

## **One session of argon plasma coagulation heals radiation proctitis**

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By Victoria Stern

NEW YORK (Reuters Health) - Chronic hemorrhagic radiation proctitis can be effectively treated with a single session of extensive argon plasma coagulation (APC), with a low risk of long-term complications, according to a study published online May 21 in *Gastrointestinal Endoscopy*.

APC, which has a success rate of 80% to 100%, is usually not applied to the entire affected area in one treatment. But Dr. William Sievert from Monash Medical Center in Australia and colleagues treated 50 patients with a single session of large-volume APC. They were able to improve bleeding scores in all 50 patients ( $P < 0.001$ ). Only 16 needed a second session, and only 2 needed a third.

The average number of treatments was 1.36, with a mean follow-up of 20.6 months. Most of the patients were prostate cancer survivors, but the cohort also included a few women who'd been treated for gynecological cancers. The mean age was 72 years.

Overall, 36 patients (72%) had complete resolution of bleeding, 13 patients (26%) had minor intermittent bleeding that did not require further therapy and one patient continued to have minor daily bleeding.

But while using a single session of large-volume APC may lower the number of treatments, the benefit can be offset by an increased number of short-term complications, Dr. Sievert noted in e-mail to Reuters Health. Seventeen patients (34%) reported short-term complications, including proctalgia, rectal mucous discharge, incontinence, fever, and bleeding. All of these symptoms resolved spontaneously within 6 weeks.

One patient developed an asymptomatic rectal stricture, but the long-term complication rate was no higher than in previous studies.

Despite the short-term complications, "we think that APC should be the first line standard therapy" for chronic radiation proctitis, said Dr. Sievert. "APC is superior to other modalities, such as formalin, and is even effective in patients who have failed other therapies."

<http://www.giejournal.org/article/S0016-5107%2810%2900138-0/abstract#back-cor1>

[Gastrointest Endosc](#) 2010.