

Journal Watch

Endovascular Stenting in Neoplastic Superior Vena Cava Syndrome Prior to Chemotherapy or Radiotherapy.

Bierdrager E, Lampmann LEH, Lohle PNM, et al. The Journal of Medicine 2005; 63(1):20-23.

Prepared by: Maisoon Osman, M.D. (FMR2)

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Abstract:

BACKGROUND: The standard conventional palliative treatment of choice for patients with neoplastic superior vena cava syndrome (SVCS) is chemotherapy, radiotherapy or surgery. In our study, palliative stenting was used as a first-line therapeutic measure in all cases using self-expanding stents prior to any anti-tumour therapy. **METHODS:** 17 patients, 10 men and 7 women, all of whom presenting with the clinical diagnosis of SVCS confirmed by phlebography combined with CT, were referred for stenting of the superior caval vein. All procedures were performed after local anaesthesia without sedatives or general anaesthesia in the angiosuite at the radiology department. Symptom response was evaluated directly after the procedure at several intervals by clinical and nursing staff. **RESULTS:** 19 self-expanding Symphony stents were successfully implanted in 15 of 17 cancer patients with SVCS in a period of five years. All 15 individuals remained free from SVCS after the successful stenting procedure. No stent-related complications occurred. **CONCLUSION:** This study demonstrates that palliative SVC stenting prior to any anti-tumour therapy is feasible, easily performed without serious complications and provides a quicker symptom response than obtained with radiation therapy or chemotherapy alone. Primary stenting also provides the opportunity to establish a correct diagnosis before starting anti-tumour therapy.

Comments:

Strengths/uniqueness:

This study is the only study to use endovascular stenting as a first line in SVCS. Simple, well designed prospective study and clear description of the methods. Looked at different variables and outcomes.

Weakness:

Small number of patients, short follow up period and findings needs validation in non-malignant group of patients.

Relevance to Palliative Care:

This study demonstrates palliative SVCS stenting as feasible, easily performed without serious complications. Given the fact that 75-95% of SVCS is caused predominantly by malignancy and usually occur at advanced stage of neoplastic disease, I see this study relevant to palliative care.