PRONOSTIC VALUE OF INITIAL MANAGEMENT IN LOCALIZED OSTEOSARCOMA. A MONOCENTRIC RETROSPECTIVE ANALYSIS.

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Introduction

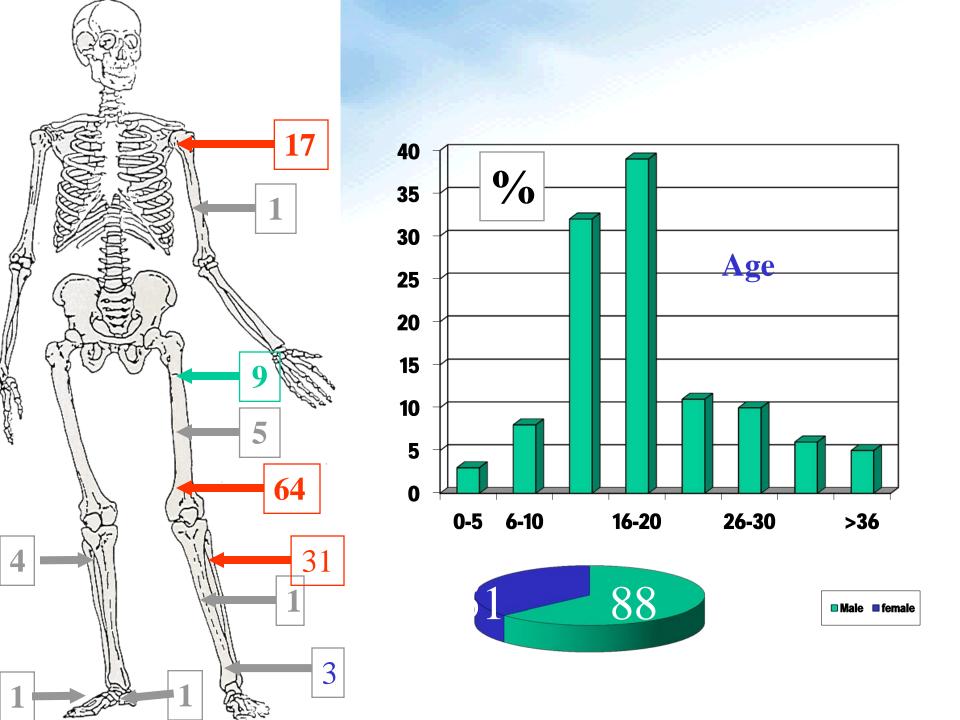
Many reports attempt to identify the factors which may affect prognosis in osteosarcoma. We wanted to determine whether the technique of biopsy and or the initial management could be prognostic factor of long term survival.



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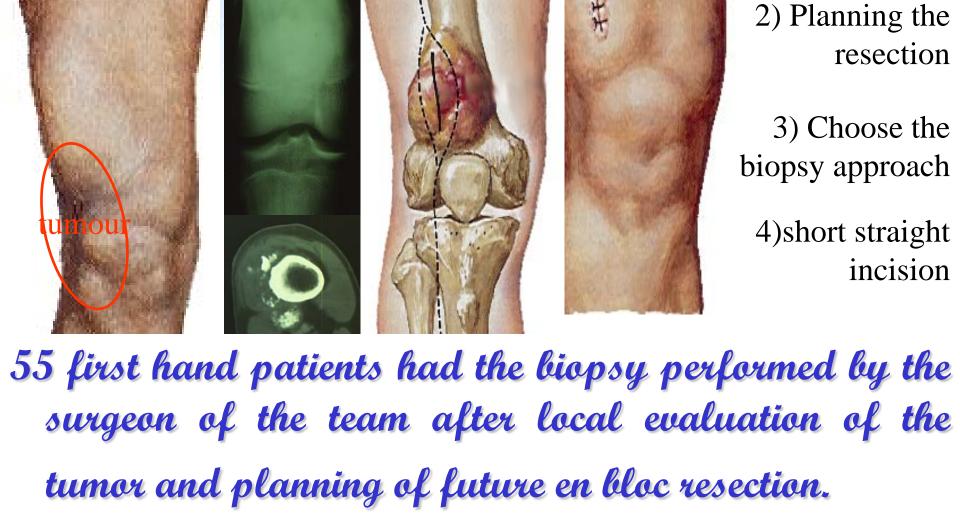
Patients

139 patients (88 males and 51 females aged 4-58 years) with localized osteosarcomas of the limbs were treated and or followed up by our team between 1984 and 1998.



Initial management of Patients 1

1) local screening



Initial management of Patients 2 The 84 other patients were referred to us after biopsy or and induction therapy.



Initial prognostic factors

No significant differences in initial prognosis factors were observed between the two groups.



Method

All patients received preoperative and postoperative chemotherapy according to the current protocols at the time of their treatment.

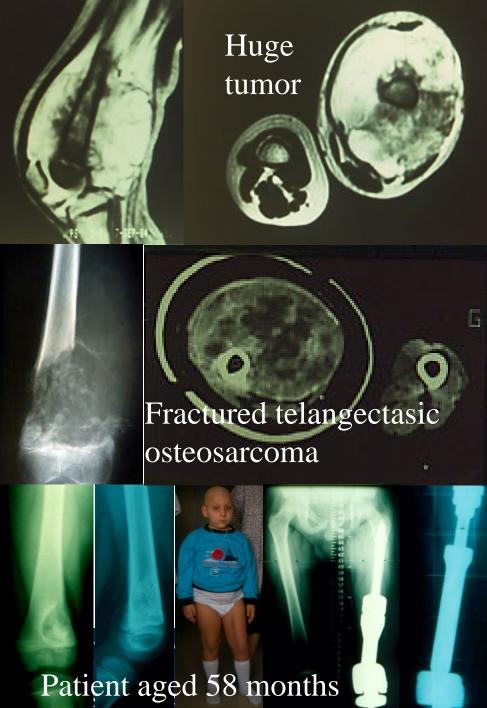
3 patients were primarily amputated All for initial inadapted biopsy



Pronostic value of initial management in osteosarcoma

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Local treatment The 136 other patients were treated by limb salvage even for fractured or huge tumors and in very young patients.



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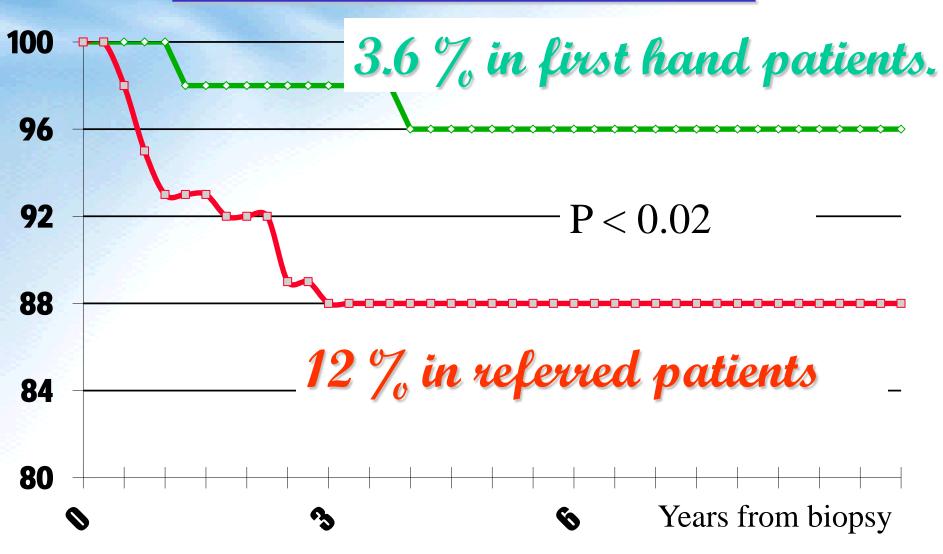
Pronostic value of initial manager

Follow up protocol

All patients were follow up by their surgeon and their chemotherapist every 3 months during 2 years, then every 6 months for 2 other years and yearly thereafter. median follow is 10 years (maximal 16 – minimal 2)



Local recurrence risk





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Disease free survival

54 % (46|84) of referred patients are alive in remission compared to 73 % (40|55) of first hand patients (93 % for first hand patients treated by our protocols since 1|1986).

Actuariel Disease free survival





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Conclusion 1

Initial management by an experimented team is of crucial importance in long term survival of patients with localized osteosarcoma of the limb.

Conclusion 2

When the diagnosis of osteosarcoma can be not excluded on prebiopsy medical imaging of bone tumor, patient should be referred before biopsy, to team experimented in bone tumor oncology.

The Hazards of the biopsy.

inadequate biopsies: 17.8%

10.1% loss of disease free expectancy

3% patients had to be amputated has a consequence of inadapted biopsy.

No progress has been seen when comparing to the comparative study perform in 1982????

The Hazards of the biopsy.Revisited. Mankin H.J..J BJS 1996,78A 5