

<sup>2</sup> 馬偕醫護管理學校

<sup>3</sup> 國防醫學中心

<sup>4</sup> 馬偕紀念醫院 血液腫瘤科

<sup>5</sup> 馬偕紀念醫院 放射腫瘤科

### 中文摘要

**背景：**在鼻咽癌的治療上，目前最主要的治療方式是以同步執行化學治療及放射治療。而在化學治療的選擇上，最常被使用來治療鼻咽癌的是白金製劑(platinum-base agent)加上有利癌(5-fluorouracil)。而太平洋紫杉醇(Paclitaxel)被証實可用來治療復發及轉移的鼻咽癌。本回溯性研究分析即是針對這兩種不同的化學治療方式，提出治療結果整體存活率及無疾病存活率之比較。

**方法：**本研究採回溯性分析。自2002年1月至2004年12月，於馬偕紀念醫院頭頸癌治療團隊診斷為鼻咽癌的病人，累計共77例，接受同步執行化學治療及放射治療。在化學治療的藥劑當中，其中67例接受順鉑(cisplatin)加上有利癌治療(PF組)，10例接受太平洋紫杉醇，順鉑加上有利癌治療(TPF組)。平均追蹤期間為43個月。

**結果：**本研究發現鼻咽癌患者整體的5年存活率約為72%，PF組及TPF組分別為71%及80%。而5年無疾病存活率PF組及TPF組分別為64%及70%。皆無統計學上的差異。

**結論：**本研究無法證實太平洋紫杉醇，在鼻咽癌患者同步執行化學治療及放射治療的好處。同步順鉑，有利癌及放射治療目前仍是鼻咽癌患者的首選治療。

**關鍵字：**鼻咽癌、同步化學放射治療、太平洋紫杉醇

## INTRODUCTION

Nasopharyngeal carcinoma (NPC) is endemic in the region of Southeast Asia but remains a rare malignancy in Western countries. The annual incidence ranged from 30 to 80 per 100,000 [1]. In Taiwan, the incidence of nasopharyngeal carcinoma has decreased gradually in the past two decades. The incidence rates of nasopharyngeal carcinoma were 9.16 per 100,000 for men and 3.35 for women in the year 1981 and 8.92 for men and 2.86 for women in the year 2002 [2]. The primary tumor generally arises from the lateral walls of the nasopharynx. It is considered as unresectable or difficult surgical exposure because of its anatomic localization [3]. Fortunately, it is highly sensitive to both radiotherapy and chemotherapy due to tumor cell pat-

tern. Now, concurrent chemoradiotherapy (CCRT) is the treatment of choice in patients with NPC. The most widely use chemotherapy regimen in treatment of NPC has been the combination of platinum-base agent and 5-fluorouracil [4].

Paclitaxel, a compound that promotes the formation of tubulin dimers and stabilizes microtubules against depolymerization, has demonstrated effectiveness in the treatment of ovarian cancer, breast cancer, and non-small cell lung cancer, and has been reported to have a high single-agent activity in advanced head and neck cancer [5]. It was shown that low-dose paclitaxel inhibited cell growth in NPC cells and induced apoptosis, possibly by upregulation of p53 [6]. Also, paclitaxel often administered in combination with platinum has exhibited promising activity in recurrent or metastatic squamous cell cancer of the head and neck [7].

In our hospital, patients with NPC had been treated with CCRT. Most patients received combination chemotherapy of cisplatin and 5-fluorouracil. Ten

---

\*Corresponding author: Yi-Shing Leu M.D.

\*通訊作者：呂宜興醫師

Tel: +886-2-25433535

Fax: +886-2-25433642

E-mail: lys@ms2.mmh.org.tw