

THE OUTCOME OF LIMB SALVAGE SURGERY IN A DEVELOPING COUNTRY, KHCC EXPERIENCE

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Background:

Limb salvage surgery (LSS) became the standard surgical treatment for bone sarcomas since the late 1970s; however, LSS has high cost and numerous complications that make it less applicable in developing countries.

Objectives:

To Show that LSS in developing countries, can be compared to developed countries, when; team work, expert surgeon and enough resources are available.

Methods:

Since July 2006, a multidisciplinary team of sarcoma was established. This team consisted of pediatric and medical oncologists, radiation oncologists, radiologist, nurse coordinator and a full-time orthopedic oncology surgeon. The team was supported by a service for physical therapy. Clinical practice guidelines were established and a special protocol for rehabilitation following surgery was applied. One hundred and thirty three patients with malignant or benign aggressive bone tumors presented at the study period, 18 patients received primary amputation, 115 patients received LSS (87 % of all patients) included in our analysis, with mean follow up of 34 months (range, 6-70 months). Tumors were located in the extremities (n=104), in the scapula (n=4) and the pelvis (n=7).

Results:

At 4 yr. median follow up, local control was achieved in 89% of patients , 84% of patients has no complications, 8% developed infection, 97% of limbs survived, MSTS functional score=87%.

Conclusions:

Our early results are encouraging. Patients with sarcoma are managed better within a multidisciplinary team that is familiar with highly specialized procedures including LSS. The early outcomes of our cases are comparable to that in developed countries in term of local control and prosthesis related complications.