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Whole-body hyperthermia and metronomic chemotherapy prevent cancer metastasis

Breast Cancer Therapy
April 8, 2003

2003 APR 8 - ([NewsRx.com](#) & [NewsRx.net](#)) -- Whole-body hyperthermia and metronomic chemotherapy prevent cancer metastasis.

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According to a study from the United States, "many women diagnosed with invasive breast cancer have undetected occult metastases at the time of their primary tumor diagnosis. The development and growth of these micro-metastases relies heavily on angiogenesis. Therefore, administering an angiogenesis-blocking treatment from the time of diagnosis could reduce the incidence of metastasis and, ultimately, increase patient survival."

"It is hypothesized that an antiangiogenesis strategy combining fever-range whole-body hyperthermia (FR-WBH) and metronomic chemotherapy could inhibit the development of metastatic disease with minimal toxicity. To test this theory, a low, daily dose of the topoisomerase I inhibitor irinotecan hydrochloride (CPT-11) was administered over a prolonged period of time to rats bearing the highly metastatic MTLn3 mammary adenocarcinoma primary tumor surgically excised on day 12 after implantation," described K. Sumiyoshi and coauthors, University of Texas, Houston Medical School.

"The metronomic CPT-11 was combined with long-duration, low-temperature, fever-range whole body hyperthermia (FR-WBH). This systemic hyperthermia enhances chemotherapy-induced cytotoxicity as well as immunological activity," said researchers.

"Both the group treated with FR-WBH alone and the combined FR-WBH + CPT-11 group had delayed onset and reduced incidence of axillary lymph node metastases compared to control ($p < 0.05$). Combination therapy of FR-WBH + CPT-11 resulted in a significantly greater inhibition of axillary lymph node metastasis volume compared to both control and CPT-11 alone ($p < 0.02$) at day 16," according to scientists.

"Interestingly, none of the therapies significantly affected inguinal lymph node metastases. Lung metastases were decreased by 36% at the time of death in rats treated with FR-WBH + CPT-11, by 25% in the CPT-11 alone group and by 14% in the FR-WBH alone group."

"Rats treated with FR-WBH + CPT-11 survived significantly longer (35%) than control animals ($p < 0.04$). Neither significant body weight loss nor gastrointestinal toxicity was observed in any group," Sumiyoshi and

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coauthors said.

"These data suggest that, after excision of the primary tumor, FR-WBH and metronomic CPT-11 can be safely combined to reduce distant lymph node and lung metastases and, thus, to increase survival," researchers concluded.

Sumiyoshi and colleagues published the results of their study in *International Journal of Hyperthermia* (The effect of whole-body hyperthermia combined with 'metronomic' chemotherapy on rat mammary adenocarcinoma metastases. Int J Hyperther, 2003;19(2):103-118).

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To subscribe to the *International Journal of Hyperthermia*, contact the publisher: Taylor & Francis Ltd., 4 Park Square, Milton Park, Abingdon OX14 4RN, Oxon, UK.

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