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Ewing's Sarcoma of the Pelvic Girdle Treated with Cryoablation in Lieu of Wide Local Resection. Report of Eight Consecutive Patients.

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Background

Wide resection of Ewing's sarcoma of the sacrum or periacetabular region may result in a major neurological deficit or loss of hip function and ambulation ability, respectively. The authors speculated that intralesional tumor resection with adjuvant cryoablation of the tumor cavity in lieu of wide local resection may be safely performed in patients who had Ewing's sarcoma of the pelvic girdle and in which the tumor was confined to the affected bone.

Methods

Between 2004 and 2010 the authors treated 6 patients with sacral and 2 patients with periacetabular Ewing's sarcoma. There were 5 males and 3 females who ranged in age from 10 to 41. Five patients had a stage IIA and 3 patients had a stage IIIA disease. All patients were treated with preoperative chemotherapy and following recovery from surgery, chemotherapy and radiation therapy. Surgery included intralesional tumor removal and cryoablation of the remaining tumor cavity. Patients were followed from 1 to 6.5 years.

Results

At their most recent follow-up, none of the study patients had local tumor recurrence. All patients were ambulating without assisting devices and none had neurological deficits that were attributed to the surgical procedure. One patients who had sacral disease developed radiation-induced osteosarcoma of the sacrum.

Conclusions

Intralesional tumor removal with adjuvant cryoablation in patients who have pelvic Ewing's sarcoma and in which the disease has no soft-tissue extension, provide good local control and preserve function. It should be considered as the surgical treatment of choice in these patients.

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