Claims

1. Use of a tumor-effective oligonucleotide for the manufacture of a medicament for the treatment of a tumor in a patient after complete or partial resection or ablation of a solid tumor of this patient, characterized in that the oligonucleotide medicament is to be applied in a body cavity created during the resection or ablation of the solid tumor of the patient in order to fight tumor cells remaining in the tumor bed and within its vicinity after surgery or ablation or to fight metastases, and in order to counteract recurrences or the formation of new metastases in this area,

wherein the oligonucleotide medicament is in the form of a load of a carrier selected from a resorbable elastic material or resorbable gel, wherein the resorbable elastic material or gel at least partially reproduces the shape of the resected tumor, wherein the resorbable elastic material or gel comprises tumor-effective oligonucleotides at a concentration of 15 or 70 micrograms per milliliter, preferably at a concentration of more than 250 or 1000 micrograms, or 5, 25, or 100 milligrams per milliliter, or

wherein the oligonucleotide medicament is in the form of a load of a carrier selected from a membrane, foil, or gauze, wherein the tumor-effective oligonucleotides are carried directly, packaged in particles, conjugated or formulated as a gel, and wherein the loading densities are at least 10 micrograms per square centimeter, preferably 50 or 200 micrograms or 1, 5, or 20 milligrams of oligonucleotide per square centimeter.

2. Use of an oligonucleotide according to claim 1, characterized in that the oligonucleotide used has a pleiotropic effect in at least one type of tumor cell.

3. Use of an oligonucleotide according to claim 1, characterized in that the carrier contains materials with low immunogenicity, in particular collagen, atelocollagen, gelatin, chitosan, or hyaluronic acid.

4. Use of an oligonucleotide according to claims 1 or 3, characterized in that the carrier additionally has markers for specific detection, in particular absorptive or fluorescent dyes.

5. Use of an oligonucleotide according to any one of claims 1 to 4, characterized in that the crosslinking of the carrier is stopped such that the carrier material is degraded in the patient's

body with an *in vivo* half-life of more than a week, and preferably with a half-life of more than 2 weeks, 4 weeks and 3 months.

6. Use of an oligonucleotide according to any one of claims 1 to 5, characterized in that in addition to the oligonucleotides, other tumor-effective molecules, in particular cytostatics, are applied to the carrier in therapeutically relevant dosages.

7. Use of an oligonucleotide according to any one of claim 1 to 6, characterized in that carriers are combined with each another, in particular gel or gauze in combination with a liquid formulation, such as to reach optimally tumor cells which are located at a distance from a wound edge.

8. Use of an oligonucleotide according to any one of claim 1 to 7, characterized in that diagnostic elements are integrated into the carrier, in particular sensors for heart rate, LDL, or HDL concentrations.

9. Use of oligonucleotides according to any one of claims 1 to 8 characterized in that the tumor is selected from the group consisting of adrenocortical carcinoma, ovarian cancer, mesothelioma, and glioblastoma.