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## Ray of light -Neo-adjuvant chemotherapy for primary high-grade extremity soft tissue sarcoma

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**Background:**The aim of this study was to retrospectively analyze the relationship between neo-adjuvant chemotherapy and outcome in patients with high-grade extremity soft tissue sarcomas (STS).  
**Patients and methods:** Inclusion criteria were high-grade, deep, >5 cm extremity soft tissue sarcomas. Twelve patients (seven male and five female patients) diagnosed between 2006 and 2012 were. Median age was 51 years (21 to 67 years). Three patients had malignant fibrous histiocytoma, four patients had MPNST, two patients had rhabdomyosarcoma, one patient had liposarcoma, one had myxofibrosarcoma and one had malignant mesenchymoma. All patients were treated with three cycles of neoadjuvant chemotherapy. Patients with malignant fibrous histiocytoma were treated with doxorubicin/cisplatin/metotrexate and patients with all other STS were treated with doxorubicin/ifosfamide/mesna. After neoadjuvant therapy all patients with control of disease were treated with surgery and adjuvant chemotherapy.

**Results:** Response rate was 42% (five patients achieved partial response) registered according to RECIST criteria. Control of disease (partial response, minor response and stable disease) was 83%. Two patients (17%) experienced progression of disease during therapy with local progression of disease. Limb sparing surgery was performed at ten patients (83%). Overall survival was 33 months (range 6 to 79 months, 95% CI) with nine patients still alive, seven without progression of disease.  
**Conclusion:** Our result suggests that neoadjuvant chemotherapy is an effective regimen in treatment of advanced STS. These data emphasize the need for further prospective clinical studies of neo-adjuvant or adjuvant chemotherapy for patients with large high-grade extremity sarcomas.

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