

Electrochemotherapy as a Safe and Effective Therapeutic Approach Clinical Outcomes Patient Benefits and Future Opportunities

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DESCRIPTION

Increasing recognition as a valuable local treatment option in oncology, supported by a growing body of clinical evidence. The technique combines the administration of chemotherapeutic drugs with the application of controlled electric pulses that temporarily increase cell membrane permeability. This enhanced permeability allows anticancer agents to enter tumor cells more efficiently, leading to improved cytotoxic effects while minimizing systemic toxicity. Over the past two decades, electrochemotherapy has been evaluated in numerous clinical studies, demonstrating its effectiveness and safety in the management of various malignant tumors, particularly those affecting the skin and superficial tissues.

Clinical evidence strongly supports the efficacy of electrochemotherapy in treating cutaneous and subcutaneous tumors of different histological origins. High objective response rates have been reported in patients with melanoma, breast cancer metastases, head and neck tumors and soft tissue sarcomas. Many studies have documented significant tumor regression, with complete responses observed in a substantial proportion of treated lesions. Importantly, electrochemotherapy has shown effectiveness in tumors that are resistant to conventional treatments such as chemotherapy or radiotherapy. This makes it a valuable option for patients with recurrent or advanced disease who have limited therapeutic alternatives.

Safety and tolerability are among the most compelling advantages demonstrated by clinical experience with electrochemotherapy. Because the technique enhances local drug uptake, lower systemic doses of chemotherapeutic agents are required, reducing the risk of widespread adverse effects. Most reported side effects are mild and transient, including localized pain, swelling and temporary muscle contractions during pulse delivery. Severe complications are rare and cosmetic outcomes are generally favorable, particularly in comparison to surgical excision or radiation therapy. These characteristics make electrochemotherapy especially suitable for palliative care, where symptom control and quality of life are primary treatment goals.

Beyond superficial tumors, emerging clinical evidence suggests that electrochemotherapy may be effective in the treatment of deep-seated and visceral tumors. Advancements in electrode technology and image-guided delivery have enabled the safe application of electric pulses to tumors located in organs such as the liver, pancreas and bone. Early-phase clinical trials have reported promising results, including tumor size reduction and disease stabilization, with acceptable safety profiles. Although these applications remain under investigation, they represent an important expansion of the clinical scope of electrochemotherapy.

The future perspectives of electrochemotherapy are closely linked to ongoing technological and biological innovations. One promising direction is the integration of electrochemotherapy with immunotherapy. Preclinical and early clinical studies suggest that tumor cell destruction induced by electroporation may stimulate immune responses by releasing tumor antigens. This immunogenic effect could potentially enhance the efficacy of immune checkpoint inhibitors and other immunomodulatory treatments. Such combinations may transform electrochemotherapy from a purely local intervention into a component of systemic cancer control.

Personalized treatment strategies are also expected to shape the future of electrochemotherapy. Advances in imaging, computational modeling and artificial intelligence are improving the ability to tailor electric field distribution and drug dosing to individual tumor characteristics. These tools can help optimize treatment planning, predict therapeutic response and minimize damage to surrounding healthy tissues. As precision medicine continues to evolve, electrochemotherapy protocols are likely to become increasingly patient-specific, improving both effectiveness and safety.

Despite its promising clinical evidence, broader adoption of electrochemotherapy faces certain challenges. Standardization of protocols, wider clinician training and long-term outcome data are needed to strengthen confidence in the technique. Large-scale randomized clinical trials comparing electrochemotherapy with established treatment modalities will be essential to define

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its role within standard oncology guidelines. Additionally, ensuring access to specialized equipment and expertise remains a practical consideration in many healthcare systems.

CONCLUSION

In conclusion, clinical evidence clearly demonstrates that electrochemotherapy is a safe, effective and versatile treatment for a range of cancers, particularly in cases where conventional

therapies are limited or unsuccessful. With continued research, technological advancements and integration into multimodal treatment strategies, electrochemotherapy holds significant promise for the future of cancer care. Its potential to improve local tumor control, enhance quality of life and contribute to personalized oncology positions it as an increasingly important tool in modern cancer treatment.