

**FC-124****Chondrosarcoma of the pelvis a review of sixty five cases between 1996 and 2013****A. Salduz**, G.A. Norambuena Morales, P.S. Rose, F.H. Sim*Mayo Clinic, Rochester, MN, USA*

Background: Treatment of pelvic chondrosarcoma is a difficult problem for the musculoskeletal oncologist. Poor rates of survival and high rates of local recurrence after surgical treatment have been reported in previous studies. The present study was designed to review the long-term oncologic outcomes of surgical management in a large series of patients with pelvic chondrosarcoma who were treated at a single institution.

Methods: The cases of 65 patients with localized pelvic chondrosarcoma that had been surgically treated between 1996 and 2013 were reviewed retrospectively. The study was limited to patients who had received no previous treatment for chondrosarcoma. There were 47 male and 18 female patients who had a mean age of 50.9 years (range, 17 to 86 years). The patients were followed for a minimum of one year or until death. The mean duration of follow-up of the living patients was 55 months (range, 0.3 to 209 months).

Results: 28 of the sixty-five patients were first seen with grade-1 chondrosarcoma; 26, with grade-2; 6, with grade-3; and 5, with grade-4 (dedifferentiated chondrosarcoma). 8 patients had an external hemipelvectomy to achieve local tumor control, whereas 57 patients underwent a limb-salvage procedure. 10 patients (15.4%) had local recurrence, and 11 (16.9%) had distant metastases. At the time of the final follow-up, 47 patients (72.3%) were alive, 18 (27.7%) had died. 5 years overall survival rate was 70%, and disease free survival was 75%. High-grade tumors correlated with poor overall survival ($p < 0.05$). Less than a wide surgical margin correlated worse overall survival ($p < 0.05$). Our results were similar with our previous series between 1975 and 1996.^[1]

Conclusions: Aggressive surgical resection of pelvic chondrosarcoma results in long-term survival of the majority of patients. Tumor grade and margin status are correlated with overall survival.

References:

- 1 Pring, M.E., et al., Chondrosarcoma of the pelvis. A review of sixty-four cases. The Journal of bone and joint surgery. American volume, 2001. 83-A(11): p. 1630-42.