Treatment of ectopic radiotherapy resistant nasopharyngeal carcinoma with cisplatine and 5-fluracil based on protocol in a 15 years old patient.

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Abstract:

Nasopharyngeal carcinoma in children is rare accounting for only 1% of all pediatric malignancies. Both genetic and environmental factors contribute to the development of nasopharyngeal carcinoma. In children there is a higher rate of undifferentiated histology.

The mean age of diagnosis of nasopharyngeal carcinoma is 11 years old age and the most common site is nasopharynx. Palpable lymphadenopathy, dysphasia and neural defect are common associated signs.

Our patient is a 15 years old boy who had a mass that located near by the heart in the left side of mediastinum with invasion to anterior mediastan from two years ago. In serial CT scans he had not evidence of nasopharyngeal involvement. In biopsy, nasopharyngeal carcinoma, non-keratinizing type, was diagnosed. Patient was treated by radiotherapy with 54 GY and chemotherapy with taxotere. But the mass had not regression. Then, the patient was treated with cisplatine, 5-fluracil and folinic acid for total 3 cycle and after remission interferon beta was added to treatment for 6 months duration as a maintenance therapy. In

1 year follow up the patient was in complete remission. in the course of therapy , only hypothyroidism was occurred.

Ectopic nasopharyngeal carcinoma in child hood, without nasopharyngeal involvement, initially can be detected in other sites such as pericardium. Also better results could be respected by neoadjuant chemotherapy based on cisplatine, 5-fluracil and 6 months interferon beta as a maintenance therapy before radiotherapy in child hood aggressive nasopharyngeal carcinoma.

Key words: Ectopic nasopharyngeal carcinoma, radiotherapy resistant, Treatment