



## PP-116

### Treatment of spinal and sacral Ewing Sarcoma/PNET with EURO EWING 99 in adults

D. Ristic<sup>1</sup>, R. Kovacevic<sup>2</sup>, N. Milanovic<sup>1</sup>, P. Cirkovic<sup>1</sup>, J. Sopta<sup>2</sup>, J. Dimitrijevic<sup>1</sup>

<sup>1</sup> Institute of Oncology and Radiology of Serbia, Belgrade, Serbia

<sup>2</sup> Institute of Pathology, Belgrade, Serbia

**Objective:** To examine the efficacy of an intensified induction regimen (EURO EWING 99) in patients with Ewing's family of tumors (EFT) with spinal and pelvic localisation.

**Patients and Methods:** We retrospectively analyzed data from treatment records for ten male and five female patients treated between June 2007 and July 2012 .Median age was 26 years (19 to 57 years). Seven patients entered the study with low performans status (less than PS 3). Eight patients had primary tumor localized on sacrum and pelvis, seven patients had primary tumor of the spine. Five patients had metastatic disease, four lung metastases and one with the breast metastasis, at the time of diagnosis . Our plan was to treat all patients according to EURO EWING 99 protocol with six cycles of VIDE as induction therapy .All patients with achieved complete response (CR) were treated with radiotherapy of the tumor bed or at residual tumor in partial response (PR) or debulking surgery was performed. After local treatment, therapy was continued with VAI therapy, six to eight cycles.

**Results:** Three patients did not complete all six cycles of VIDE (one because of disease and two because of hematological toxicity) and never underwent local treatment. Response rate was 75% (nine CR and 3 PR) according to RECIST criteria. One patient had progression of disease during therapy with development of metastatic disease. Overall time to progression was 35.7 months (95% CI 18.3.1-53.3). Overall survival was 43 months (95% CI 26.1-60.00) with six patients still alive.

**Conclusion:** This analysis suggests that EURO EWING 99 is an effective induction regimen in treatment of non resectable Ewing sarcoma of pelvis and spine. Inspite initially good response ,most of the patients experience relaps of disease. This regimen ,although effective ,still cannot overcome adverse prognostic factors ( axial localization and inability to perform adequate local treatment ).We also need better diagnostic procedures in detecting residual disease.