

A STUDY OF ENDOSCOPIC TREATMENT OF ADVANCED ESOPHAGEAL AND GASTRIC CARCINOMA

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Objective: To investigate the effect of endoscopic treatment on advanced esophageal and gastric carcinoma. **Methods:** Twenty advanced gastric cancer patients and 25 advanced esophageal cancer patients, who had recurrence after operation and radiotherapy were managed by endoscopic treatment. **Results:** 10 cases were treated to stop bleeding only, 35 cases were treated by microwave, dilation and local chemotherapy. The successful rate of hemostasis was about 67%, the remission rate of digestive obstruction was about 100% after dilation, 83% of the recurrence lesions were relieved by endoscopic chemotherapy. **Conclusion:** Endoscope treatment has certain therapeutic efficiency for the recurrence of advanced esophageal and gastric cancer.

Key word: Endoscopy, Recurrence, Esophageal carcinoma, Gastric carcinoma.

The life quality of gastric and esophageal cancer patients were very poor when there were recurrence lesion after operation and radiotherapy, especially in the advanced cancer patients, who could not eat any more and those life was only maintained by infusion. Furthermore, the lesion could hardly be treated, and hemorrhage, perforation would be occurred at the period. Considering their condition, we treated the patients by dilation, homeostasis and endoscopic chemotherapy, certain effect on the treatment of these patients have been obtained by the combination therapy.^{1,2}

MATERIALS AND METHODS

Clinic Materials

Twenty advanced gastric cancer cases and 25 advanced esophageal cancer cases with ages ranged from 44 to 80 years old, who were definitively diagnosed both by endoscope and pathology and had recurred lesions after operation and radiotherapy, they could not suffer general chemotherapy.

Method of Treatment

Olympus GIF 130 video gastroendoscope was used, the dilator was produced by Cook USA, the endoscopic injection needle was made by Olympus of Japan. After an injection of benzodiazepine 10 mg, the examination of endoscope began, when we found stricture, the guide wire was put in through the stricture, then the endoscope was put out, the stricture was dilated from 0.6 cm to 1.4 cm gradually by the dilator, the endoscope was put in again, local multiple points chemotherapy was performed at the base of the carcinoma, MMC was dissolved in 5-FU 250 mg was separately injected at each point, then anhydrous ethanol 2 ml or sclerotherapeutic medicine was injected separately at different points. It was no necessary to dilate for advanced gastric carcinoma, the chemotherapeutic drugs and other medicine were injected directly with the same method. All the patients were treated one time a week, two weeks a month for 4 or 6 months.

A Judgement of Effect

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A judgement of effect depends on the standard of WHO, at the same time the function test of liver and blood routine examination had been studied in order to estimate the general toxicity which caused by local chemotherapy.

RESULTS

After a period the patients who underwent local chemotherapy could take half-liquid food, the blood test and the function of liver test were always normal. The complications were shown in Table 1, the therapeutic effects were shown in Table 2.

Table 1. The complications of local Chemotherapy by endoscopy

Complications	Chemotherapy +ethanal	Chemotherapy +sclerotherapy
Pain	100%	0
Hemorrhage	>90%	0
Perforation	0	0

Table 2. The effects of local chemotherapy by endoscopy

	Chemotherapy +ethanal	Chemotherapy +sclerotherapy
Part relief of lesion	83% (15/18)	88% (15/17)
Obstruction relief	100% (18/18)	100% (17/17)
Hemostasis	67% (12/18)	100% (17/17)

DISCUSSION

Some efficiency on the treatment of advanced

gastric cancer and advanced esophageal cancer, who could not suffer operation or radiotherapy was observed. With microwave, dilation as well as local chemotherapy by endoscope, advanced esophageal and gastric cancer could be palliatively treated. The digestive obstruction was markedly relieved by the therapy, after a period, the patients could take half-liquid food so that their life quality was improved.^{3,4}

The digestive obstruction was rapidly relieved by local chemotherapy with ethanol but the high rate of hemorrhage and pains were observed.

The obstruction was relieved and effect on hemostasis was also observed by local chemotherapy with sclerotherapy, in addition, the reaction of pain was less than other groups, therefore it was a suitable united medicine.

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