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Commentary

The article by Rafferty et al. explores a new modality of treatment for paragangliomas. The use of somatostatin or somatostatin analogues may provide an additional therapeutic option for patients with these tumors. This option would be especially useful in patients similar to those reported by the authors who had unresectable or incompletely resected tumors or for patients who decline or cannot undergo surgery. Although only a few cases have been reported where this treatment modality has been used, the results have been encouraging. Larger controlled series of patients are needed to confirm the efficacy of this treatment, to determine if the results can be maintained over time, and to identify any side effects from long-term use of somatostatin analogues. In addition, its use as an adjuvant therapy with radiation or surgery must be investigated. The use of somatostatin for the treatment of paragangliomas, although still experimental, demonstrates the results that can be achieved from the application of basic scientific research to clinical problems.

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