

TITLE: Morbidity following sarcoma surgery of the extremities

AUTHOR: Leninbabu V, Nandhara G, Adeyemo F, Komarasamy B, Jadeja H, Paul A

CENTRE: Manchester Royal Infirmary

ABSTRACT:

Background: Limb salvage surgery for soft tissue sarcomas (STS) leads to significant amount of morbidity. Excision of the tumour alone is not the end of the story. We looked into the various post excision problems faced by these patients.

Patients and methods: Retrospective review of 96 patients who underwent tumour excisions in their extremities over a period of 5 years from 1999 to 2004 with a minimum follow up of 8 months.

Results: 72 patients had STS in their lower limbs while the rest had in the upper limbs. Of the 72, 53 were either at the level of knee or above the knee with the anterior compartment of thigh being the most common site (13) and Vastus Lateralis being the commonly involved muscle. Liposarcoma was the commonest tumour (22) followed by Leiomyosarcoma (19). 61 patients had wide local excision, 17 had radical excision and 12 had marginal excision. 6 patients had palliative treatment. 38 had post op radiotherapy. The average interval between presentation and definitive treatment was 28 days. The commonest post op problem is inadequate skin cover (17) with local recurrence & lymphoedema being the next most common complication (12). Seroma/Haematoma was noted in 8 patients. There were 7 superficial infections and one deep infection. Fixed Flexion Deformity at knee of $> 10^0$ was noted in 5 and intractable neurological pain in 4 cases. 3 developed skin rashes after radiotherapy. 2 had ulnar nerve palsy and one had foot drop. DVT occurred in 3 patients. 2 had stump neuromas and 2 ended up with below knee amputation. Anxiety among patients resulted in 11 further surgeries for benign swellings in other parts of the body but none proved to be malignant. The average life span of the patients from the time of confirmed diagnosis was 23 months.

Discussion: Radical resection of huge tumours in the extremities leads to significant morbidity. In spite of a good clearance, there is evidence of frequent local recurrences and distant metastatic spread.

Conclusion: 1) Significant complications can occur after sarcoma surgeries. 2) Patient should be adequately informed about the complications pre op. 3) Patients expectations should be sought pre op. 4) Surgeon should properly plan his surgery liaising with other specialities concerned 5) Radical excision offers no significant advantage over wide local excision.