



CONFERENCE 2007

## ABSTRACTS

### **Prognostic value of unplanned excision of a soft tissue sarcoma on subsequent outcome.**

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**Aim:** To investigate whether our policy of routine re-excision after unplanned excision of a soft tissue sarcoma was justified.

**Method:** Over a 23 year time period 2202 patients were referred with soft tissue sarcoma. 363[17%] patients who had undergone a previous unplanned excision were included in the study. All patients were routinely restaged with CT chest and MRI. The original histology was reviewed. 316 patients underwent wide re-excision. Re-excision was deferred in 47 patients. The patient, tumour and treatment factors in relation to local control, metastasis and overall survival were analysed using Statview software.

**Results:** Residual tumour was found in 60%.

The resected specimen was analysed and categorized into 3 categories:

1] no residual disease (sterile)-128 [10% developed LR]

2] residual disease excised with wide margins (wide)-149[20% developed LR]

3] residual disease with close margins at re-excision (marginal)-39[47% developed LR]

The estimated 10 years local recurrence rate was 34%. A final positive margin in a high grade tumour had a 60% risk of local recurrence even when post operative radiotherapy was given.

The overall survival improved when there was re-excision with wide margins. 24% developed metastasis and the overall survival was 78% at 5 years

**Conclusion:** We concluded that our policy of routine re-excision after unplanned excision of soft tissue sarcoma was justified especially in reducing local recurrence, metastasis and to an extent improving overall survival.