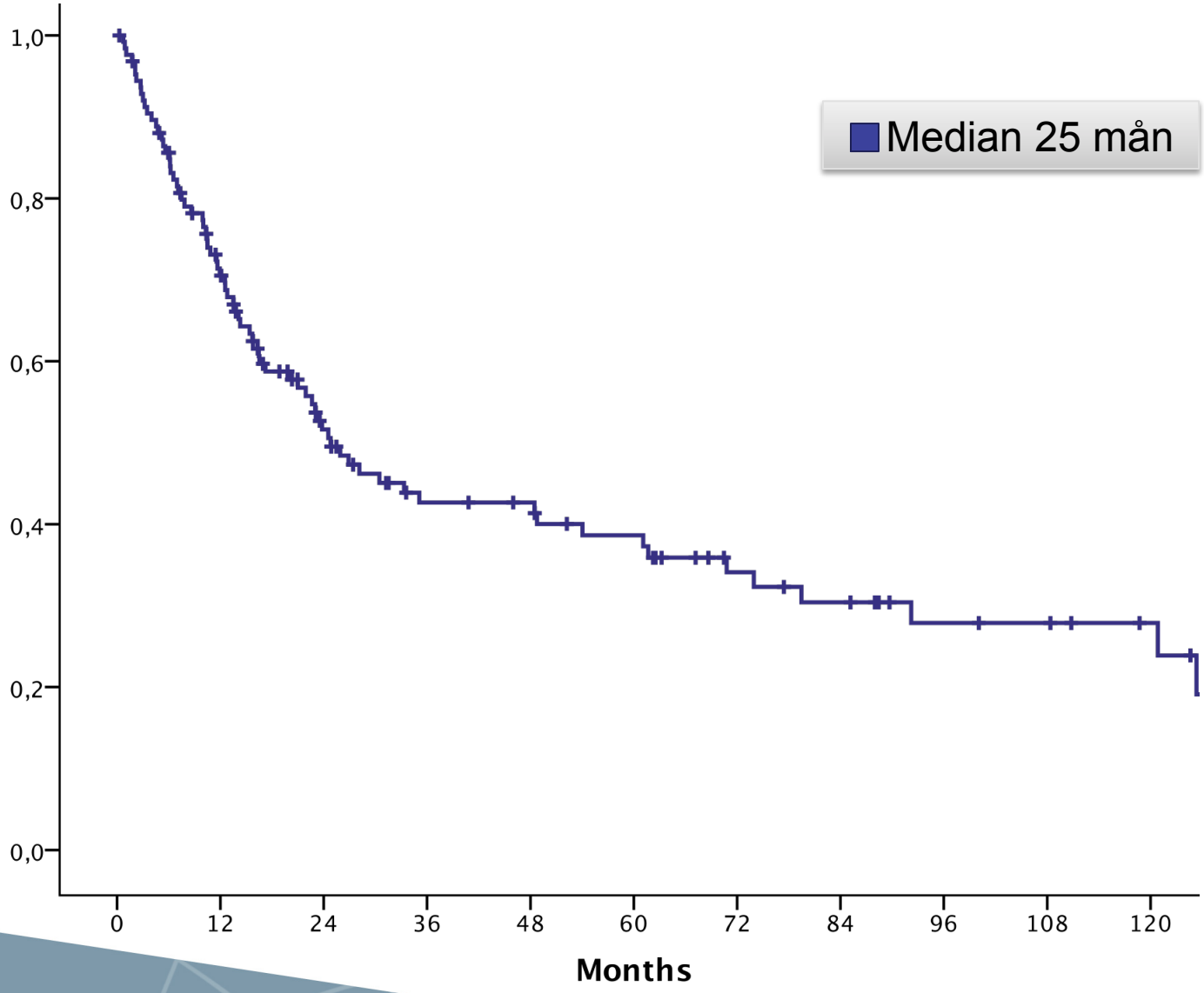
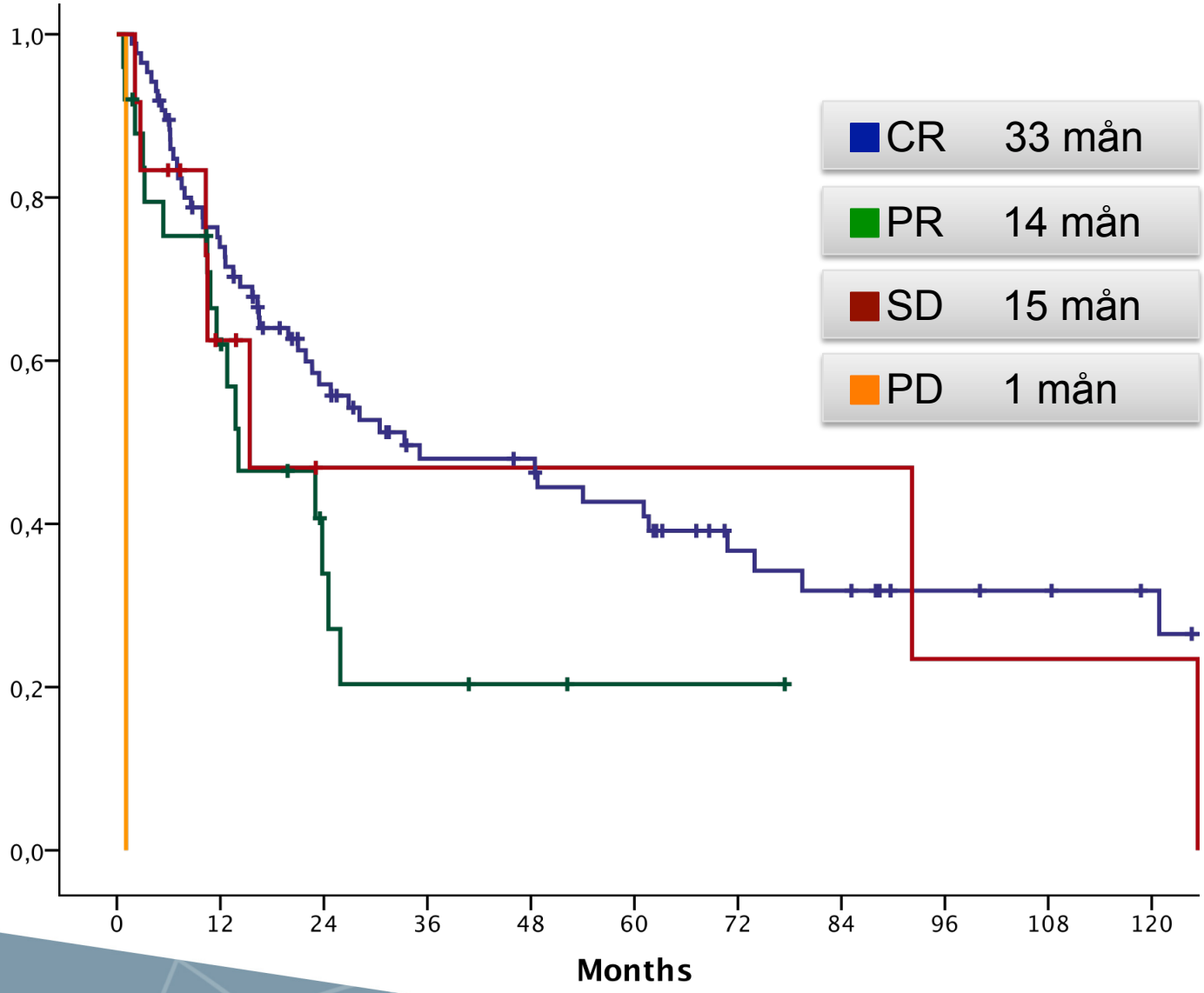


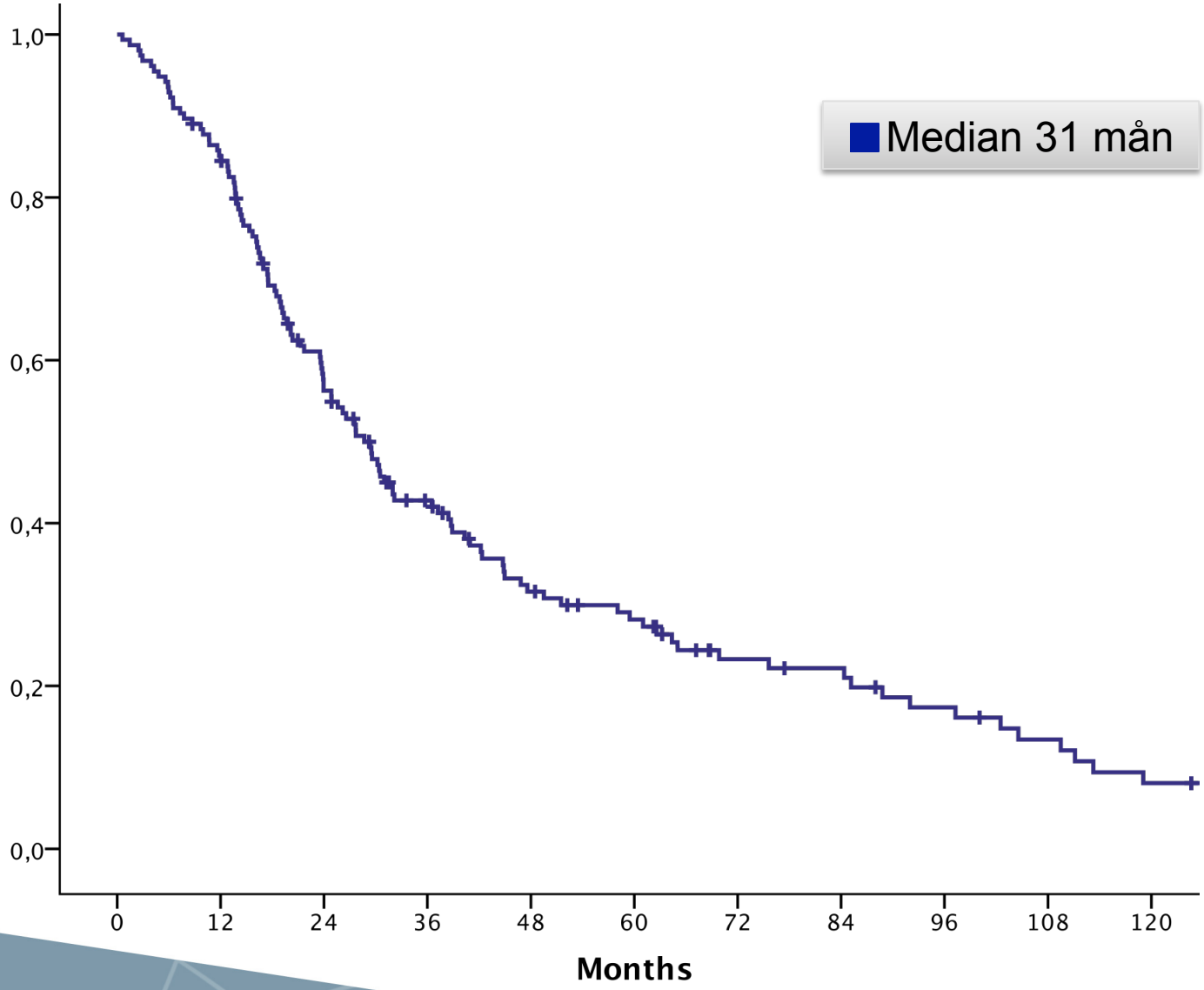
Fjärrmetastaser



Fjärrmetastaser



Överlevnad


1,0
0,8
0,6
0,4
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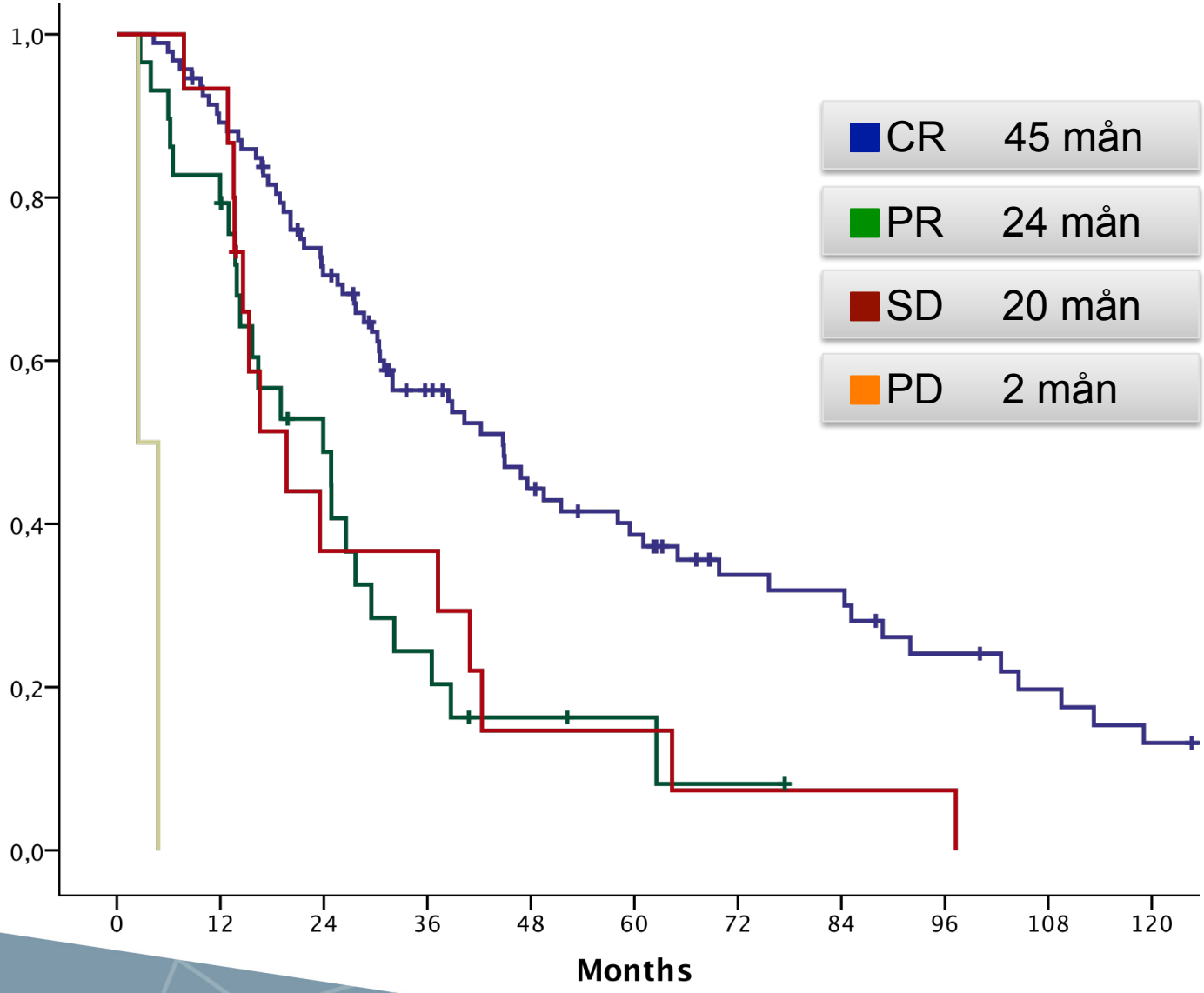
0
12
24
36
48
60
72
84
96
108
120
Months
Median 31 mån

Överlevnad


1,0
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72
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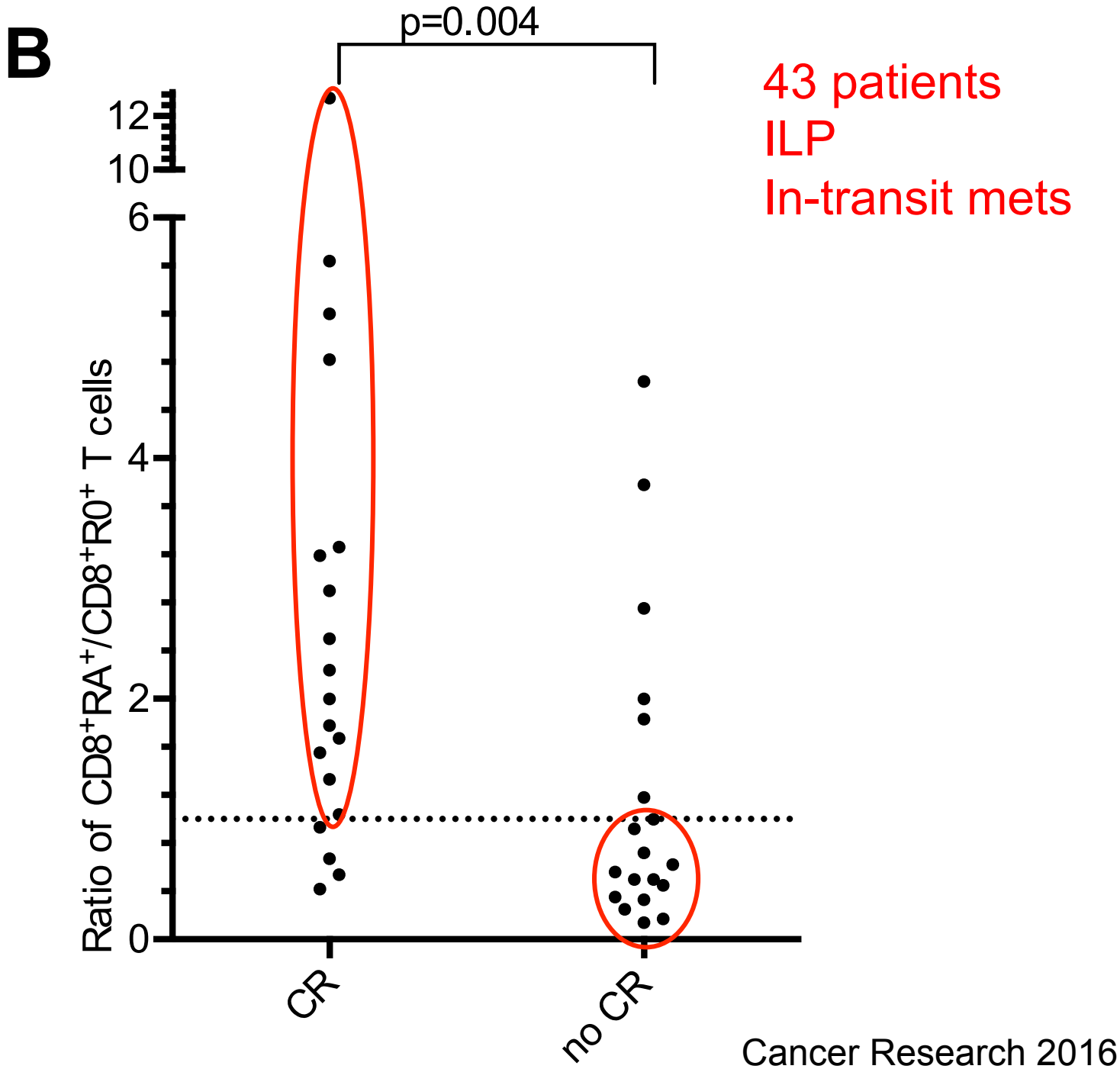
96
108
120
Months
CR 45 mån
PR 24 mån
SD 20 mån
PD 2 mån


B
p=0.004
43 patients
ILP
In-transit mets
Ratio of CD8+RA+/CD8+R0+ T cells
12
10
6
4
2
0
CR
no CR
Cancer Research 2016

SARKOM

Sarkom

- Mer än 50 olika subtyper
- Lungmetastaser
- 60% återfinns i extremiteter
- Tidigare amputation, nu extremitetsbevarande i 90%
- Strålning/Cytostatika

Sarkom

INDIKATION

- Avancerad mjukdelssarkom i extremitet
- Amputationskandidat
- Neoadjuvant
- Palliativt

PERFUSION

- Melphalan+TNF-alpha

Respons

- CR 21%
- PR 52%
- SD 24%
- Progress 2%

} 73% respons

Amputation

Limb salvage 76%

Vad göra?

Sedan 2016 nivåstrukturering, endast en vårdgivare i Sverige.

Remittera patienten till kirurgkliniken SU/Sahlgrenska.

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