

**FC-103****Extraskelatal chondrosarcomas: how to identify bad prognostic factors for local recurrence and survival?**

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Introduction: According to WHO classification extraskelatal myxoid chondrosarcomas (EMC) are classified within malignant tumours of uncertain differentiation. The aim of the study is to evaluate the case series of a national reference centre to evaluate prognostic factors, local recurrence rate and survival.

Methods: 11 patients (7 males, mean age 54 ys, range 20-80) have been surgically treated for EMC in the period 2005-2010 in a regional reference centre for bone and soft tissue sarcomas. Inclusion criteria: minimum follow-up of 5 years. Two amputations, 8 wide margins excisions, and 1 marginal margins excision have been performed. All the tumours were in the pelvis or in the lower limb. Follow up for local recurrence and survival was evaluated.

Results: 8 patients developed a local recurrence (all treated with wide excision) and 1 a skip lesion in the same thigh (wide excision and local flap). 4 developed lung metastases: 2 at the diagnosis and 2 after local recurrence following wide excision. 3 of them died of disease (2 palliative hip disarticulation for pain control) and 1 is alive with lung disease. All the local recurrences and skip lesion had a histologic dedifferentiation but only one developed lung metastases with subsequent death of disease.

Conclusion: EMC often require wide surgical excisions and do not respond to traditional adjuvant treatment. Only palliative oncologic treatments for metastatic and not surgical diseases are described in contrast to other high grade soft tissue sarcomas. All local recurrence present with a histologic dedifferentiation but it does not reflect a more aggressive disease with an increased risk of lung progression of disease and death. New targeted therapies are going to be developed and will go under experimentation in the early future. Further studies and multicentric case series analysis are mandatory to better understand this type of tumour.