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## NEOADJUVANT INTRAARTERIAL. CHEMOTHERAPY WITH CISPLATIN FOR TREATMENT OF ADVANCED CERVICAL CANCER

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**Objective:** *Patients with primarily inoperable, advanced cervical cancer should be brought into an operable stage. Selective angiography and preoperative application of cisplatin into both artery uterine is a therapeutic option with low risks and sideeffects. By this intraarterial application a significant higher intratumoral cisplatin concentration can be reached in comparison to systemic application of cisplatin.*

**Method:** *40 patients suffering from inoperable primary cancers (37 squamous epithel carcinoma, 3 adenocarcinoma) underwent preoperative intraarterial cisplatin infusion 2-3 times into both artery uterine with a doses up to 25 to 50 mg of cisplatin on each side. The representation of the pelvic vessels has been done angiographical both artery uterine have been selected and up to 25 to 50 mg of cisplatin was injected with a perfusor on each side. Due to the known radiosensibilisation caused by cisplatin. 14 patients have been treated additionally with a preoperative intracavitary irradiation 2-3 times (6 Gy each) due to bleeding on the time of clinical admission of the patients.*

**Results:** *The 40 patients were 27-77 years old. At the time of diagnosis the clinical stage according to the International Federation of Gynecology and Obstetrics (FIGO) classification included 18 x FIGO II, 18 x FIGO III and 4 x FIGO IV. 32 patients (80%) had a complete or partial response: on 27 patients (67.5%) a Wertheim Operation could be performed. 8 patients showed stable disease or progressive disease, especially the two adenocarcinoma were nonresponder. Serious sideeffects of the therapy did not occur.*

**Conclusion:** *Regional cisplatin therapy by selective angiography of both artery uterine in combination with preoperative intracavitary irradiation is recommended at advanced cervical cancer to reach an operable stage of primarily nonoperable patients. The rate of response was 80%. Toxic sideeffects could not be found.*

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## HISTOLOGY INVESTIGATION OF PLACENTA IN DIFFERENT TYPES OF RETARDATION REFLECTOR-TONIC REACTION IN NEWBORNS

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**Objective:** *to specify influence of placental pathology on following CNS function retardation in newborns.*

**Methods:** *162 histology investigations of placentas in newborns with different types of retardation of reflector- tonic reactions formation were examined. There are 40 investigations in newborns with dissociate retardation, 92 in newborns with regular retardation, 30 investigations with accordance reflector- tonic reaction of gestational age.*

**Results:** *in newborns with dissociate retardation was revealed significant alterations: in 87% of cases placental structure did not correlate to gestation age. Pathological immaturity of placenta was revealed in all cases. Structural disorders of shaggy chorion were revealed in 55%. Extent involutive-dystrophical changes were showed in 95%. Increasing of shaggy chorion fibrosis were revealed in 45% with higher content of fibrinoid in subchorionic compartment. Expressed circulatory disturbances were showed in 50% of cases. Inflammatory changes of placenta and extraplacental membranes were revealed in 95% cases. Placental insufficiency were revealed in all cases. Mentioned changes were revealed unconstantly and were much less noted in newborns with regular retardation and accordance reflector- tonic reactions of gestational age.*

**Conclusions:** *results of our investigation showed, that coarse extent changes of placenta occur in the cases of reflector- tonic reaction dissociated retardation. Functional disturbances of mother-placenta-fetus complex are followed by these changes.*