

# Pleurectomy/decortication proposed preferred surgical procedure

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Patients with early stage malignant pleural mesothelioma (MPM), a cancer that develops in the lining of the lungs, may be eligible for aggressive multi-modality therapy involving surgery, radiotherapy and chemotherapy. There are two main approaches, and controversy has existed about which approach is superior. One is called extrapleural pneumonectomy (EPP), a very extensive surgery where surgeons remove the entire diseased lung, lung lining (pleura), part of the membrane covering the heart (pericardium) and part of the diaphragm. Another approach involves a less extensive surgery called pleurectomy/decortication (P/D), where surgeons remove part of the lining around the lungs, potentially part, but not all of the lung, and potentially part of the diaphragm and/or membrane around the heart. Research presented in the April 2012 issue of the International Association for the Study of Lung Cancer's (IASLC) *Journal of Thoracic Oncology* concludes that the P/D method had better results for patients in a recent analysis.

According to the study, "EPP resulted in higher mortality and morbidity than P/D, and P/D resulted in significantly better survival in our experience as in others." The authors, "propose that P/D becomes the standard surgical procedure offered as part of multi-modality therapy in malignant pleural mesothelioma."

Until recently, EPP was the considered the standard of treatment. But this latest study along with other recent research seems to point to P/D becoming the new standard of treatment. Dr. Michael Weyant, thoracic

surgeon and assistant professor at the University of Colorado, wrote an editorial in the April JTO about this topic. He concludes that, "the results of the current study by Lang-Lazdunski et al provide additional data that should lead us to consider P/D in all trials of treatment for MPM. It is too early based on this data to completely abandon EPP altogether as there may be patient subsets where the potential reward outweighs the risks of the procedure."

The lead author of this work is Dr. Loïc Lang-Lazdunski, IASLC member co-authors include Dr. David Landau and Dr. James Spicer, all at King's College London-Division of Cancer Studies.

Provided by International Association for the Study of Lung Cancer

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