Medical Xpress

New clinical trial for patients with asbestos-associated lung cancer

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The Mesothelioma Center within the Herbert Irving Comprehensive Cancer Center at NewYork-Presbyterian Hospital and Columbia University Medical Center is now recruiting patients for a clinical research study of a new targeted radiation and chemotherapy protocol for pleural mesothelioma, a cancer of the lung's lining that is almost always caused by previous exposure to asbestos.

The standard treatment for pleural mesothelioma is currently surgery to remove the patient's lung - a potentially debilitating consequence.

"Current surgical and chemotherapy treatments of patients with malignant pleural mesothelioma are unsatisfactory, and have not been shown to significantly prolong survival. In this study, we will investigate whether a combination of chemotherapy and radiation targeted directly at the lung's lining can improve outcomes while avoiding surgery," says Dr. Robert Taub, the study's principal investigator, director of the Mesothelioma Center at NewYork-Presbyterian/Columbia and professor of clinical medicine at Columbia University College of Physicians and Surgeons. "In addition, this approach has shown to have minimal toxic side effects compared to systemic chemotherapy."

"This trial is also significant because our center is the only one nationwide that is offering this experimental therapy to treat pleural mesothelioma," added Dr. Taub. "We are very focused on offering these patients the best treatment that medical technology can offer while simultaneously working to preserve quality of life."

Researchers also anticipate that the radiation therapy will kill the cancer cells on surface of the lung while sparing other parts of the lung and surrounding vital tissues.

"Delivery of radiation therapy directly into the pleural cavity is a strategy that has been employed since 1945. Today, direct injection of radioactive isotope P-32 may prove to be a significant and effective therapeutic approach for selected mesothelioma patients," adds Dr. Rashid Fawwaz, study co-investigator, radiologist at NewYork-Presbyterian/Columbia and professor of clinical radiology at Columbia University College of Physicians and Surgeons.

"Overall, it is hoped that this study will decrease the need for patients to undergo radical surgery," states Dr. Joshua Sonett, study co-investigator, chief of general thoracic surgery, surgical director of the Lung Transplant Program and surgical director of the High-Risk Lung Assessment Program at NewYork-Presbyterian/Columbia and professor of clinical surgery at Columbia University College of Physicians and Surgeons.

Participating patients will receive several rounds of targeted chemotherapy using the drugs cisplatin and doxorubicin via surgically implanted catheters. Some patients will be randomly selected to receive additional systemic (intravenous) chemotherapy using the drugs cisplatin and pemetrexed. All patients will receive targeted radiotherapy using the P-32 radioisotope. Patients may elect to receive additional surgical treatment, including removal of the affected lung lining or lung. Subsequently, patients will be offered outpatient systemic chemotherapy with cisplatin and pemetrexed.

The investigators previously led a prospective study that employed a similar protocol for patients with pleural mesothelioma as well as those with the more retractable sarcomatous disease. Completed in 2002, the

study reported a median survival of 70 months, and a three-year survival of 67 percent (*American Journal of Clinical Oncology*, February 2008).

Source: New York- Presbyterian Hospital/Columbia University Medical Center

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