Management of symptomatic ascites in recurrent ovarian cancer patients using an intra-abdominal semi-permanent catheter.

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Abstract

Ascites is commonly present in women with advanced-stage ovarian cancer. No standardized protocol exists for the treatment of the patient with recurrent ovarian cancer and rapidly reaccumulating malignant ascites. Palliation of symptoms is most commonly achieved through repeated paracentesis, a procedure that potentially results in injury to intra-abdominal organs, infection, and patient discomfort. Our goal was to improve patient comfort by alleviating symptoms and reducing the need for paracentesis. The Pleurx’ catheter offers a number of potential advantages over traditional treatment modalities. Clearly, larger study numbers are required to quantify the morbidity associated with the Pleurx catheter.

Comment in


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