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## The Role of Surgical Treatment in the Combined Treatment of Rhabdomyosarcoma in Children

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**Introduction:** The proportion of rhabdomyosarcomas in pediatric oncopathology is on average 1-2%. Aggressive course, frequent metastasis, and recurrence of the disease require at least a combined approach to treatment. The purpose is to study the role of surgical intervention in the combined treatment of rhabdomyosarcomas in children.

**Methodology:** The study included 33 pediatric patients with rhabdomyosarcoma of various localizations. The tumor was localized in the trunk in 16 patients (48.5%), in the extremities in 14 (42.4%), and in the head and neck in 3 (9.1%). The average age of the patients was 4.7 years. All patients were diagnosed with stages II-III of the disease. In the first step, all patients underwent 2 to 4 courses of neoadjuvant polychemotherapy according to the VAIA CWS 2012 protocol: complete tumor regression was observed in 10 (30.3%) cases, partial regression in 22 (66.7%), and in 1 (3.0%) without effect.

Polychemotherapy courses were carried out, supported by accompanying therapy. In the second stage, surgical interventions were performed. Radical surgical treatment in 90% of cases, cytoreductive in 10%. In the postoperative period, up to 6 courses of adjuvant polychemotherapy were undergone. The observation period lasted up to 36 months. Early recurrence of the disease was observed in 3 (9.1%) patients, and distant metastases in 10%.

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**Conclusion:** The problem of treating rhabdomyosarcoma is a rather complex and urgent issue in modern oncological practice. Many researchers have noted that the combination of surgical treatment with drug therapy in the pre- and postoperative periods often increases the frequency of remission in patients. Radical surgical treatment of rhabdomyosarcomas in children significantly improves outcomes and provides the possibility of recovery.