Kidney Tumors Can’t Stand the Heat: New Radio Frequency Ablation Vaporizes Inoperable Tumors

Radio Frequency Ablation Offers a New Minimally Invasive Approach to Abolishing Kidney Tumors, Often Within 15 Minutes

LOS ANGELES (June 22, 2007) — Hollywood talent manager Louis Bershad, 68, whose clients include many top actors in town, recently underwent a routine MRI for kidney stones only to learn from his urologist that he also had a tumor in his left kidney. The tumor turned out to be malignant.

Facing a new diagnosis of kidney cancer, Bershad recalls, “The room seemed to go black, then I could only envision a long treatment journey that would likely require open surgery, and intensive chemotherapy, both of which can have complications and result in a lot of missed time from work.”

Bershad’s physician discussed treatment options with him, and based on a number of factors, including his general health, the extent and location of his tumor, and the stage of the cancer, he recommended a new, non-surgical procedure called radio-frequency ablation (RFA). “I considered my options carefully – and the choice was clear, says Bershad, I didn’t want to go through an operation or the loss of my kidney.”

When Bershad met Peter J. Julien M.D., chief of Thoracic Imaging and director of the Radiofrequency Ablation Program at Cedars-Sinai Medical Center’s S. Mark Taper Foundation Imaging Center, the cloud lifted. Julien, an interventional radiologist, is one of the pioneers of RFA, a high-tech procedure that kills a tumor by heating it up to 140 degrees Fahrenheit. The procedure requires only local anesthesia and avoids the scars and complications associated with traditional open surgery. Because RFA involves no cutting, it is also a viable option for individuals previously thought to be too old or sick to withstand surgery.

During RFA, an interventional radiologist carefully guides an ablation needle into the center of the tumor using imaging techniques such as ultrasound or CT scan. The probe is connected to a radio-frequency generator that delivers alternating electrical current (radio-frequency energy) to the tumor producing heat up to 140 degrees Fahrenheit. This causes cancerous cells to shrink and die, but healthy tissue is spared because the probe cools as it is removed. “My doctor asked me to come back for an MRI in three months, so that he could make sure the tumors were gone,” says Bershad.

Bershad was diagnosed with stage II renal cell carcinoma. In adults, the most common type of kidney cancer is renal cell carcinoma (renal adenocarcinoma), which begins in the cells that line the small tubes within your kidney. According to the Kidney Cancer Association, renal cell carcinoma affects more than 32,000 people per year and the exact cause of the disease is unknown. It is most common in people between 50 and 70 years of age, and affects men more often than women.
Typically, surgical removal of kidney tumors, which has been the standard of care for kidney cancers, results in hospital admissions of 7 to 10 days and postoperative recovery time of 6 to 8 weeks. By comparison, RFA is not only minimally invasive with a short recovery time, but it also allows for the kidney to be preserved. RFA also avoids postoperative complications such as pain, pneumonia, injury to the organs and scars. Although the findings are preliminary, the procedure appears to be groundbreaking as it is resulting in survival rates similar to those of radical or partial nephrectomy (removal of the kidney), the standard of care for treatment of kidney tumors.

“RFA has emerged as an alternative treatment for inoperable liver cancer, and has been shown to vaporize tumors as well as slow cancer progression in larger tumors,” said Julien who explains that preliminary results are promising. “It is possible that this procedure may completely replace surgery in the future for kidney cancers in many patients,” says Julien.

Bershad, who underwent the procedure at Cedars-Sinai Medical Center six months ago, said that he returned to work and resumed his daily activities only one day after the procedure. Today, he remains cancer free.

Looking back, he expresses relief that the cancer was in an accessible place and caught in time. He says, with a sparkle in his eye, “I feel very lucky. My lifestyle remains untouched: I’m active and I work, swim and play with my Dobermans as if it never happened. If you have a cold, you lose more time than this.”

“Thanks to Dr. Julien, the RFA procedure worked out brilliantly, Bershad concludes, “I want people to know that this procedure is available, effective and painless.”

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