

**PP-129****Rescue treatment of soft tissue sarcomas****J. Garcia-Coiradas**, L. Serrano, J.L. Cebrian, R. Garcia-Maroto, L. Lopez-Duran*Hospital Clinico San Carlos, Madrid, Spain*

Objectives: Soft tissue sarcomas are a heterogeneous group of malignant tumors that are up to 40% treated as benign tumors, so inadequate resections are performed at first. The aim of this paper is to review the experience of our center in rescue treatment of these tumors.

Material and Methods: A retrospective study (2000-2013) of patients referred to the Musculoskeletal Oncology Unit of Hospital Clinico San Carlos diagnosed of soft tissue sarcoma.

The inclusion criteria were having received initial treatment without adequate resection margins. Mean follow up was 38 months. The sample included 25 patients (64% women) of mean age 57,5 years. 18 (72%) consulted for tumoral appearance, and 7 (28%) had associated pain. 6.3 cm was the average size of initial lesions; 13 (52%) of them located in subcutaneous tissue. All of the patients, after medical decision made in multidisciplinary session, were histologically typified, studied with MRI for local disease and PET-CT for extension.

Seven leiomyosarcomas, three synovial sarcomas, three malignant fibrous histiocytomas, two myxoid chondrosarcoma, two myxoid liposarcoma and 8 others. 19 of these tumors were grade 2-3. None had metastases at start.

Results: We performed salvage surgery in all of the patients: 20 (80%) expanding edges and 5 (20%) en bloc resection. Only two did not get free edges after salvage surgery due to their negative to perform a radical removal as needed. 17 (68%) received adjuvant chemotherapy and / or radiotherapy. 6 (including two who refused amputation) developed local recurrence, requiring reoperation, two of which finally underwent amputation. 6 (24%) patients had metastases and 3 (12%) died during follow up.

Conclusion: Classically, tumors located in surface levels, <5cm and not painful, have been considered with low risk of malignancy. However, in our sample 12 patients had tumors smaller than 5 cm, 13 were subcutaneous and 18 did not associated pain. Revising those criteria may be needed. Both the diagnosis and treatment of these tumors should be carried out by reference and multidisciplinary centers, since the type of initial resection involves the long-term outcome and affects life expectancy of these complex patients.