

Photodynamic therapy (PDT) of cervical intraepithelial neoplasia

Ivanna Mayboroda, MD

Medical faculty University of Geneva, Switzerland

Attila Major, MD, PhD, PD

Research project proposal developed as fulfillment Postgraduate
Training course on Reproductive Health of GFMER/WHO

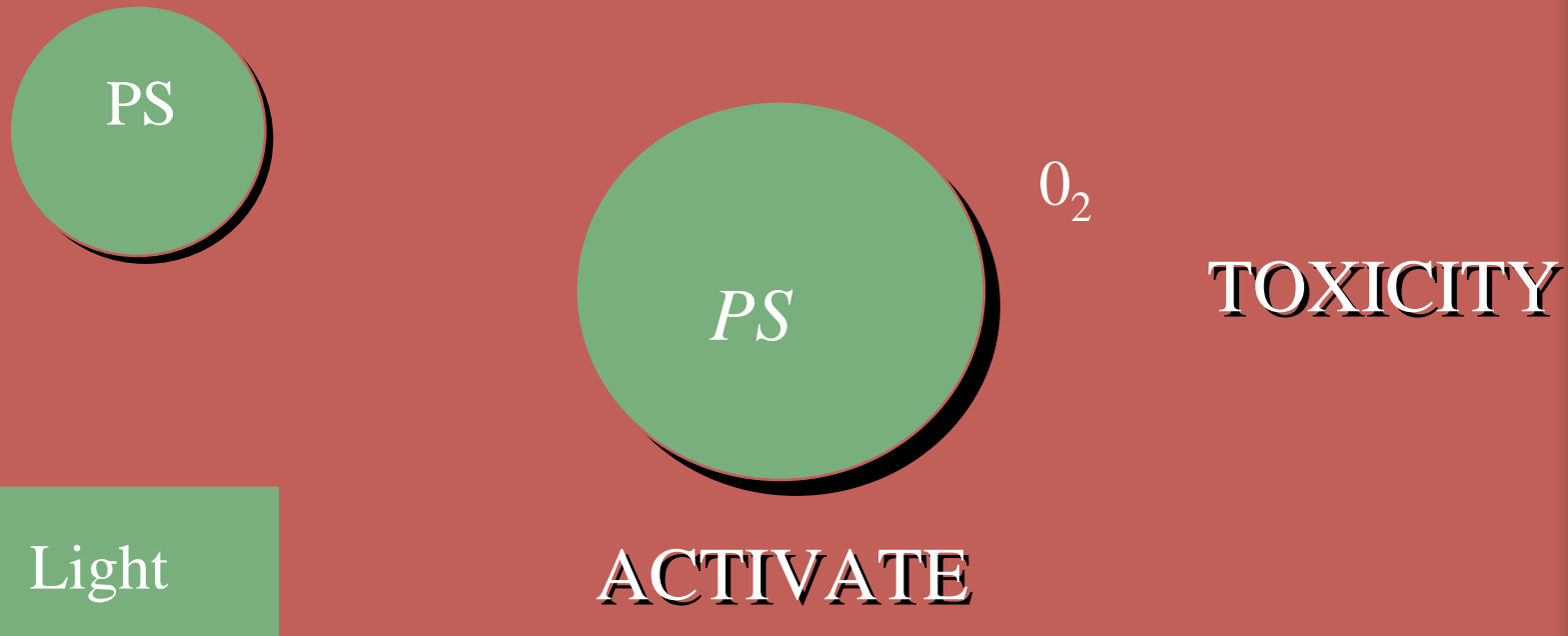
2006



**Photodynamic therapy of
cervical intraepithelial
neoplasia:
Is it past, reality or future?**

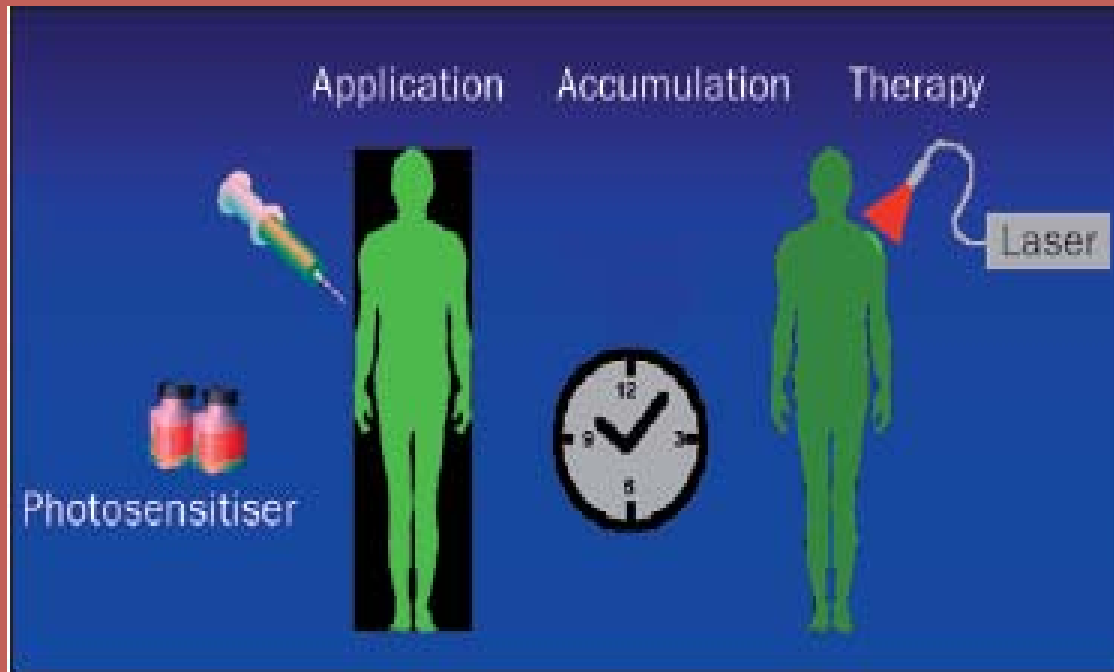


PHOTODYNAMIC THERAPY



Use of a photo-sensensitizer (PS) to aid in the diagnosis (fluorescence) or treatment of cancer cell (radical oxygen)

PHOTODYNAMIC THERAPY



Photosensitizers

■ Porphyrins

- Photofrin (PF) - intravenous
- "Aminolevulinic acid (ALA)" - local
Protoporphyrin IX (PpIX)

■ Chlorins

- m-Tetrahydroxyphenyl chlorin (mTHPC)
- Benzoporphyrin derivative mono-acid (BPD)
- Tin ethyl etiopurpurin (SnET2)

■ Phtalocyanines



Material and methods

- Medline was searched
- 9 studies was :
 1. 2 studies local application with (ALA) drug light interval 1,5h-5h
1 study local application with (ALA) drug light interval 1,5h-5h, a randomised, double-blind, placebo-controlled trial
 2. 2 studies local application with (ALA) drug light interval 8h-24h
1 study local application with (DHE) drug light interval 8h-24h
 3. 3 studies intravenous application (PF)
- In all studies was include non pregnant women with age 18-62yrs
- 6 studies looked HPV destruction



Results

	Cure rate % (number of patients)	HPV eradication
Local application Drug light interval 1,5h-5h (3 studies)	16% (51)	
Local application Drug light interval 8h-24h (3 studies)	91% (31) (ALA) 68% (22) (DHE) 83% (53) (total)	73-80%
Intravenous application (3 studies)	92% (192) (Photofrin)	72-80%



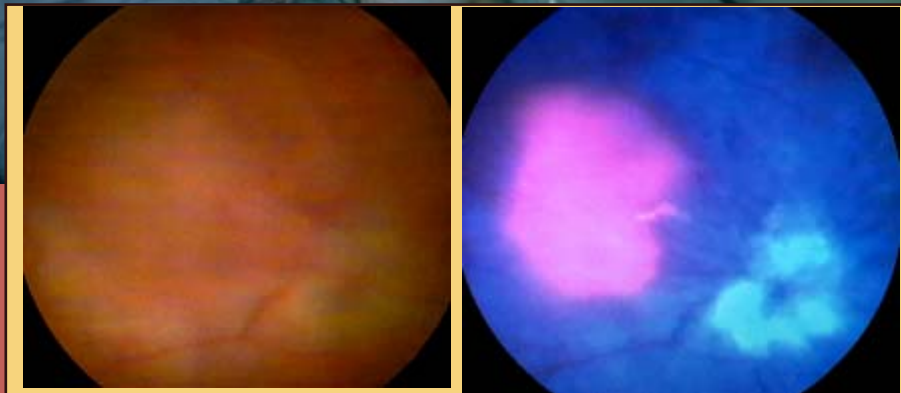
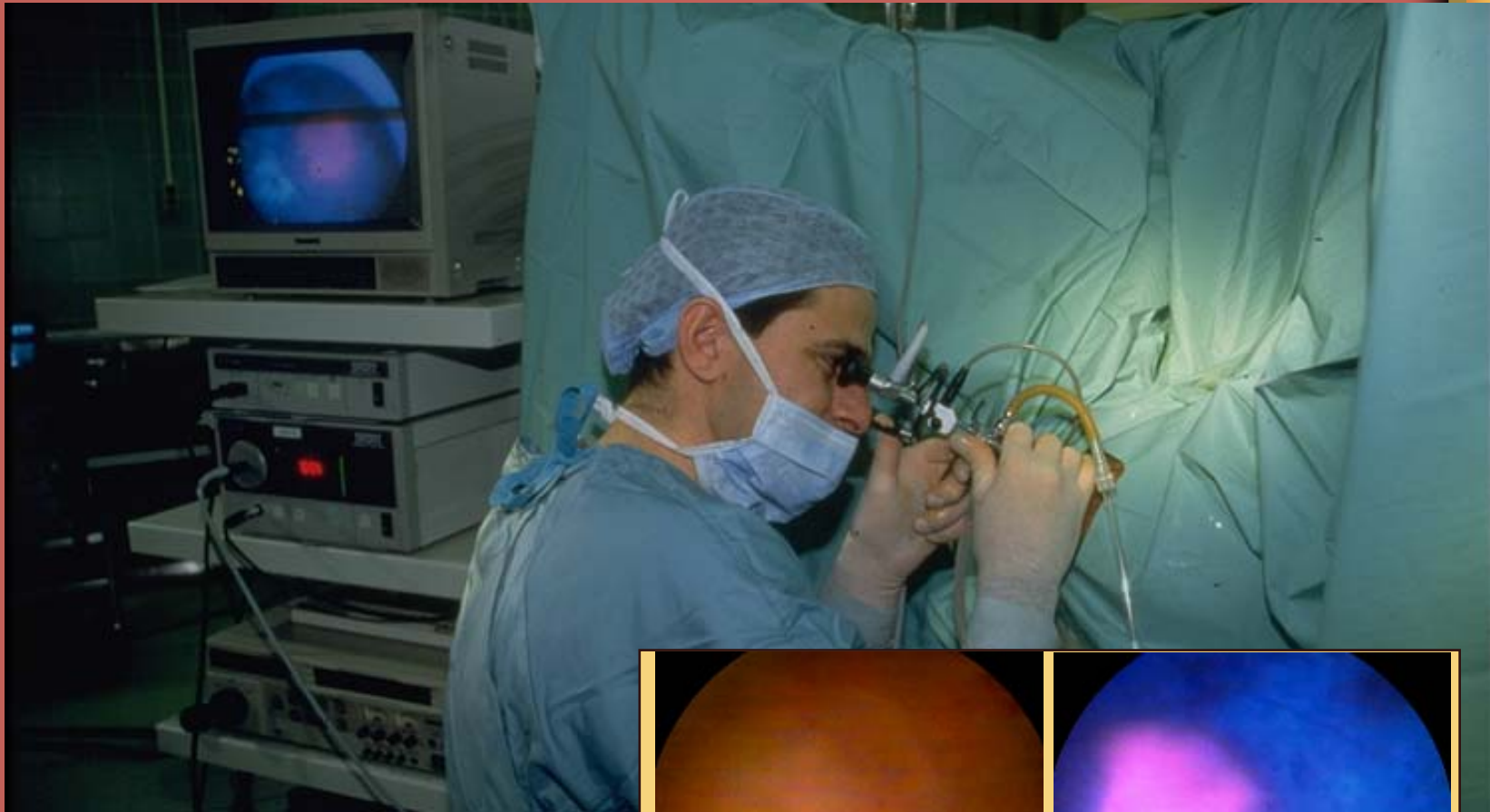
Conclusion

- High cure rate (83%) was observed with local drug application – illumination time interval in studies with more than 8h
- ALA (91%) was more effective than DHE (68%)
- High cure rate (92%) with Intravenous application of Photofrin was observed in all 3 studies.
- Local and iv sensitizer application are very good for specific HPV eradication (75%)

- No side effects (skin phototoxicity) with local application
- Further larger, well designed studies are needed with local application and longer time interval



P HOTODETECTION

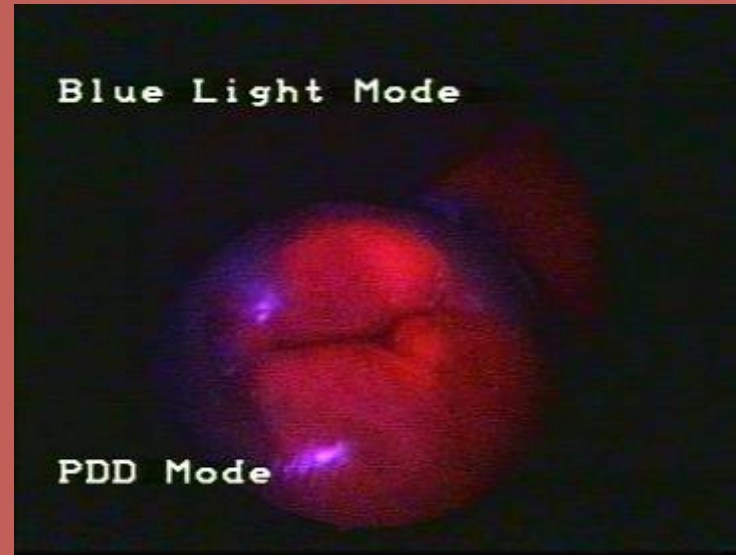


Fluorescence image of the cervix after h-ALA application

White light



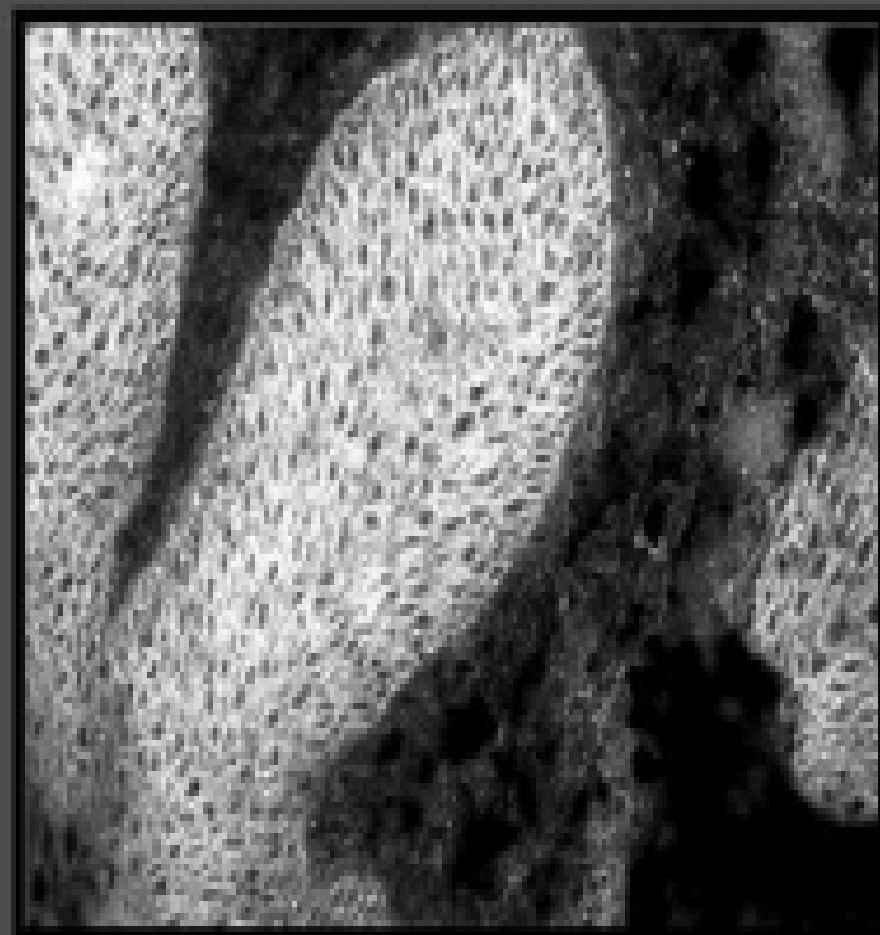
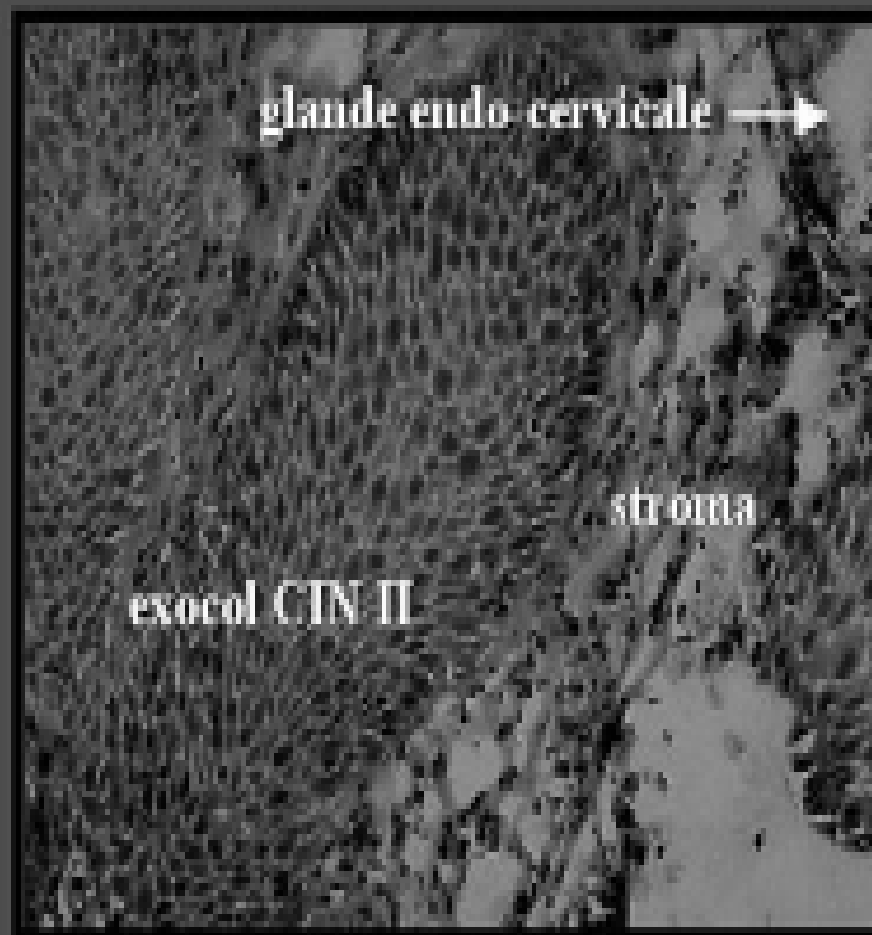
Fluorescence

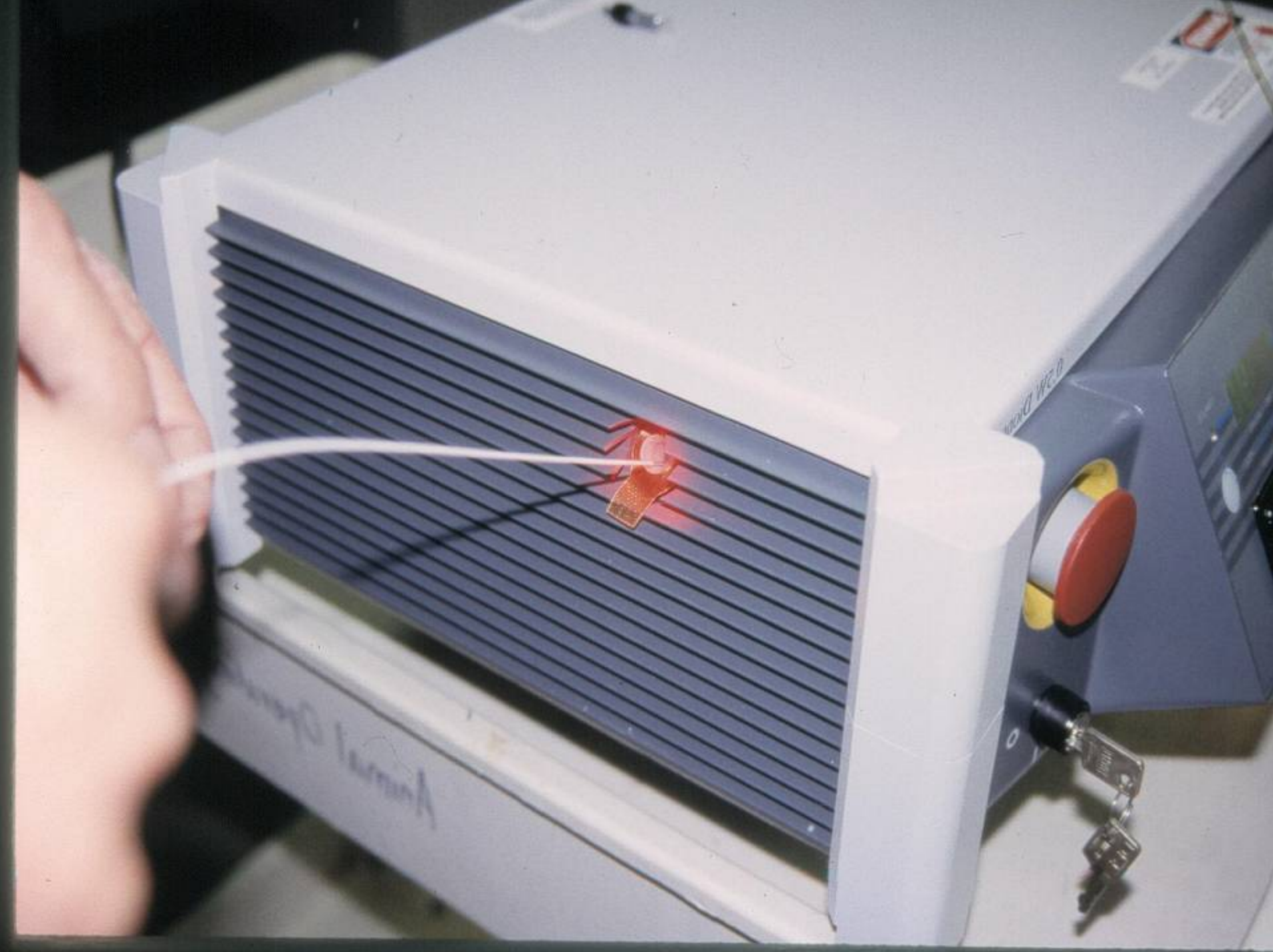


Fluorescence image and white light image of the cervix uteri after the application of 5% acetic acid.

Application of 10mg HAL in 10ml 0.9% NaCl solution on the cervix during 3 hrs.

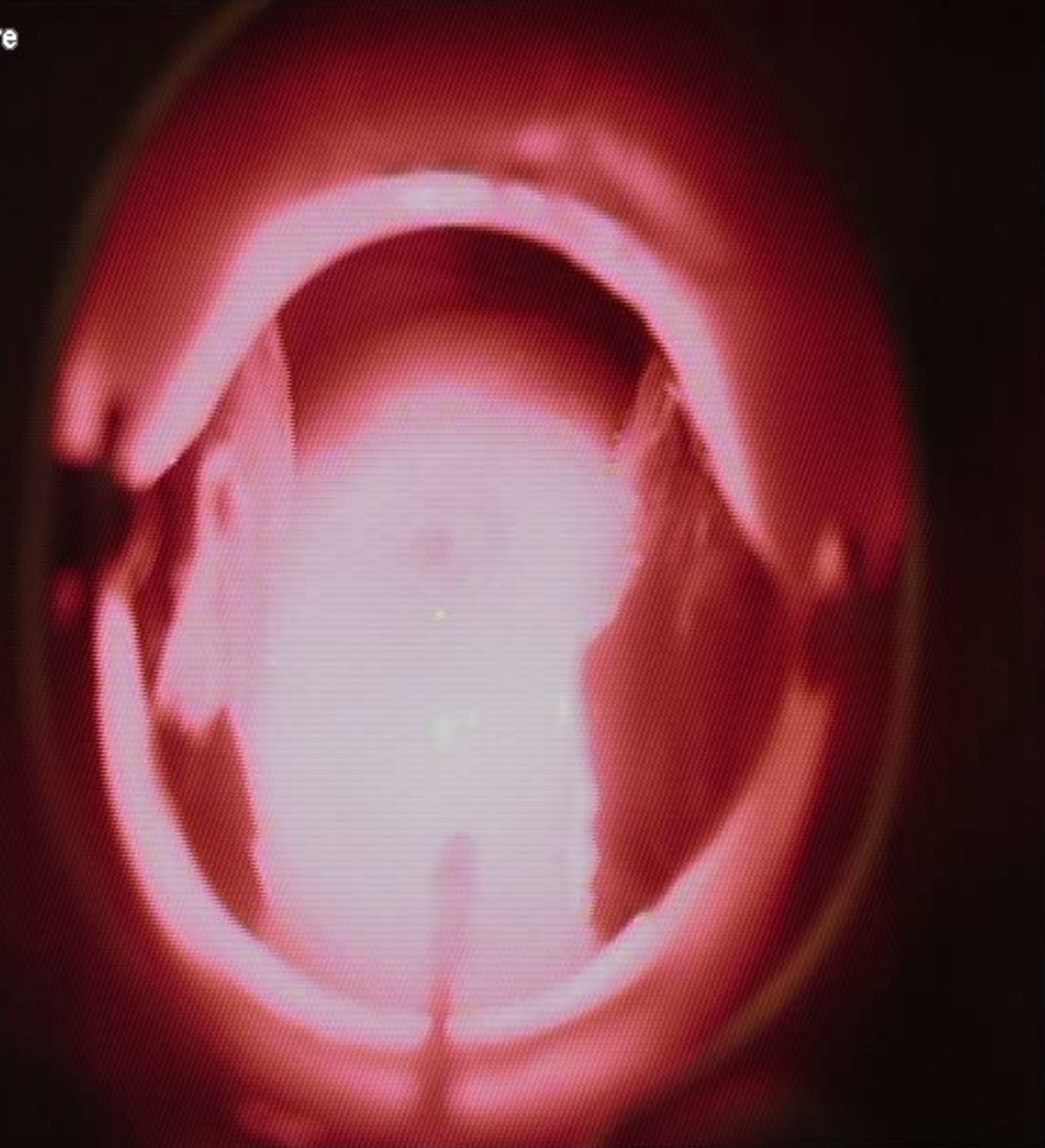
CIN II x20, HAL 0,5%, 180 min application















Advantages to treat CIN with PDT

- Outpatient clinic
- Specificity (drug, light)
- Tailored to the shape of the cervix
- No stromal destruction (stenosis, cervix insufficiency)
- Cell death by apoptosis (no inflammation, no scarring)
- Specific HPV destruction (tetrapyrrol)
- Repeatable

- In young women with open fertility planning



PDT may become also reality in developing countries because:

- Sensitizer (Hypericin) from St. Johns Wort (cultivated in own garden like ancient Chinese and Egyptian, for skin cancer treatment)
- Light applicator (LED)
Can be developed (with batteries)





St. Johns Wort



Merci



Haem Biosynthesis

