Diffuse Malignant Pleural Mesothelioma: Part I. An Overview of Diagnosis, Staging, and Treatment Options

Carol Brueggen, RN, MS, APRN-BC, AOCN®, and Mary Ellen Cordes, RN, MS, APRN-BC

Diffuse malignant mesothelioma is an uncommon, aggressive malignancy that occurs most often in the pleura of the lung. This article reviews the risk factors, incidence, signs, symptoms, diagnosis, staging, treatment options, and follow-up care of diffuse malignant pleural mesothelioma (DMPM). Curative approaches for treating DMPM are limited, and survival rates rarely exceed two years. Treatments such as surgery, chemotherapy, and radiotherapy have shown limited benefit in improving survival. Extrapleural pneumonectomy combined with multimodal treatments provides a potentially curative approach, and newer efforts in multimodality therapy are promising. Clinical trials utilizing intrapleural chemotherapies, photodynamic, gene, and immunotherapies currently are under way.

Key Words: mesothelioma; carcinogens, asbestos; pulmonary surgical procedures; combined modality treatment

Diffuse malignant mesothelioma is an uncommon, aggressive malignancy that occurs most often in the pleura of the lung. This article reviews the risk factors, incidence, signs, symptoms, diagnosis, staging, treatment options, and follow-up care of diffuse malignant pleural mesothelioma (DMPM). Curative approaches for treating DMPM are limited, and survival rates rarely exceed two years. Treatments such as surgery, chemotherapy, and radiotherapy have shown limited benefit in improving survival. Extrapleural pneumonectomy combined with multimodal treatments provides a potentially curative approach, and newer efforts in multimodality therapy are promising. Clinical trials utilizing intrapleural chemotherapies, photodynamic, gene, and immunotherapies currently are under way.

Key Words: mesothelioma; carcinogens, asbestos; pulmonary surgical procedures; combined modality treatment

Submitted December 2002. Accepted for publication January 27, 2003. (Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Clinical Journal of Oncology Nursing or the Oncology Nursing Society.) (Note. Part II, Symptom Management, will appear in Issue Number 5 (September/October) of the Clinical Journal of Oncology Nursing.)

Digital Object Identifier: 10.1188/03.CJON.431-437

Diffuse malignant mesothelioma is an uncommon, aggressive malignancy that occurs most often in the pleura of the lung. This article reviews the risk factors, incidence, signs, symptoms, diagnosis, staging, treatment options, and follow-up care of diffuse malignant pleural mesothelioma (DMPM). Curative approaches for treating DMPM are limited, and survival rates rarely exceed two years. Treatments such as surgery, chemotherapy, and radiotherapy have shown limited benefit in improving survival. Extrapleural pneumonectomy combined with multimodal treatments provides a potentially curative approach, and newer efforts in multimodality therapy are promising. Clinical trials utilizing intrapleural chemotherapies, photodynamic, gene, and immunotherapies currently are under way.

Key Words: mesothelioma; carcinogens, asbestos; pulmonary surgical procedures; combined modality treatment

Submitted December 2002. Accepted for publication January 27, 2003. (Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Clinical Journal of Oncology Nursing or the Oncology Nursing Society.) (Note. Part II, Symptom Management, will appear in Issue Number 5 (September/October) of the Clinical Journal of Oncology Nursing.)

Digital Object Identifier: 10.1188/03.CJON.431-437

Diffuse malignant mesothelioma is an uncommon, aggressive malignancy that occurs most often in the pleura of the lung. This article reviews the risk factors, incidence, signs, symptoms, diagnosis, staging, treatment options, and follow-up care of diffuse malignant pleural mesothelioma (DMPM). Curative approaches for treating DMPM are limited, and survival rates rarely exceed two years. Treatments such as surgery, chemotherapy, and radiotherapy have shown limited benefit in improving survival. Extrapleural pneumonectomy combined with multimodal treatments provides a potentially curative approach, and newer efforts in multimodality therapy are promising. Clinical trials utilizing intrapleural chemotherapies, photodynamic, gene, and immunotherapies currently are under way.

Key Words: mesothelioma; carcinogens, asbestos; pulmonary surgical procedures; combined modality treatment

Submitted December 2002. Accepted for publication January 27, 2003. (Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Clinical Journal of Oncology Nursing or the Oncology Nursing Society.) (Note. Part II, Symptom Management, will appear in Issue Number 5 (September/October) of the Clinical Journal of Oncology Nursing.)

Digital Object Identifier: 10.1188/03.CJON.431-437

Diffuse malignant mesothelioma is an uncommon, aggressive malignancy that occurs most often in the pleura of the lung. This article reviews the risk factors, incidence, signs, symptoms, diagnosis, staging, treatment options, and follow-up care of diffuse malignant pleural mesothelioma (DMPM). Curative approaches for treating DMPM are limited, and survival rates rarely exceed two years. Treatments such as surgery, chemotherapy, and radiotherapy have shown limited benefit in improving survival. Extrapleural pneumonectomy combined with multimodal treatments provides a potentially curative approach, and newer efforts in multimodality therapy are promising. Clinical trials utilizing intrapleural chemotherapies, photodynamic, gene, and immunotherapies currently are under way.

Key Words: mesothelioma; carcinogens, asbestos; pulmonary surgical procedures; combined modality treatment

Submitted December 2002. Accepted for publication January 27, 2003. (Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Clinical Journal of Oncology Nursing or the Oncology Nursing Society.) (Note. Part II, Symptom Management, will appear in Issue Number 5 (September/October) of the Clinical Journal of Oncology Nursing.)

Digital Object Identifier: 10.1188/03.CJON.431-437