



P6:113

Clinical Outcome of Recurrent Myxofibrosarcoma

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Objectives

Myxofibrosarcoma typically affects the elderly. It is notorious for its extreme invasiveness and high local recurrence rate, however, little has been known about the clinical course of patients with recurrent tumor. We retrospectively analyzed the clinical data of patients with recurrent myxofibrosarcoma to elucidate the clinical outcome.

Methods

Since 1999, there were a total of 141 cases of myxofibrosarcoma treated in our hospitals and 36 patients developed local recurrences during their clinical course. Factors that may affect the clinical outcome were investigated.

Results

There were 25 males and 11 females, and the age at diagnosis ranged from 48 to 90 years old (avg. 67.9). The follow-up period ranged from 5 to 210 months (avg. 61.2). Ten patients (27.8%) had their initial tumors in the trunk, and 26 patients (72.2%) in the extremities. The overall average time interval between the initial surgical treatment and the first local recurrence was 31.9 months. Although the difference was not statistically significant, the average interval was 29.4 months for 26 patients treated by surgery alone, while the combination of surgery and radiotherapy prolonged the interval to 38.6 months. Among 34 patients who underwent surgical treatment for their recurrent tumors, 20 cases developed second local recurrence, and the 3-year local recurrence free survival was only 10.9%. Patients with local recurrence underwent multiple surgical treatments for their local control, up to 8 times in our series (avg. 2.9). 11 patients eventually had amputation at the proximal part of their limbs. The oncological outcomes were 18 NED, 6 AWD, 9 DOD, and 3 DOOD.

Conclusion

This study highlighted the difficulty in the management of local control for patients with myxofibrosarcoma. We cannot cure the patient by radiotherapy alone, however, we did observe a slight prolongation of the local recurrence free survival after radiotherapy, which led us to reaffirm the significance of the initial wide resection for the tumor. Furthermore, novel multidisciplinary treatment is needed to reduce the recurrence as well as to treat the recurrent tumors.

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