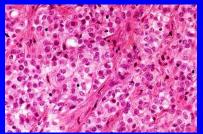
Improved Survival with Interferon Alpha Maintenance Therapy Following Pleurectomy / Decortication and Radiation for Malignant Pleural Mesothelioma



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Mesothelioma: STS 2006

All authors have no conflicts to declare

Prospective Database

- A computerized, prospective database for all patients evaluated by thoracic surgeons at UCLA was started in 1997
- Malignant pleural mesothelioma patients were captured under diagnostic ICD-9 codes 163.0-163.9
- Data captured prospectively includes, diagnoses, risk factors, imaging, laboratory, procedures, chemotherapy, radiation, symptoms and follow-up data

Prospective Database Study Objectives

- to compare outcomes of pleurectomy/ decortication and adjuvant radiation to contemporary radical therapies (EPP; trimodality therapy, etc.)
- to identify additional therapies (if any) that may improve survival in mesothelioma (interferon alpha)

Mesothelioma: UCLA Approach Lung-Sparing Surgery

- Radical parietal pleurectomy
- Complete pulmonary decortication (radical visceral pleurectomy)
- Removal of all pleura/tumor off diaphragm, pericardium, mediastinum, and pulmonary hilum
- Preservation of all tissue planes possible
- Lymph node dissection \checkmark
- Postoperative radiation therapy
- Novel biologic "maintenance" therapies when available

✓ Indicates also part of EPP