

Case Presentation on MPM

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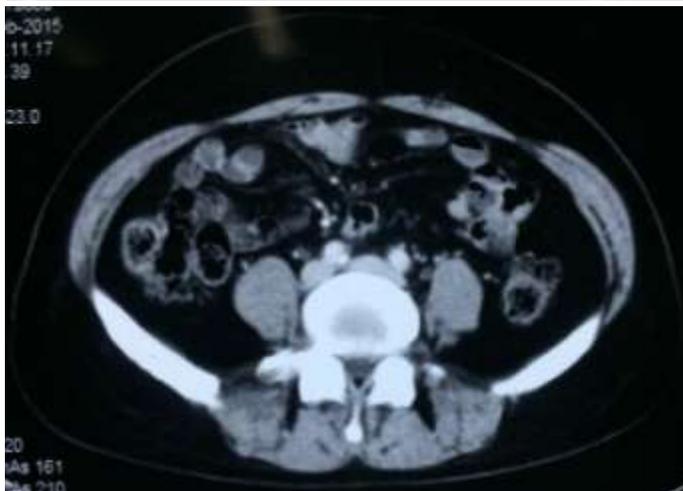
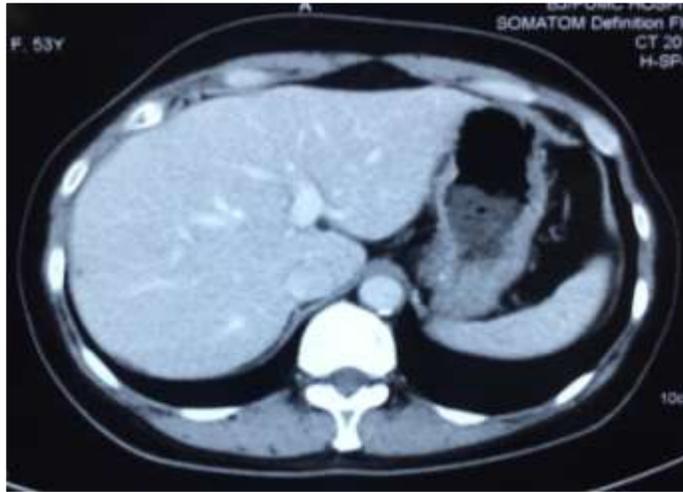
Case Presentation

- **Female, 54 years**
- **CA199 increased, 20 months**
- **Abdominal pain and distention, 6 months**
- **Past history: asbestos exposure 4 years at childhood, lymph node tuberculosis**
- **Family history: mother died of rectal cancer, sister pulmonary tuberculosis**

Case Presentation

□ 2015-11 Peking Union Hospital:

CA199 **46** ↑ U/ml, fecal OB +, no symptoms



Case Presentation

□ **2016-04-21 Peking Union Hospital**

CA199 22.3 U/ml, CA125 86.6 ↑ U/ml.

gastroscopy & coloscopy : polyps

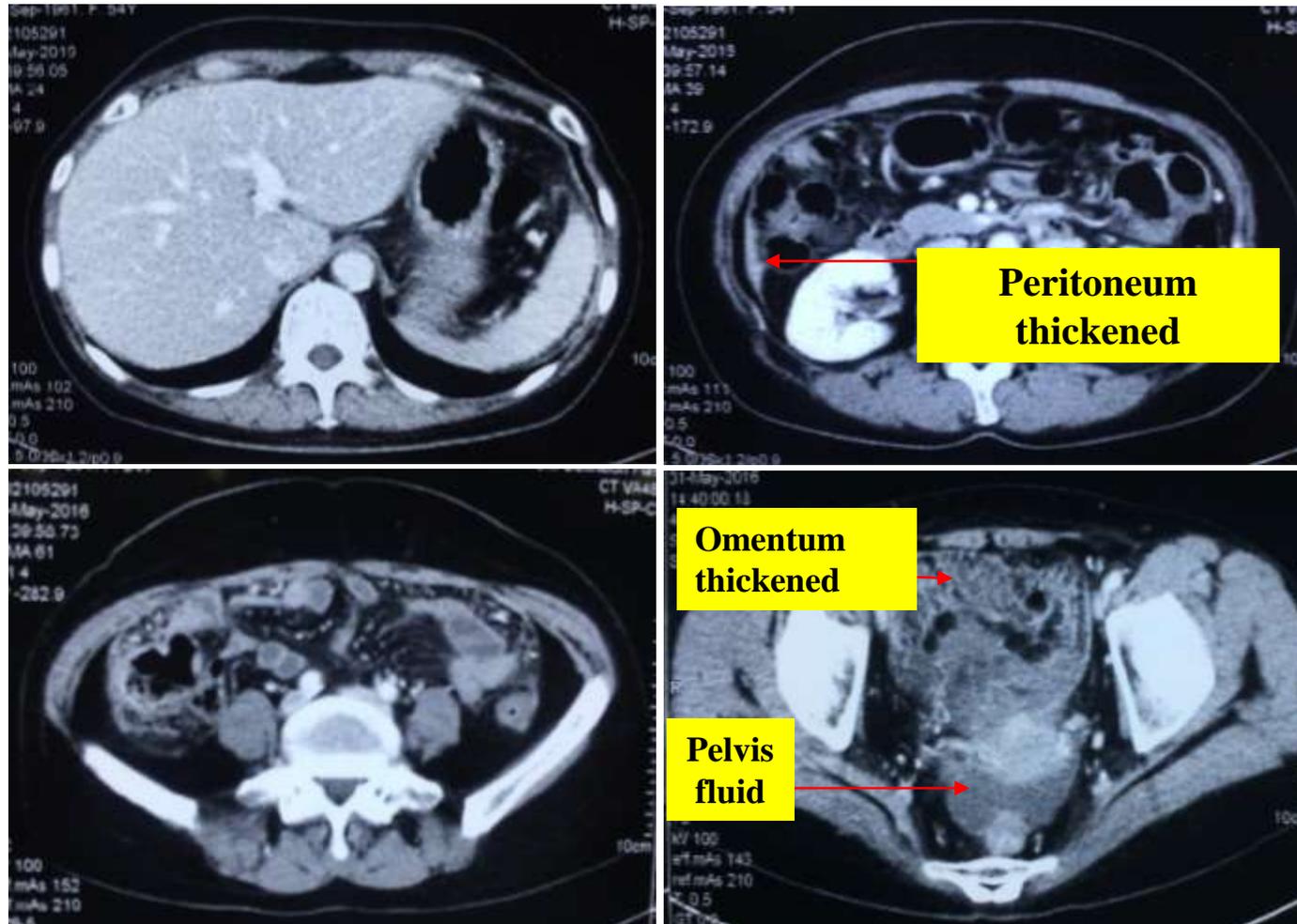
pelvic ultrasonography: inflammatory fluid

Treated for indigestion, anti-inflammation regimens

Case Presentation

□ 2016-05-30 Peking Union Hospital:

afternoon fever, 37.8°C, body weight loss, abdominal tenderness



Case Presentation

Questions:

1. Diagnosis?

2. Treatment?

Case Presentation

□ 2016-06-03 Peking Union Hospital:

PE: T 38.5, abdominal pain

uterus fixed with small intestines attached

ovaries normal size

pelvic fluid increased

ESR **101** ↑ mm/h,

CA125 **63.4** ↑ U/ml,

hsCRP **157.39** ↑ ng/L

Anti-tuberculosis treatment

Case Presentation

□ **2016-07-28 PKU Hospital:**

Fever 38.9 C

Ultrasonography: abdominal and pelvic fluid

CA125, 48.1 ↑ U/ml.

Anti-tuberculosis treatment

Case Presentation

□ **2016-08-10 PLA Hospital:**

**Ultrasonography: ovaries enlarged, omentum cake,
ascites, abdominal multiple nodules**

Ultrasound guided biopsy

Tissue pathology: malignant mesothelioma

Pemetrexed + cisplatin Chemotherapy: deterioration

Question:

What should be done next?

Case Presentation

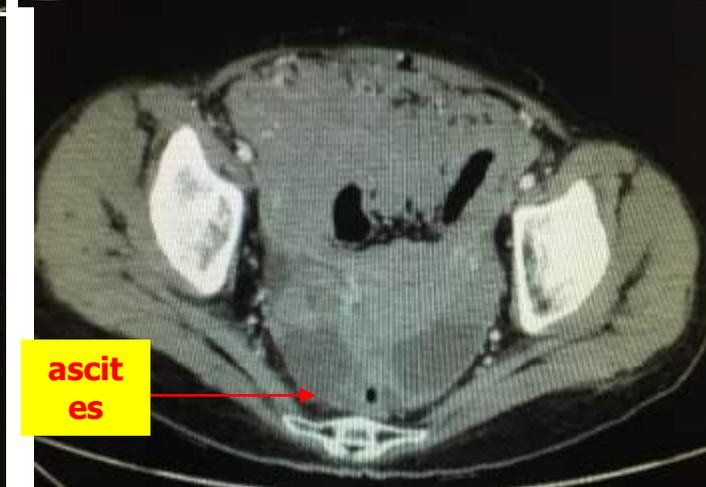
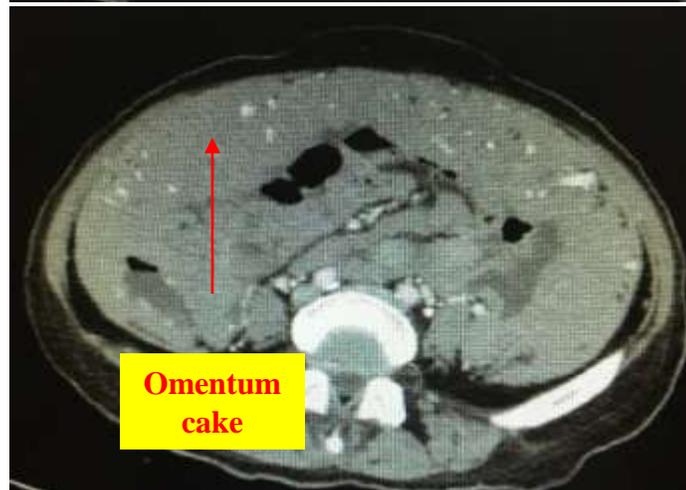
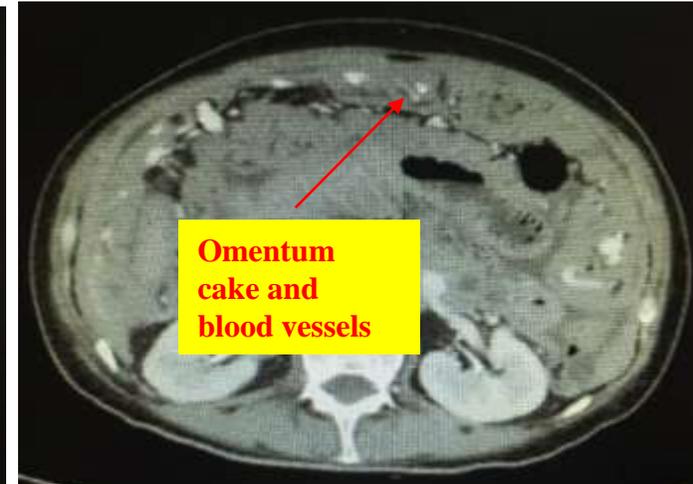
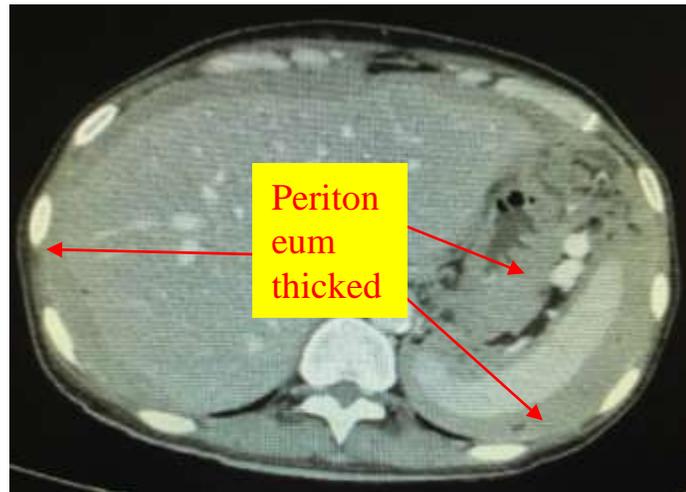
□ **2016-08-29 Referred to Beijing Shijitan Hospital**

CA125 **71.1** ↑ U/ml, CA199 **50.51** ↑ U/ml.

□ WBC **20.99×10^9** ↑↑ /L, HB **83** ↓g/L, PLT **930×10^9** ↑↑ /L.

Case Presentation

□ 2016-09-02 abdominal and pelvic CT



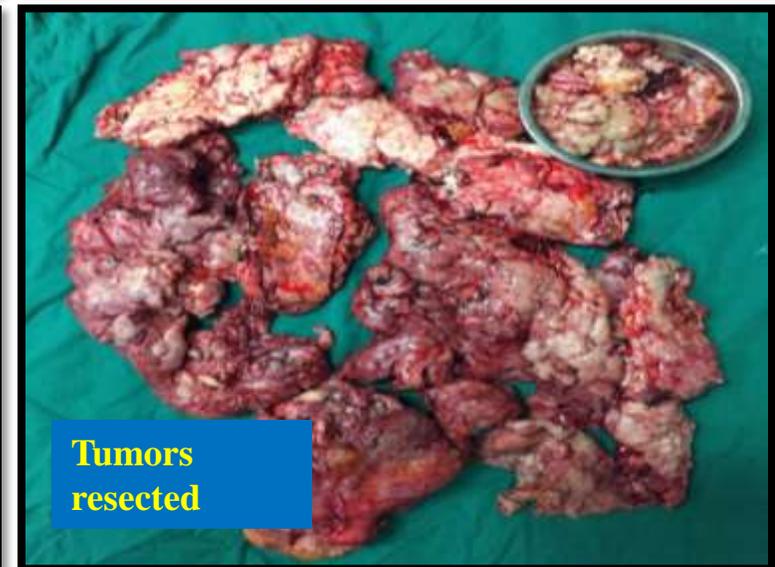
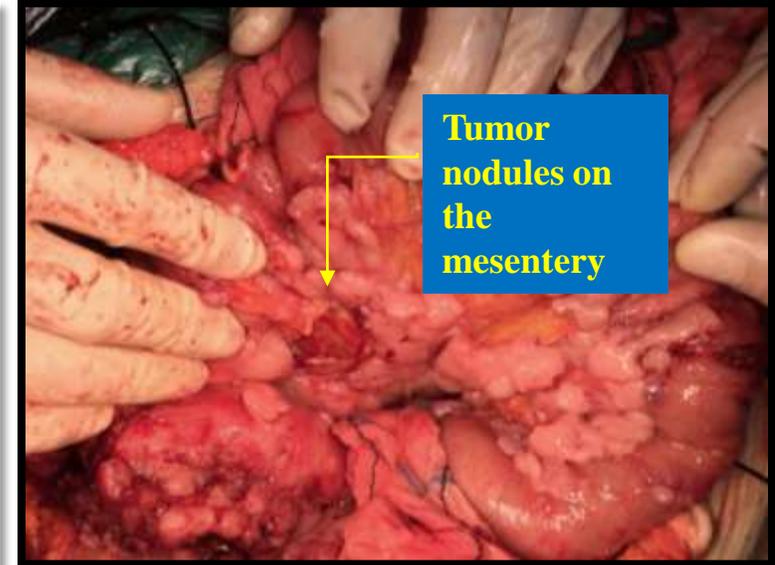
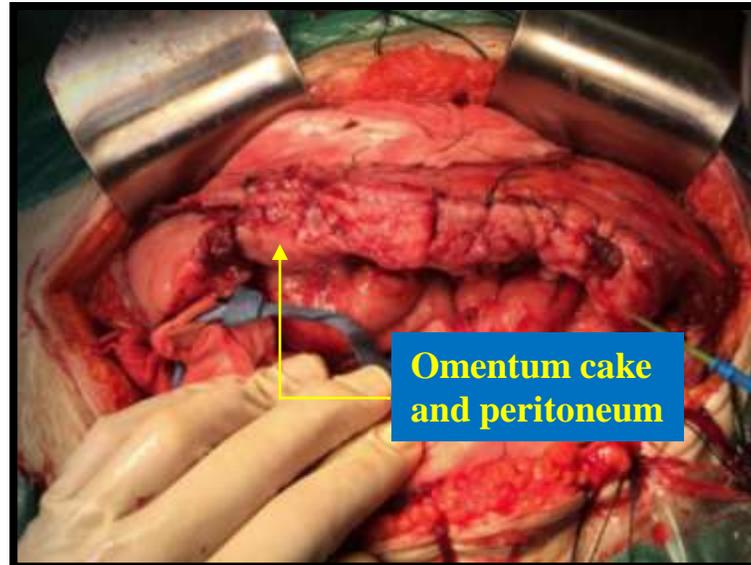
Case Presentation

□ 2016-09-06 Radiography



Case Presentation

- ❑ 2016-09-07 CRS + HIPEC
- ❑ Omentum
- ❑ Simoid-rectum-uterus-ovaries
- ❑ Right colonectomy
- ❑ Transverse colostomy
- ❑ HIPEC: DDP, decetaxel
- ❑ PCI 39
- ❑ CC 2
- ❑ Time: 950 min.
- ❑ bleeding: 3000 ml.
- ❑ Transfusion: RBC 10 U,
- ❑ plasm 1000l



Case Presentation

□ On systemic chemotherapy:

□ Pemetrexed + cisplatin

□ 8 cycles

□ Anti-angiogenesis therapy:

□ Avastin

□ 2017-06-30 disease progression

Key Message

- **Malignant mesothelioma: increasing in China**
- **Misdiagnosis still a big problem**
- **Conventional therapy does little effect**
- **CRS+HIPEC a recommended treatment**
- **Education campaign need to promote early diagnosis**

Thank you for your attention!



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