

# Long term results in localized osteosarcoma : Major importance of initial management A monocentric retrospective analysis.

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, Tabbi A., Delépine N.*

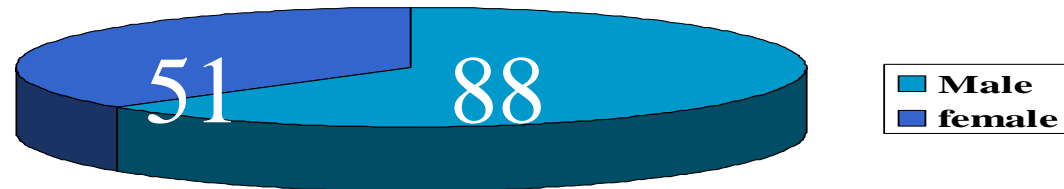
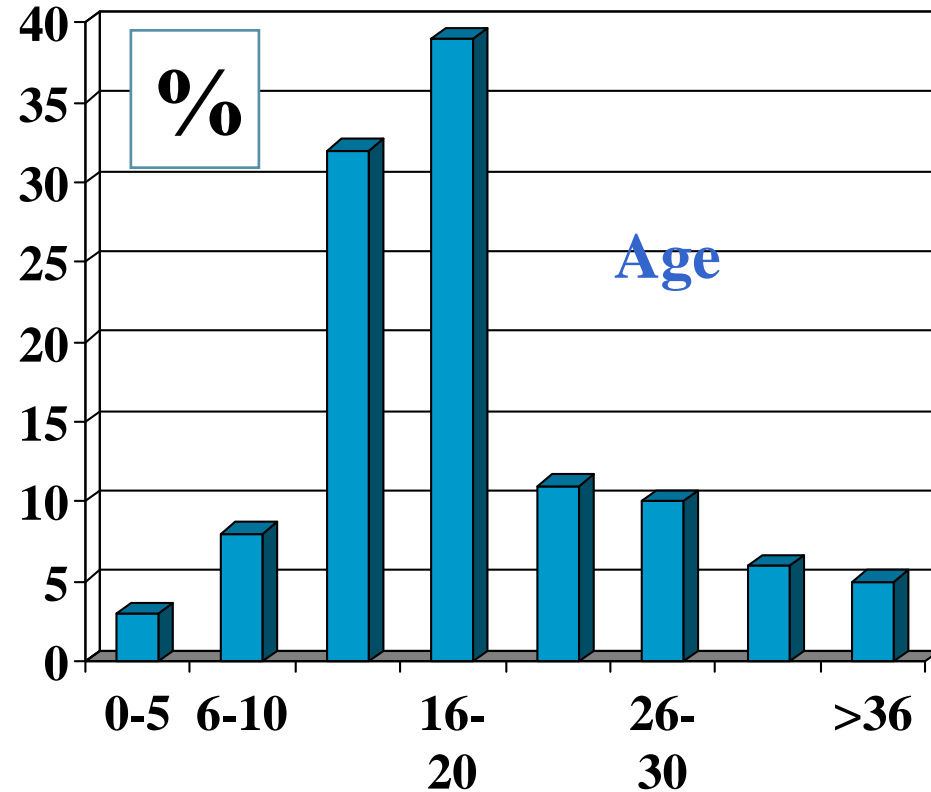
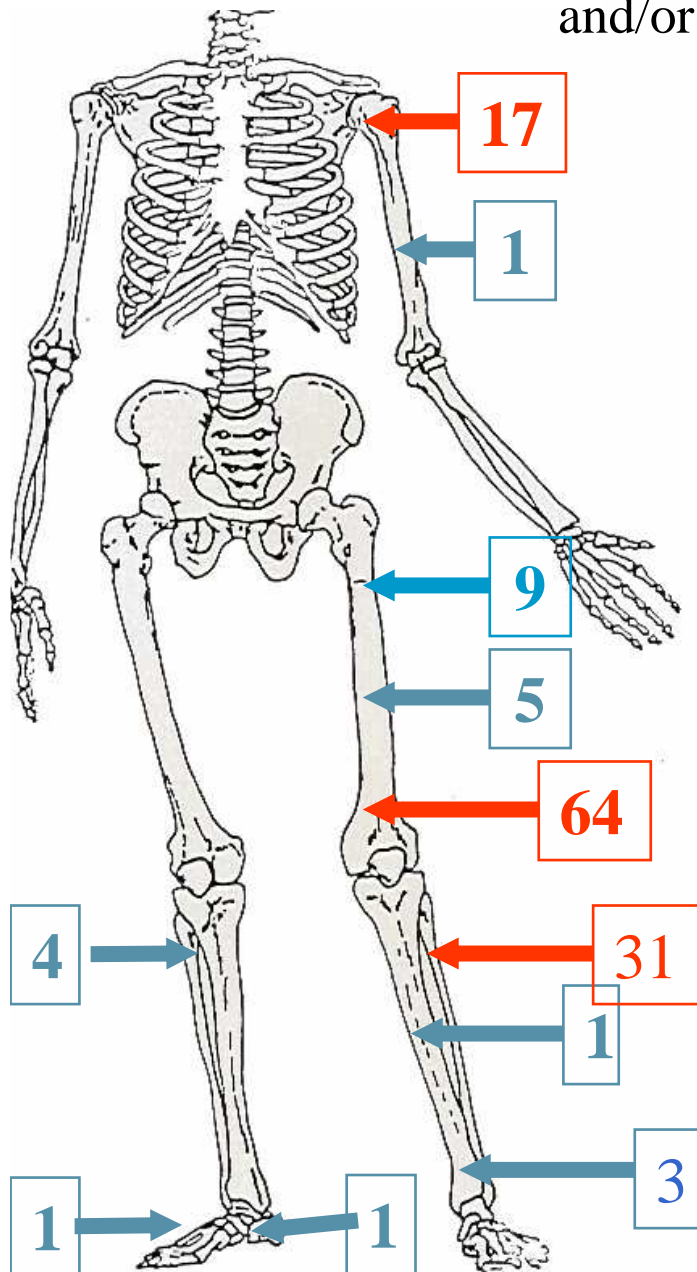
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# Patients

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



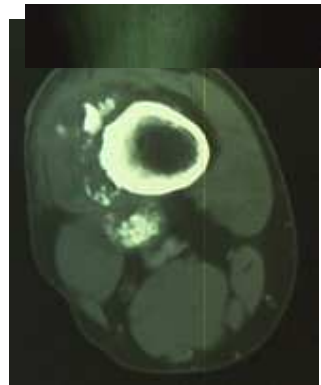
# 55 patients had the biopsy performed by the surgeon of the team



1) Tumor of distal femur



2) local screening



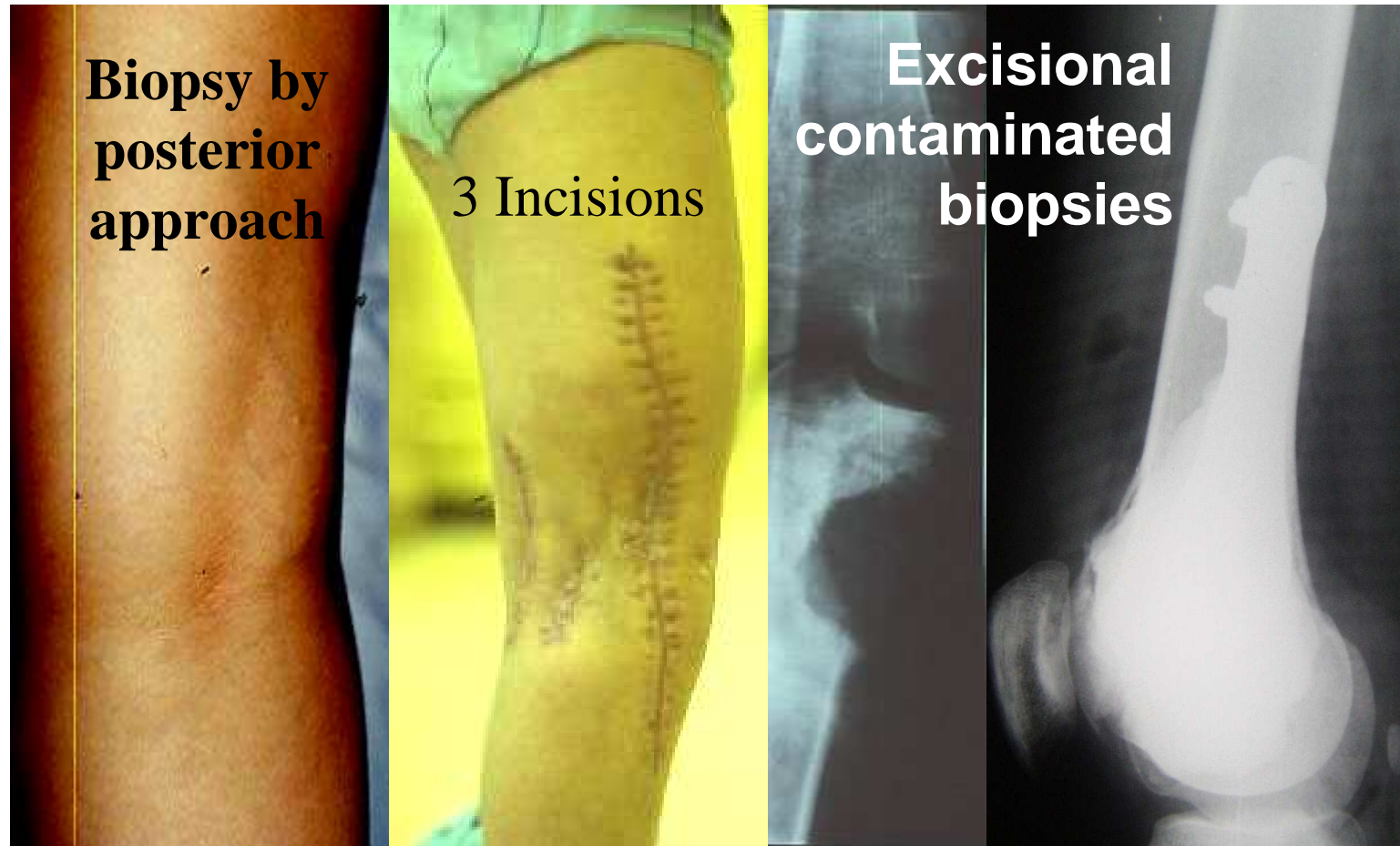
3) planning of resection



4) Short incision

- after local evaluation of the tumor and planning of future en bloc resection.

# 84 other patients were referred to us after biopsy



Some sub optimal biopsies

# 3 patients were primarily amputated

- all in referred patients
- among them 2 seen after inadapted biopsy



osteosynthesis

huge tumor with  
skin and vascular  
invasion

Contaminated excision



# Local treatment

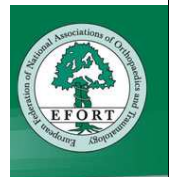
- All the 136 others were treated by limb salvage even for
- fractured or
- huge tumors
- or in very young patients



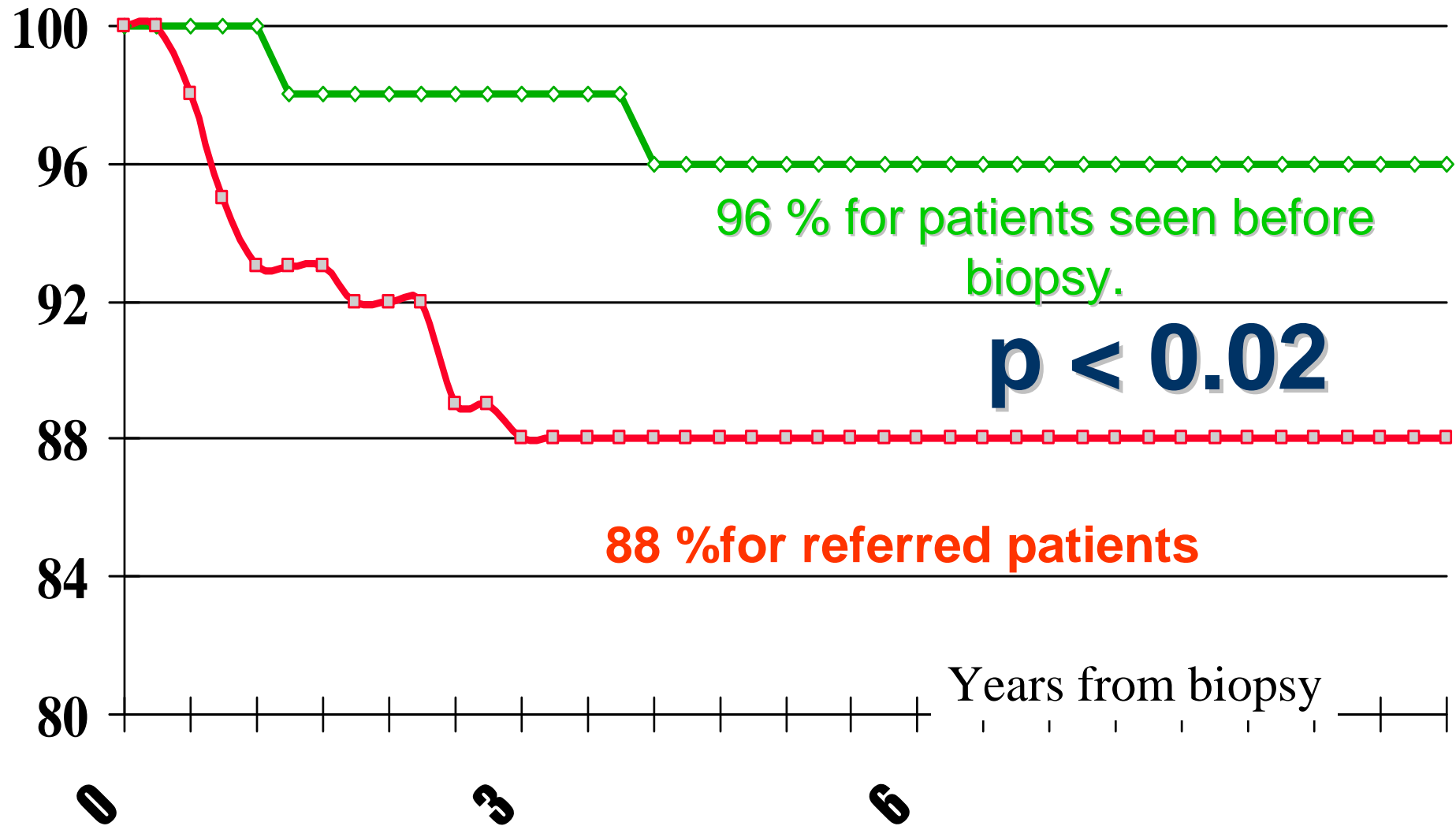
# Results : Local control

- All patients received preoperative and postoperative chemotherapy according to the current protocols at the time of their treatment.
- All patients were followed up by their surgeon and their chemotherapist. median follow up of 15 years (maximal 23 – minimal 10)
- **13 local recurrences were observed :**
  - 11/84 (13 %) in referred patients and
  - 2/55 (3.6 %) in first hand patients.
  - This difference is significant  $P < 0,02$

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

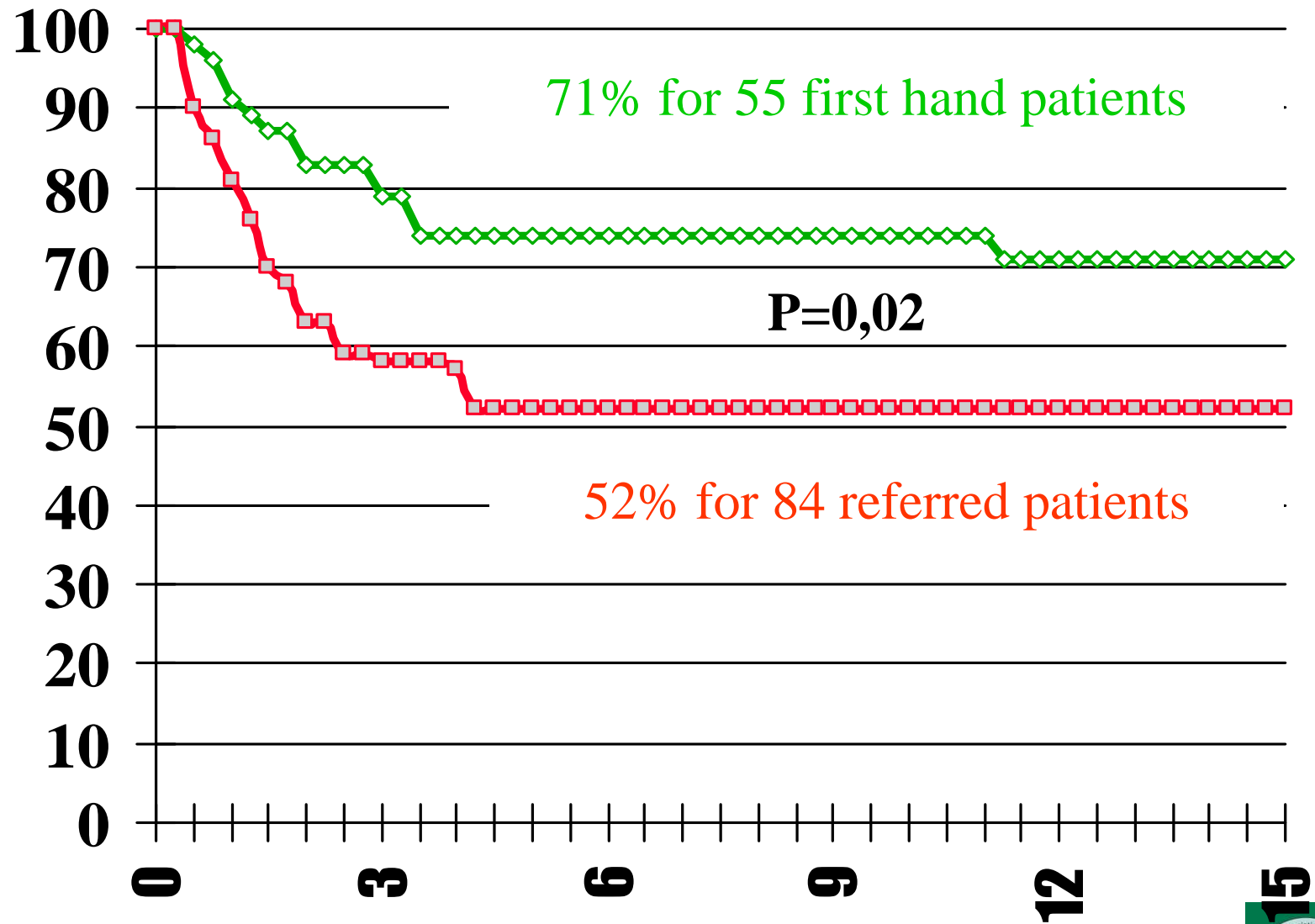


# Local Control





# Survival



# Conclusion 1

- Initial management by an experimented team is of crucial importance in long term local control and survival of patients with localized high grade osteosarcoma of the limb..
- When the diagnosis of osteosarcoma can not be excluded on prebiopsy medical imaging of bone tumor, the patient should be referred, before biopsy, to team experimented in bone tumor oncology.

