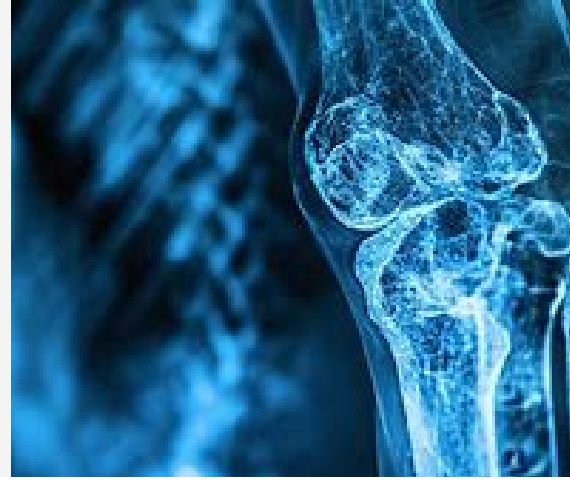


Bone Cancer



Quick Read

Bone Cancer Case Report Summary

- **Patient:** Male, 34 years old.
- **Diagnosis:** Recurrent and metastatic giant cell tumor of the right ulna with lung metastases.
- **Prior Treatments (2007–2011):**
 - Two surgeries and allogeneic bone grafting.
 - Three rounds of radioactive seed implantation (125I).
 - Despite aggressive treatment, cancer kept recurring and spreading.
- **Shift to Cell Therapy (2011):** Initiated **allogeneic CIK (Cytokine-Induced Killer) cell immunotherapy** after conventional options failed.

Outcomes

- **Symptom relief:** Pain resolved, cough minimized.
- **Disease control:** Long-term stabilization of disease; no further progression.
- **Quality of life:** Returned to normal life, married, became a father, and maintained regular work.
- **Durability:** Achieved remission and stability for **6+ years**.

Key Benefits of Allogeneic Cell Therapy

- ✓ **Alternative when clinical options are exhausted** – Provided hope when surgery and radiotherapy failed.
- ✓ **Higher efficacy with allogeneic cells** – Healthy donor-derived immune cells proved more effective than compromised patient cells.
- ✓ **Non-invasive treatment** – Simple infusion, avoiding additional surgical trauma.
- ✓ **Improved quality of life** – Restored strength, relieved pain, and enabled normal work, marriage, and fatherhood.
- ✓ **Durable cancer control** – Achieved long-term remission and stopped further disease progression.

Case Report: Long-Term Disease Control and Quality of Life Restoration in Recurrent, Metastatic Cell Tumor of Bone with CIK Cell Therapy

Patient Information

- Gender: Male
- Age: 34 years (at time of initial diagnosis in 2007)

Diagnosis: Recurrent and metastatic cell tumor of the right ulna with pulmonary metastases.

Clinical History and Prior Treatments (2007–2011)

- June 2007: Underwent initial resection of a giant cell tumor of the right ulna.
- December 2009: Local recurrence. Underwent a second surgery with allogeneic bone grafting. Received concomitant traditional Chinese medicine.
- December 2010: Local recurrence accompanied by multiple metastases to both lungs. Underwent first course of 125I radioactive seed implantation therapy for both the ulnar recurrence and pulmonary metastases.
- March 2011: Underwent a second course of 125I seed implantation for the same sites.
- July 2011: PET/CT showed progression with enlargement of both the ulnar lesion and pulmonary masses. Underwent a *third* course of 125I seed implantation.
- October 2011: PET/CT (follow-up) revealed new lesions at the aforementioned sites, indicating continued disease progression despite aggressive local interventions.

Treatment Failure and Shift to CIK immunotherapy

- Summary (2007–2011): Over four years, the patient underwent two surgeries and three separate courses of radioactive seed implantation, yet experienced multiple recurrences and progression of metastatic disease.
- October 2011: Initiated allogeneic CIK immune cell therapy.

Outcomes Following CIK Cell Therapy

- Symptomatic Control: Over the subsequent three years, pain in the right limb resolved and respiratory symptoms (cough) were minimal.
- Disease Status: The disease was reported as being well-controlled.
- Quality of Life: The patient achieved significant personal milestones, including marriage and fatherhood, and returned to normal work and daily life.

Conclusion

This patient with an aggressive, recurrent, and metastatic giant cell tumor of bone, which progressed relentlessly despite multiple surgeries and repeated courses of high-precision radiotherapy (125I seed implantation), achieved long-term disease stabilization and an excellent quality of life following treatment with CIK cell therapy. This case suggests that CIK immunotherapy may represent a valuable systemic therapeutic option for controlling advanced

and treatment-refractory giant cell tumor of bone, potentially halting disease progression and enabling patients to resume a normal life.



May 2017 : Remission 6th Year