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Clinical outcome following marginal resection of atypical lipomatous tumor/well-differentiated liposarcoma of the extremities and trunk wall

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Background: The consensus of the best surgical procedure for atypical lipomatous tumor/well-differentiated liposarcoma (ALT/WDLS) still remained unclear. The wide resection may cause a serious functional disorder, otherwise the marginal resection may increase the risk of local recurrence. This study describes our experience with this tumor of the extremities and trunk wall when treated by marginal resection. **Methods:** We retrospectively reviewed 40 ALT/WDLS patients treated by a marginal resection between 1997 and 2011. There were 20 men and 20 women, with an average age of 60.1 years. The average size of the tumor was 15.4cm. The most common site was the lower extremities (24 patients), followed by the trunk (10 patients), and upper extremities (6 patients). Intermuscular tumors were founded in 21 patients, intramuscular tumors in 16 patients, and subcutaneous tumors in 3 patients. The mean follow-up duration was 4.7 years. **Results:** Three patients (7.5%) had a local recurrence at an average of 6.8 years after initial resection. One of these tumors was founded in the lower limb and two in the trunk. Two patients had local recurrences more than two times. The first CT scan or MRI at 4 months after initial surgery revealed residual tumor in other three patients (7.5%) after initial surgery. All of these tumors were intermuscular. Serious functional loss did not occur in all patient of this series. There was no case of metastasis or dedifferentiation. **Conclusion:** Our findings suggested that a marginal resection for ALT/WDLS of extremities and trunk wall seem to be adequate treatment as they have a slight tendency to recur but do not metastasize; however, long-term follow-up is recommended for early diagnosis and treatment of any local recurrence. In case of intermucular tumor, a careful excision may reduce the risk of leaving tumor.

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