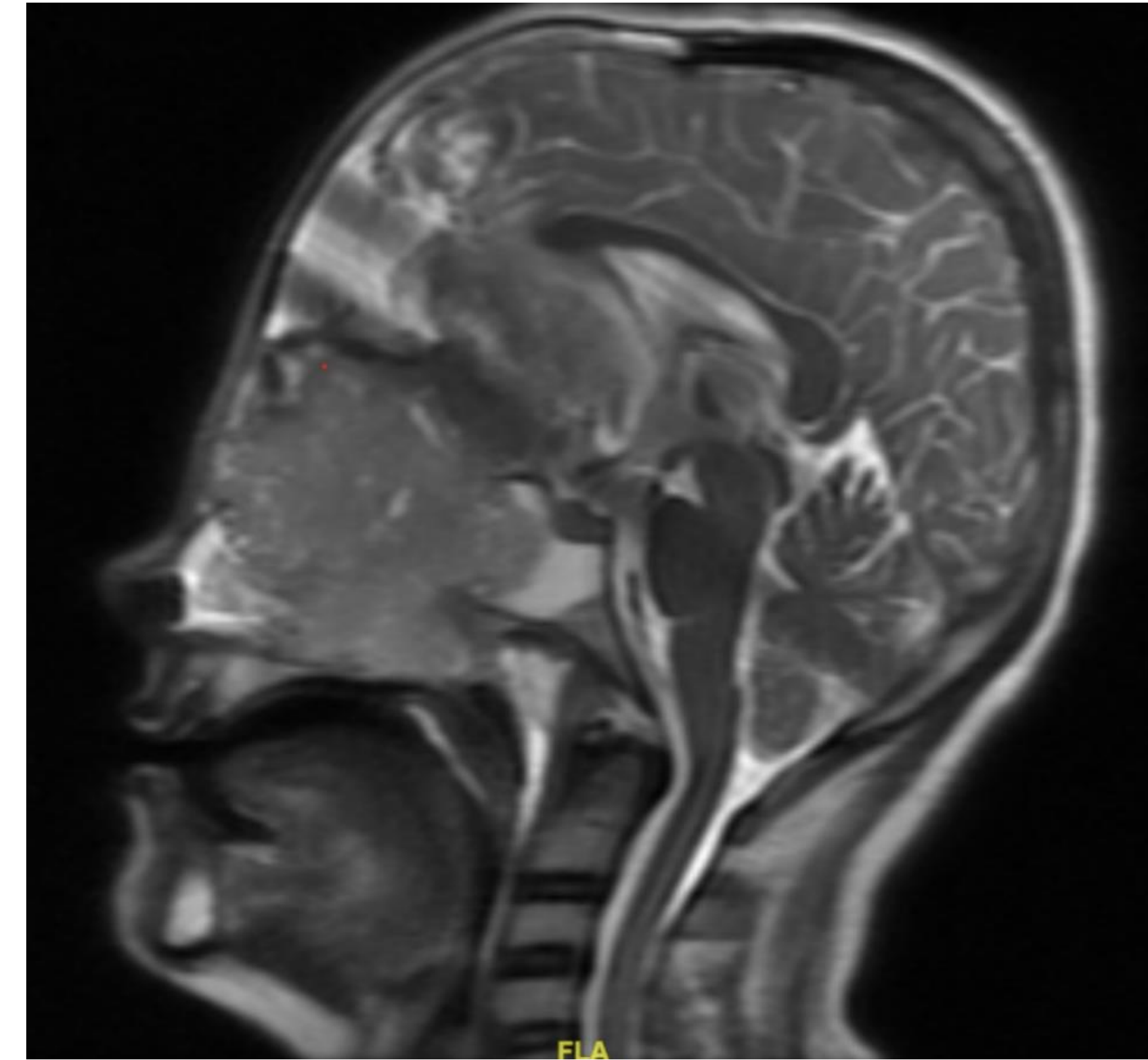


Nasopharyngeal Carcinoma in Pregnancy: Combined Therapeutic Strategies with Cranioplasty, Radiotherapy and Chemotherapy. Case Report

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Objective:

Due to the rare occurrence of nasopharyngeal carcinoma diagnosed during pregnancy, this situation presents both clinical and ethical challenges. The combination of treatments such as cranioplasty with titanium mesh, radiotherapy, and chemotherapy requires careful management to balance maternal and fetal health. This multidisciplinary therapeutic approach highlights the importance of personalized decision-making, considering the risks associated with oncological treatments in pregnant women and the preservation of both maternal and fetal life and well-being.

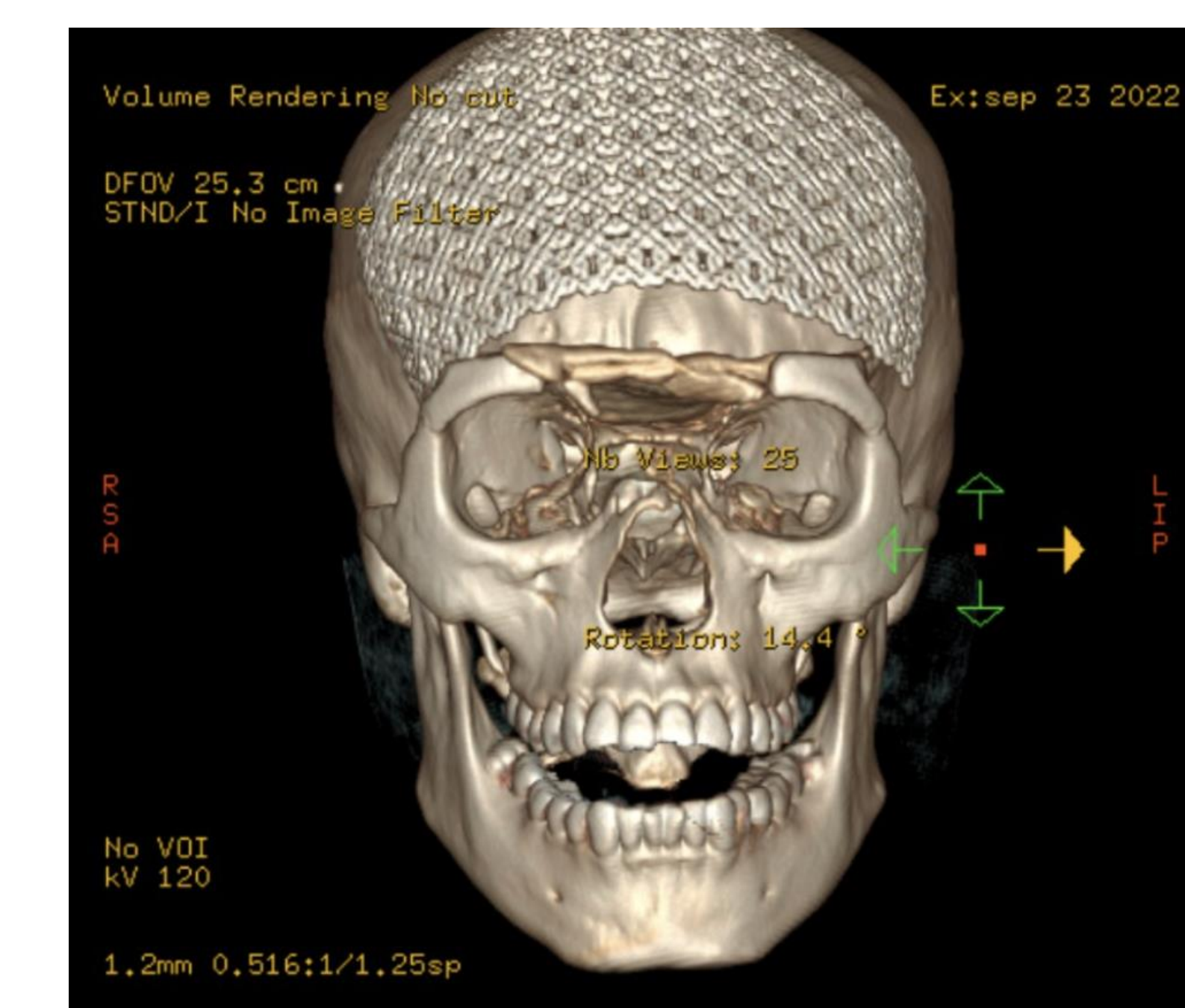
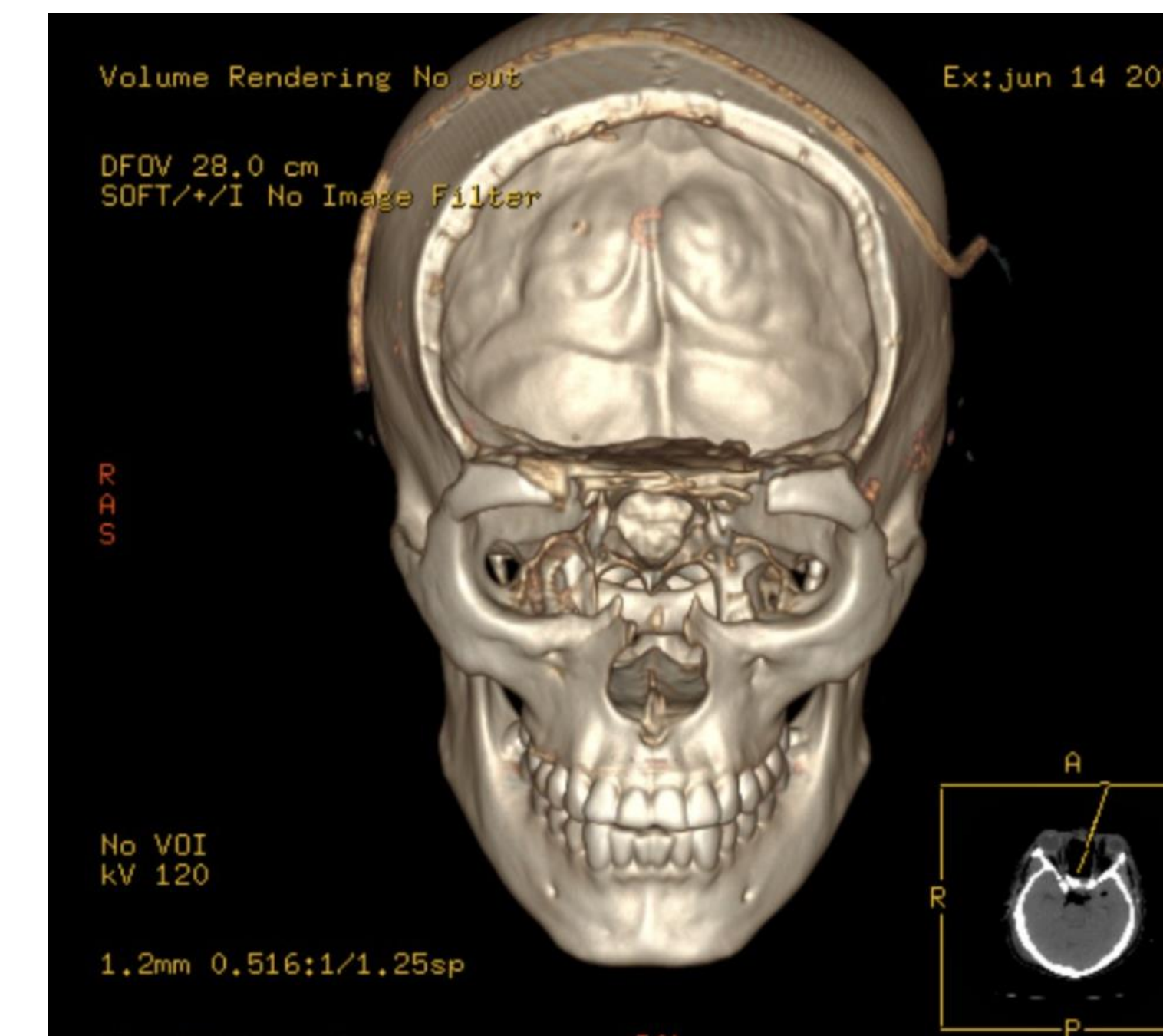


Discussion:

This case has significant implications in medical practice, particularly in the management of pregnant cancer patients, as nasopharyngeal carcinoma (NPC) represents 2% of all squamous cell carcinomas of the head and neck. Regarding diagnosis, NPC is difficult to detect at an early stage due to the scarcity of symptoms and signs. The treatment of nasopharyngeal carcinoma during pregnancy requires multidisciplinary coordination to balance oncological therapeutic options such as surgery, radiotherapy, and chemotherapy, with the potential risks to both mother and fetus. The choice of treatments such as chemotherapy and radiotherapy during pregnancy must be carefully evaluated due to the possible adverse effects on fetal development, including malformations or complications. Furthermore, the decision to terminate the pregnancy due to signs of fetal flow centralization emphasizes the importance of closely monitoring fetal health during treatment. This case underscores the need for personalized and ethical care in the context of oncology for pregnant women, considering both the patient's prognosis and fetal well-being.

Case report:

A 29-year-old female, in the third trimester of pregnancy, was diagnosed with a nasal polyp in 2021, which was treated without improvement. In 2022, she experienced symptom exacerbation, leading to a biopsy, which diagnosed sinonasal undifferentiated carcinoma. Surgery was performed with cranioplasty and titanium mesh placement, along with complete tumor resection. Subsequently, adjuvant treatment with weekly cisplatin-based chemotherapy as a radiosensitizer and radiotherapy was initiated. Due to signs of fetal flow centralization, pregnancy termination was decided to allow for further management.



Conclusions:

Nasopharyngeal carcinoma during pregnancy is rare and presents significant management challenges. If the patient's condition worsens, preterm delivery may be considered to facilitate treatment. In resource-limited regions, patients seek care at advanced stages due to limited access to specialized centers. It is crucial for physicians to recognize the possibility of this carcinoma and refer patients for early diagnosis and appropriate management at tertiary hospitals. Additionally, advancing gestational age may exacerbate the symptoms of the carcinoma.



Reference



Contact