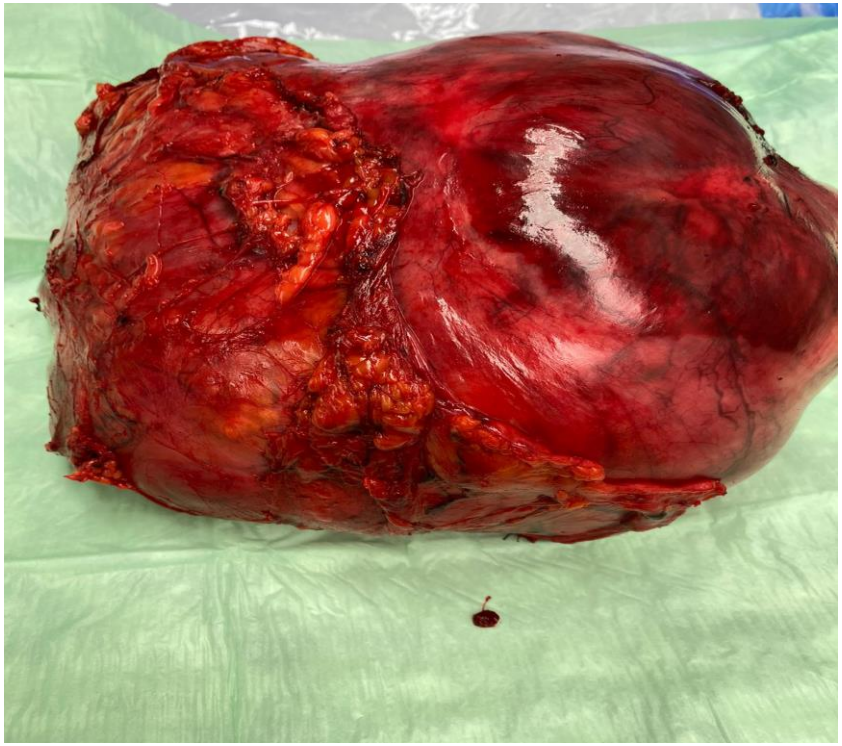
Multimodal treatment of retroperitoneal sarcoma
a single center experience

Introduction

Retroperitoneal Sarcomas belong to a group of tissue tumours, originating from mesenchymal cells located in the retroperitoneum. Because of the low incidence and non-specific symptoms, early diagnosis and treatment are still a challenge.

While surgery remains the state of the art in treating retroperitoneal sarcomas, the implementation of a multimodal approach is necessary, especially when taking into consideration the high risk of local recurrence. We present an analysis of present literature accompanied with our single-center experience.



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Methods

We conducted a systematic search of accessible current literature from Medline and various official sources. We included studies of the oncological outcomes for retroperitoneal sarcomas. In addition, we discuss two case reports from our hospital in the background of literature.

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Results

First diagnose	09/2019	10/2019
Surgery	09/2019	10/2019
TNM	pT4, pN0(0/19), cM0, G1, R0	pT4, pN2, cM1, G3, R1
Method	En bloc tumor resection including left-sided nephrectomy and right-sided hemicolectomy	En bloc tumor resection including left-sided nephrectomy and left-sided hemicolectomy
Postoperative- CT	12/2019- no evidence of distal or local remission	12/2019- evidence of local recurrence and distal metastasis
Adjuvant therapy	none	Chemotherapy (1 Cyclus) 01/2020 †x

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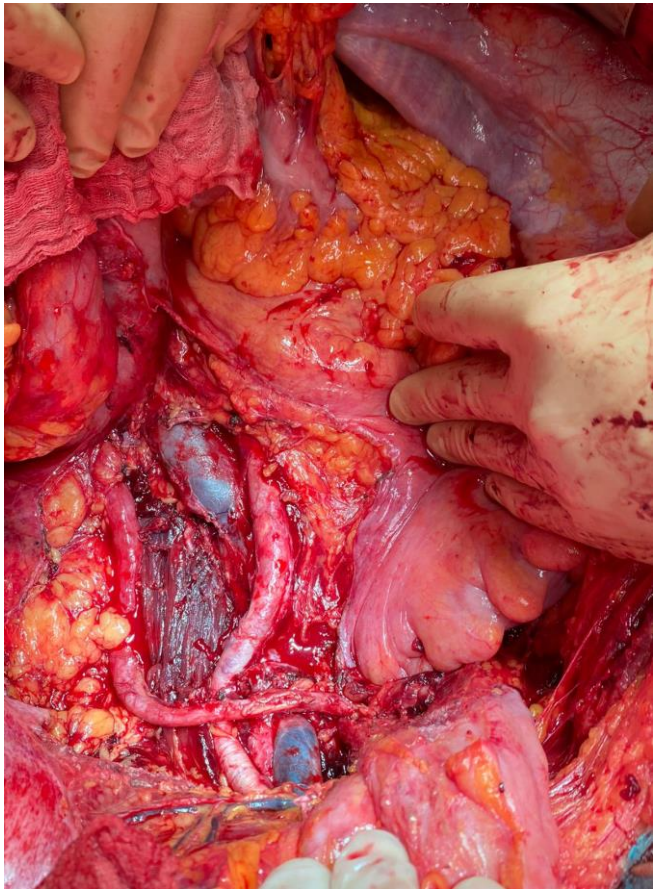
Results

- Survival of patients with retroperitoneal sarcoma depends on the first time of diagnosis and initial stage of the tumor.
- The risk of tumor progression during neoadjuvant radiotherapy needs to be considered.
- Resection of the primary tumor remains an option as palliative procedure in patients with metastatic disease.
- The role of adjuvant (radio-)chemotherapy remains controversial and depends on the histological subtype of sarcoma.



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Summary

- Further research is needed to determine the optimal way of treating retroperitoneal sarcomas. **Radical surgery remains the only curative modality for retroperitoneal sarcoma. The complete R0 resection is the most important factor to improve the overall survival.** Perioperative and postoperative radiotherapy lower the risk of local recurrence, although improved over-all survival has not yet been proven.
- The implementation of systemic therapy and targeted drugs is anticipated in future clinical use.
- Treatment of retroperitoneal sarcomas requires a highly individualized and tailored approach. A multimodal and centralized therapy is necessary in order to both improve patients' prognoses.

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