References


eComment: Pericardial sclerosis with cisplatin following pericardiocentesis. A simple and effective technique for the management of refractory malignant pericardial effusions

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We read with great interest the article by Apodaca-Cruz et al. concerning the effectiveness and prognosis of initial pericardiocentesis in the primary management of malignant pericardial effusions [1].

The aim of our brief comment is to highlight the advantages of pericardiocentesis followed by intrapericardial cisplatin administration in patients with neoplastic pericarditis. In our center, we favor pericardiocentesis and subsequent cisplatin instillation as the method for preventing recurrence of malignant pericardial effusion, especially in patients with lung cancer. Our results were documented during a 5-year period study [2, 3].

Pericardiocentesis followed by intrapericardial administration of cisplatin is safe and effective in preventing the re-accumulation of malignant pericardial effusion in the majority of oncology patients. In case of recurrence, the creation of a pleuropericardial window through a mini thoracotomy or a VATS procedure is the last alternative and is absolutely indicated.

References

