

**FC-106****Sarcoma of the foot: changes in amputation rate over one decade**

O. Tendero¹, I. Felipe-Abrio², P. Sancho³, **J. Martin-Broto**³, I. Monge¹, D. Salinas¹, R. Ramos¹, I. Alastuey¹, P. Luna¹, J. Estrada¹, L. Muntaner¹, A. Ballesteros¹

¹ *Son Espases University Hospital, Palma de Mallorca, Spain*

² *Instituto de Biomedicina de Sevilla, Sevilla, Spain*

³ *Virgen del Rocío University Hospital, Sevilla, Spain*

Background: Over the last decade, there has been a clear trend towards a decrease in radical resections in the surgery of soft tissue sarcomas (STS). The incorporation of plastic surgery has been hailed as a relevant argument in favor of a less aggressive surgical approach. As far as the location of all the STS of extremities is concerned, one of the lowest percentages of limb-sparing is seen in the case of STS of the foot, with an amputation rate above 30% in most historical registries.

As plastic surgeons have been incorporated into multidisciplinary sarcoma teams (MST) in the last 10 years, at least in most sarcoma reference centers in our country, we set out to analyze changes over one decade in the type of surgery offered within the initial therapeutic plan in STS of the foot.

Patients and Methods: Patients included in this analysis were accrued in two different registry programs spanning two time periods: 1994-2000 and 2004-2011. A queries-based task was carried out for data cleaning. The Chi-square test was used to compare categorical variables and Kaplan-Meier estimations were carried out; the Log-Rank test was employed to compare groups.

Results: A subset of 72 STS of the foot was identified (46 and 26 in the first and second time-period, respectively). Median age was 44 years; the female/male rate was 44/28, with a median size of 4 cm (1-25). The most frequent histologic types were synovial sarcoma 32%, clear cell sarcoma 17% and undifferentiated pleomorphic sarcoma 13%. There was a similar number of stage III for both time intervals: 20% vs 19%. Amputation-rate was 49% vs 20%, $p=0.017$, and the median size was 4 (1-25) and 5 (1-15), $p=0.09$, for the first and second time-period, respectively. There were no statistical differences in 3y RFS: 53% vs 43% ($p=0.58$).

Conclusions: Our data confirms a significant decrease in amputation procedures in STS of the foot over the last decade. This fact coincides with the significant emerging role of plastic surgeons in MST.