

### A Case of Primary Small Cell Carcinoma of the Liver treated by chemotherapy

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The extrapulmonary small cell carcinoma is the highly malignant and the poorly differentiated neuroendocrine tumor. Extrapulmonary small cell carcinoma is uncommon. The overall incidence is approximately 0.1-0.4 % in non-pulmonary sites. Moreover, the small cell carcinoma of the liver is extremely rare and only few cases have been reported in the literature. We experienced 65 year-old woman with a 15 cm-sized large tumor mass and localized to the left lobe of the non-cirrhotic liver. The small cell carcinoma was confirmed by pathologic diagnosis with immunohistochemical staining. Other possible primary site was excluded by radiologic and endoscopic evaluation. Finally, we could diagnose her liver mass as the primary small cell carcinoma. The patient was treated with the etoposide and cisplatin combined chemotherapy. After 5 cycles of chemotherapy, the patient had no chemotherapy-induced toxicity and sustained partial response. We report the primary small cell carcinoma of the liver that had have the partial response to the chemotherapy, which have not been reported in Korea.

**Key words:** Liver, small cell carcinoma, chemotherapy

### Postoperative LV5FU2 chemotherapy in patients with curative resected gastric cancer: interim analysis

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**Purpose :** To estimate the effect and toxicity of bimonthly low-dose leucovorin(LV) and fluorouracil(5FU) bolus plus continuous infusion(LV5FU2) postoperative chemotherapy(adjuvant) in patients with curative resected gastric cancer. **Methods :** Total 24 patients were enrolled in this study. All patients received LV 20mg/m<sup>2</sup>(bolus), 5FU 400mg/m<sup>2</sup>(bolus), 5FU 600mg/m<sup>2</sup>(24-hour continuous infusion) on day 1, 2, 15, and 16, every 4 weeks(LV5FU2). **Results :** Postoperative chemotherapy was to be initiated median 19 days after surgery. A classification of the resected gastric cancer as stage II through IV according to the 2006 staging criteria of the AJCC. Stage II was 1 patient, stage IIIA was 6 patients, stage IIIB was 5 patients and stage IV was 12 patients. Relapses were reported in 9(37.5%) of the patients : One of 6 patients relapsed in stage IIIA(16.7%), three of 5 patients relapsed in stage IIIB(60%) and five of 12 patients relapsed in stage IV(41.7%). They were all regional relapsed. The median duration of relapse free survival was 506 days(95% CI, 380.42-631.58). Three patients died. 2 patients died as a result of cancer progression and 1 patient suicided while receiving palliative chemotherapy for cancer relapse. The grade 3-4 toxicity of neutropenia is observed 4 patients(25%) and neutropenic fever is observed in 1 patient(4.2%) in LV5FU2. This study was performed 6 cycles unless intolerable toxic effect or relapse. **Conclusion :** Postoperative adjuvant chemotherapy tolerable for the patients with curative resected gastric cancer.