

MALIGNANT MESOTHELIOMA—AN AUTOPSY PATHOLOGIC OBSERVATION OF 6 CASES

Yu Guo, et al

Department of the Pathology, General Hospital of PLA, Beijing

Six cases of malignant mesothelioma by autopsy confirmation are reported. They can be divided into five histologic types: tubulopapillary, fibrosarcomatoid, undifferentiated, mesothelial cell and mixed cell types. These data suggest that diagnosis of the malignant mesothelioma may be ascribed to (1) tumor strictly localized to body cavity viscera lamina or parietal lamina, but no other primary tumor, (2) often two or more types were present in one tumor, (3) no basement membrane between epithelial cells and stroma, (4) hyperplasia mesothelial cells and malignant areas may coexist with definite areas of dysplastic transition, (5) malignant mesothelioma cells contained a large amount of hyaluronic acid, strong positive for Alcian blue stains. In addition, we also discussed the pathogenesis of the malignant mesothelioma.

卫康醇治疗肺癌出现心脏毒性一例报告

湖北省肿瘤医院中医科 尹素云

患者,男,36岁,反复咳嗽八月,左侧胸闷一月曾抗痨治疗无效。外院胸片诊断“左中心肺癌伴左胸腔积液”,于1985年12月19日入我院,体征:左锁骨上淋巴结 $1.5 \times 2\text{cm}$,右锁骨上可触及 0.3×0.2 和 $0.1 \times 0.2\text{cm}$ 大小淋巴结,质硬,固定,无压痛,两腋窝各触及 $1 \times 2\text{cm}$ 淋巴结,质硬,无压痛,左上肺呼吸音减弱,左肩胛下呼吸音消失,心肝肾功能检查属正常范围,左锁骨上窝淋巴结穿刺细胞诊断“转移瘤”。胸水细胞学检查诊断“腺癌”。86年元月用卫康醇治疗 $40\text{mg}/\text{日}$ 静滴,五日一疗程,停2—3周重复,每疗程前均行心肝肾功能检查,连用5个疗程病情控制,咳嗽,胸闷减轻,淋巴结有不同程度缩小。经胸腔穿刺五次,腔内注射丝裂霉素 30mg ,B超检查胸水减少呈包裹性积液。第五次(2/5)用卫康醇后心电图检查,出现T波:I、II、aVF, V_5 低平, V_1 直立,在用中药及西药(ATP、辅酶A,高渗糖+vitc)保护心肌的情况下,继续用四个疗程。用药期间经心电图密切观察,T波先后在部分导联和各导联出现低平,于

28/10停用卫康醇。但患者感胸闷,心慌加重,两次胸片检查,左侧胸腔积液量多,纵隔向右移位明显,心界大小正常,右肺转移结节增多,增大,以后连续三次EKG检查,各导联T波低平, $V_5 < R \frac{1}{10}$,心肌明显受损,后因病情逐渐恶化,加之应用中西药治疗心肌受损未能恢复,87年元月19日死亡。

讨论:卫康醇于84年3月12日鉴定投产使用,是细胞周期非特异性药物,较易通过血脑屏障,并能抑制DNA和RNA合成,对慢性粒细胞白血病,肺癌,骨髓瘤等,有一定疗效,而对肺腺癌疗效较好,本例为晚期肺腺癌,经治疗存活一年一个月。

卫康醇的毒副作用主要表现为白细胞,血小板减少,中度消化道反应,未记载对心肌的毒性,而本例用药达 850mg 时既出现心肌受损,说明该药达到一定量时对心脏有一定毒性,特报道以引起重视。

(承蒙陈延昌主任医师指导,致谢)。