

Major Surgical Resections in Abdominopelvic Sarcomas: Clinical Features and Results of 38 patients: A Tertiary-Center Experience

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Abstract

Introduction: Sarcomas with mesenchymal origin located in the abdominal cavity or retroperitoneal space are rare. They might reach large dimensions due to the non-specific and late onset of clinical symptoms. In this study we aim to provide the outcomes of 38 cases.

Methods: Thirty-eight patients, whose data had been registered and analyzed completely in a prospective manner, were enrolled in the study. Demographic Findings, Primary-Recurrent Status of the disease, surgical method applied (R0-1-2), additional organ resections, Morbidity and Mortality rates, HIPEC application, Histopathological results and overall survival outcomes during follow-up were evaluated in the enrolled cases.

Results: Thirty-eight (38) patients were operated on due to soft tissue sarcomas located in the abdominal and retroperitoneal area. The mean age of patients was 57.63 ± 15.38 . The localization rates of retroperitoneal, abdominal and visceral tumors were 28%, 58%, and 12%, respectively. The mean tumor size was $12.96 \text{ cm} \pm 9.62$. Twenty-seven patients (71%) underwent R0 resection, 7 patients (18%) underwent R1 resection, 4 patients (10%) underwent R2 resection. Additionally, sarcomatosis was detected in 6 patients and these patients underwent Cytoreductive Surgery+HIPEC. The first 30-day mortality and morbidity rates were 10.5% (4 patients) and 44% (17 patients), respectively.

Conclusion: Surgery is the gold standard treatment of this condition. The most important stage in the management of the condition is the discussion of these cases in multidisciplinary teams in centers experienced in this disease in terms of prognosis and local recurrence and deciding on the treatment strategy based on these discussions.

Key words: sarcoma, multidisciplinary approach, surgical resection