شبكة المعلومات الجامعية

بسم اللّه الرحمن الرحيم

Ain Shams University Information Network

جامعة عين شمس

شبكة المعلومات الجامعية

@ ASUNET

HOSSAM MAGHRABY

شبكة المعلومات الجامعية

شبكة المعلومات الجامعية

التوثيق الالكتروني والميكروفيلم

HOSSAM MAGHRABY

شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها

علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات

يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار

HOSSAM MAGHRABY

شبكة المعلومات الجامعية

بعض الوثائق الأصلية تالفة

HOSSAM MAGHRABY

شبكة المعلومات الجامعية

بالرسالة صفحات

لم ترد بالأصل

HOSSAM MAGHRABY

Clinico-Pathological Study of Oncological Emergencies

Thesis

Submitted in partial fulfillment of the Master Degree in Radiation Oncology

By

Abeer Fayek Amin Mousa

M.B.B.Ch. (Assiut University)

Supervised by

Prof. Dr. Mohammed A. Mekkawy

Professor of Radiation Oncology,
Faculty of Medicine, Assiut University

Dr. Hussein A.H. Mahfouz

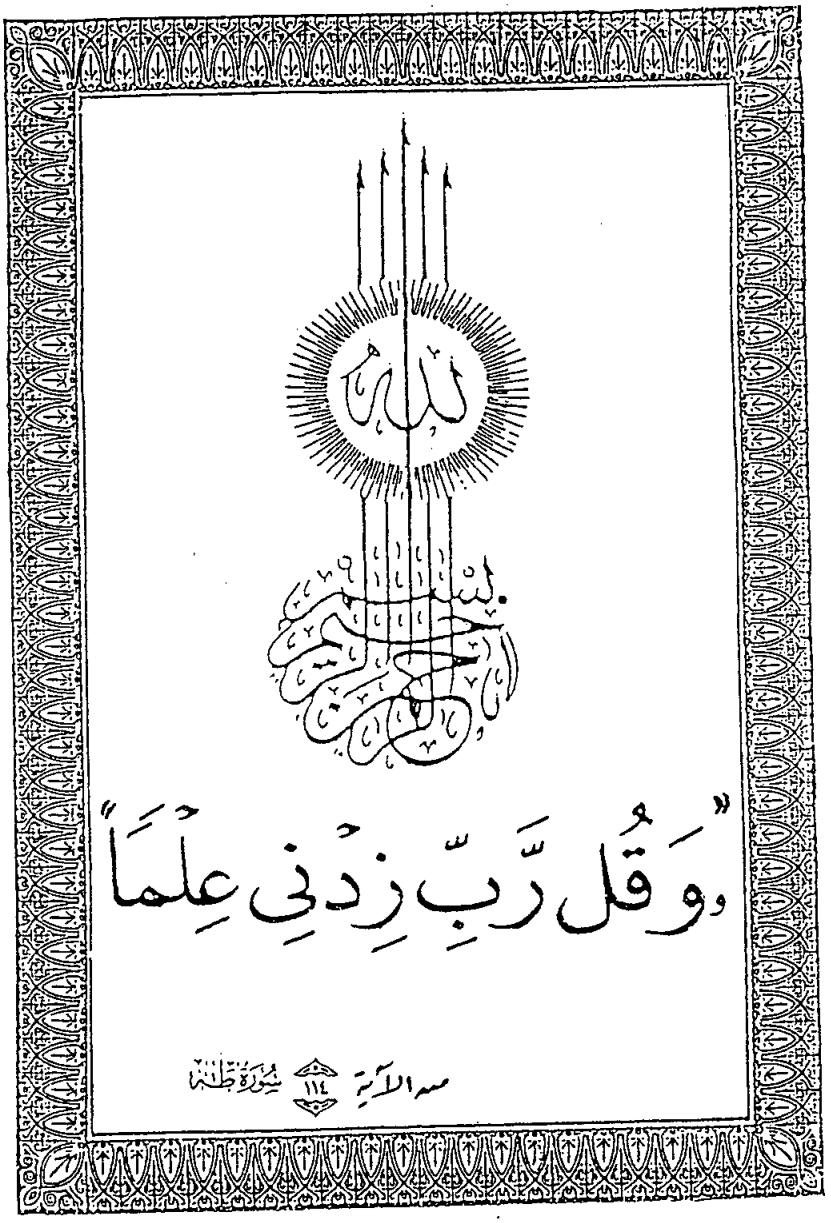
Assistant Professor of Radiation Oncology,
Faculty of Medicine, Assiut University

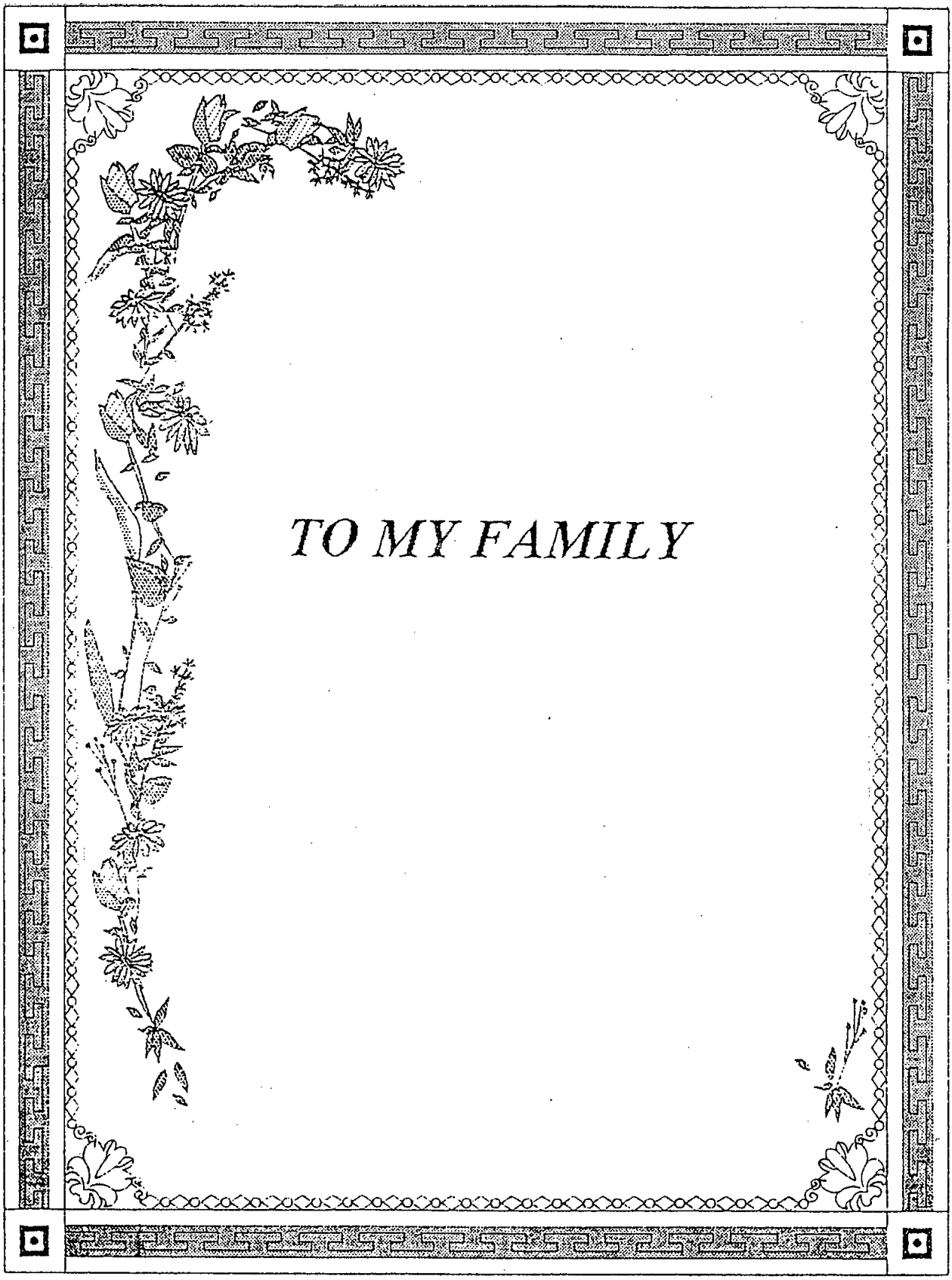
Dr. Taha Z.M. Mahran

Assistant Professor of Radiation Oncology,
Faculty of Medicine, Assiut University

Faculty of Medicine
Assiut University

2001


بسم الله الرحمن الرحيم
"وَقُل رَّبِّ زِدْنِي عِلْمًا"
من الآية ١١٤ سورة طه


TO MY FAMILY

ACKNOWLEDGMENT

First and foremost, I feel always indebted to **God**, the most kind and the most merciful.

It is a pleasure to express my everlasting gratitude to ***Professor Mohammed Abdel-Hakim Mekkawy,*** Professor of Radiation Oncology, Assiut University, for his kind supervision and precious advice. He gave much of his time and effort for the completion of this study.

I will always remain greatly indebted to ***Late Dr. Hussein Mahfouz,*** Assistant Professor of Radiation Oncology, Assiut University, for his indespensible help and meticulous supervision and guidance.

I also wish my profound gratitude to ***Dr. Taha Zaki Mahran,*** Assistant Professor of Radiation Oncology, Assiut University, for his great help and purposeful instructions in preparing this thesis.

I want to express my grateful feeling ***Professor Amina M. Mostafa,*** Professor and Head of Radiation Oncology Department, Assiut University, for her great effort in leading how to think and for helping me to face many problems, her continuous encouragement and her valuable advice.

I want to express my deep thanks to staff members and assistant lecturers in Radiation Oncology Department, Assiut University, for their help and cooperation.

Abeer F. Amin

List of Contents

List of Abbreviations

Br M	:	Brain metastasis
c/th	:	chemotherapy.
Ca	:	Calcium.
ca	:	cancer.
CBC	:	Complete blood picture.
cGY	:	Centigray.
cm	:	centimeter
CML	:	chronic myelogenous leukemia.
CNS	:	central nervous system.
CP	:	chemoperfusion.
CT	:	computerized tomography.
ET	:	embolization therapy.
GIT	:	gastrointestinal tract
Gy	:	Gry
h	:	hour
HIV	:	human imunodifeciency virus
I.U	:	international unit.
IL-6	:	Interlukin 6
K	:	Potassium
KFT	:	kidney function test
Kg	:	kilogram
KPS	:	Karnofsky performance status
LFT	:	liver function test
M.M	:	multiple myeloma
M.O.E	:	metabolic oncologic emergencies
MESCC	:	mitastatic epidural spinal cord compression
Met	:	metastasis
µg	:	microgram
mg	:	milligram
mm	:	milimeter
MmH_2O	:	millimeter water
MRI	:	magnitic resonance image

MSCC	:	metastatic spinal cord compression
MUO	:	metastasis of unknown origin
N.O.E	:	neurological oncologic emergencies
NBP	:	neuropathic bone pain
NHL	:	non Hodjkin lymphoma
OE	:	Oncologic emergencies
PTHRP	:	parathyroid hormone releasing peptide
R.R	:	response rate
Rec	:	recurrent
RPA	:	recursive partioning analysis
RT	:	radiotherapy
SCC	:	spinal cord compression
SCLC	:	small cell lung cancer
SIR	:	score index for radiosurgery
SOE	:	surgical oncologic emergencies
SOL	:	space occupying lesion
SVCS	:	superior vena cava syndrome
T.C.T.	:	intracranial tension
TGF	:	tumour growth factor
TNF-β	:	tumour necrosis factor-β
UOE	:	urologic oncologic emergencies
w	:	week
WBRT	:	whole brain radiation therapy

INTRODUCTION AND AIM OF THE WORK

Introduction

Oncologic emergencies may be defined as a complication of cancer or its treatment that are life threating or capable of inducing irreversable damage if not managed promptly. They may occur at the time of the initial diagnosis during the course of active cancer treatment or later in the natural history of the cancer as a result of progressive disease or delayed toxic side effects of chemotherapy. Early recognition and managment of oncological emergencies can provide prolonged survival and improve quality of life. Oncological emergencies include; increased intracranial tension, spinal cord compression, superior vena cava syndrome bowel obstruction, perforation, hypercalcemia, hyperurecemia, tumour lysis syndrome, acute urinary retention, bladder haemorrhage and pathological fracture (Neilan, 1994).

Oncological emergencies were divided into two categories according to the time of occurrence of the emergency related to the primary malignancy :

1- The patient may be presented by severe life threating condition such as superior vena cava syndrome in lung cancer or lymphoma which must combine the initial diagnosis and staging with appropriate emergency treatment.

2- The emergency may develop during the course of treatment of cancer patient. So it is important to avoid any compromise in the already selected therapeutic regimen and the use of prophylactic measure if possible.

Aim of The Work

This is retrospective analysis of different types of oncologic emergencies which were diagnosed and managed among cancer patients who presented to Radiation Oncology Department in Assuit University Hospital.