Yu-Tsai Lin, J Otol Rhinol 2018, Volume 7
DOI: 10.4172/2324-8785-C3-014

Endoscopic nasopharyngectomy for recurrent nasopharyngeal carcinoma: Experience of Kaohsiung Chang Gung Memorial Hospital in Taiwan

Yu-Tsai Lin
Kaohsiung Chang Gung Memorial Hospital, Taiwan

Nasopharyngeal carcinoma (NPC) is a unique disease that only happens in some areas of the world such as southeast China, North Africa, and Southeast Asia. For example in Southeast Asia, the incidence rate are as high as 20 to 30 per 100,000 in male populations and 8 to 15 cases per 100,000 in female populations, respectively. The diseases is especially common among Chinese people, with the age of onset trending towards being earlier than for other tumors; accordingly, most patients fall within the range of 30-50 years. Genetic predisposition, Epstein-Barr virus infection, dietary, and environmental factors are all believed to play an important role in the development of NPC. Radiotherapy is the mainstay of treatment; combined with chemotherapy, the 5-year survival rate is approximately 50~60%. Concurrently, as effective therapeutic methods, radiochemotherapy is used for advance stage treatment whereas only radiotherapy is used for early stage treatment, but the recurrence rate is still nearly 10%. For recurrent nasopharyngeal carcinoma, revised radiotherapy is controversial due to severe complications and poor outcomes. Salvage nasopharyngectomy plays an important role in operable NPC patients, but it is still a challenge operationally because of the complexity of anatomy in the area, as the carotid artery and many cranial nerves are nearby. Salvage nasopharyngectomy included external approaches such as superior trans-skull base approach, lateral infratemporal fossa approach, and current approaches such as trans-maxillary swing, endoscopic nasopharyngectomy, and the robotic assisted trans-palatal approach.

Recent Publications

1. Lin Y T et al. (2017) Capsaicin induces autophagy and apoptosis in human nasopharyngeal carcinoma cells by downregulating the PI3K/AKT/mTOR pathway. Int. J. Mol. Sci. 18(7).pii:E1343.
2. Lin Y T et al. (2017) Induction of mitotic delay in pharyngeal and nasopharyngeal carcinoma cells using an aqueous extract of *Ajuga bracteosa*. Int. J. Med. Sci. 14(5):462-469.
3. Chen I C et al. (2016) Nasal airflow measured by rhinomanometry correlates with FeNO in children with asthma. PLoS ONE. 11(10):e0165440.
4. Lin Y T et al. (2015) Triple-positive pathological findings in oral cavity cancer are related to a dismal prognosis. Laryngoscope. 125(9):E300-5.
5. Lin Y T et al. (2012) Clinical significance of erythropoietin receptor expression in oral squamous cell carcinoma. BMC Cancer. 12(1):194-200.

Biography

Yu-Tsai Lin department of Otolaryngology graduated from Taipei Medical University, Taiwan. He finished his ENT Residency training at Kaohsiung's Chang Gung Memorial Hospital and then became a Member of the Faculty. Currently, he is an Assistant Professor and performs many head and neck operations in his department. He was a Visiting Scholar and joined a Skull Base Surgery Team at the University of Pittsburgh Medical Center from 2012 to 2013 for the purpose of studying transnasal endoscopic skull base surgery. After returning to Taiwan, he has successfully completed over 100 endoscopic skull base surgeries in the last four years.

xeye@cgmh.org.tw