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abstract

Results of Complex Treatment for Rhabdomyosarcoma in Children

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Results of Complex Treatment for Rhabdomyosarcoma in Children

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Introduction: The portion of rhabdomyosarcomas in pediatric oncopathology is on average 1-2%, among soft tissue sarcomas (5-6%). Aggressive course, frequent metastasis and recurrence of the disease require a complex approach to treatment. This study aims to investigate the effectiveness of complex treatment of rhabdomyosarcomas in children at the Scientific and Practical Medical Center of Pediatric Hematology, Oncology and Immunology, Ministry of Health of the Republic of Uzbekistan.

Methodology: The study included 40 patients with rhabdomyosarcoma. The tumor was localized in the corpus in 15 patients (37.5%), in the extremities in 14 (35%), in the perineum in 3 (7.5%), in the head and neck in 3 (7.5%), in the bladder in 3 (7.5%), and in the pelvis in 2 (5%). The average age of the patients was 4.7 years. All patients were diagnosed with stages II-III of the disease.

Results: At the first step, all patients after histological verification, underwent neoadjuvant polychemotherapy from 2 courses to 4 courses (PCT) according to the VAIA III CWS 2012 (I2VAd

Vincristine – 1.5 mg / m² intravenously on days 1, 8 and 15; lphosphamide – 3000 mg / m² intravenously on days 1 and 2; Doxorubicin – 2×20 mg / m² intravenously for 1 and 2 days; Actinomycin D – 1,5 mg / m² intravenously with hyperhydration on the 6th day.

Complete tumor regression was observed in 3 (7,5%), partial regression – in 26 (65%) and in 11(27,5%) without effect. Polychemotherapy courses were carried out with concomitant therapy. At the second step, surgical interventions and for patients over 5 years old additionally radiation therapy were performed. In the postoperative period, up to 6 courses of adjuvant polychemotherapy were carried out. Three-year relapse-free and metastasis-free survival was 64.8%.

Conclusion: A complex approach to the treatment of rhabdomyosarcomas in children significantly improves outcomes and increases relapse-free and metastasis-free survival of patients.