

A UTERINE MULLERIAN ADENOSARCOMA WITH RETROPERITONEAL METASTASIS

Introduction: Uterine sarcomas represent less than 3% of uterine cancers. Between uterine sarcomas, adenosarcomas are extremely rarely observed and diagnosed, histopathologic examination having a very important role in their accurate classification. Uterine mullerian adenosarcomas, first described in 1974, are consisted of a benign epithelial and a malignant stromal component, being considered low grade tumors, of low malignant potential, excepting the cases characterised by an excessive sarcomatous proliferation or profound invasion into the miometrium. The final optimal treatment is still insufficiently ascertained, its evaluation being limited by the yet small number of cases reported in literature. The surgical treatment that is usually adopted is represented by hysterectomy, local recurrences being frequent and metastases being rare. Case report: We present the case of a 76 years old patient, diagnosed with uterine adenosarcoma, operated- total hysterectomy with bilateral salpingo-oophorectomy, neglected afterwards, with local recurrence, treated by radiotherapy, which, in its evolution, associated a retroperitoneal metastasis of large dimensions. The retroperitoneal metastasis, by its multivisceral and large vessels involvement, has been inoperable. Conclusions: Uterine adenosarcomas are rare tumors, with a poor prognosis in advanced cases or in the context of sarcomatous component overgrowth. Although unusual, retroperitoneal metastases can appear and should be carefully taken into consideration during long term follow-up.

E111

TRATAMENTUL CHIRURGICAL CONSERVATOR AL NEOPLASMULUI MAMAR IN CONSTANTA

Lordache I.-E., Unc O.-D., Sârbu V., Popescu R., Calin Irina, Steriu Liliana, Pundiche Mihaela, Candea Iulia, Bajan D., Lordache Monica-Maria

Spitalul Clinic Judetean Constanta

În ultimele 4 decenii conceptul de chirurgie conservatoare s-a impus ca o alternativă viabilă în arsenalul terapeutic al cancerului de sân. Această evoluție a fost determinată de concluziile numeroaselor studii clinice randomizate și de atenția deosebită acordată calității vieții pacienților diagnosticate cu neoplasm mamar, astfel încât standardul actual al tratamentului cancerului de sân din stadiile I și II este reprezentat de tehnicile de chirurgie conservatoare. Cu toate că această problemă reprezintă o preocupare constantă în ultimii 7 ani în cadrul Clinicii de Chirurgie din cadrul Spitalului Clinic Judetean Constanta, numărul de intervenții chirurgicale conservatoare reprezintă un procent de doar 11.18% din totalul operațiilor pentru neoplasmul mamar. Scopul acestei lucrări este de prezenta experiența colectivului Clinicii de Chirurgie în acest domeniu și de a identifica problemele ridicate de aplicarea în practică a acestui concept în contextul medicinei românești, în dorința ca această opțiune terapeutică să devină o realitate a chirurgiei cancerului de sân din țara noastră.

SURGICAL CONSERVATIVE TREATMENT OF BREAST CANCER IN CONSTANTA

In the last 4 decades the concept of conservative surgery imposed itself as a viable alternative in the therapeutic scheme of breast cancer. The evolution was determined by the conclusions of numerous randomized clinical studies and by the special attention given to the quality of life of the patients diagnosed with breast cancer, so that the actual standard of treatment in breast cancer in stages I and II is represented by conservative surgery techniques. Although this pathology represents a constant preoccupation in the last 7 years in the Surgery Clinic of County Hospital Constanta, the number of conservative surgery in breast cancer represents only 11.18% out of a total number of interventions for breast cancer. The purpose of this article is to present the experience in this domain in the Surgery Clinic of County Hospital Constanta and to identify the problems of application into practice of this concept in the context of Romanian medicine, wishing that this therapeutical option to become a reality in the surgery of breast cancer in our country.

E112

NEOPLASM CU ALTA LOCALIZARE DUPA TUMORA KLATSKIN OPERATA

Brasoveanu V., Anghel C., Bacalbasa N., Barbu I.

Institutul Clinic Fundeni- Clinica Chirurgie Generala Si Transplant Hepatic "Dan Setlacec"

Prezentare de caz tumora klatskin IIIb rezecata cu evolutia postoperatorie buna, diagnosticat la 3 ani cu tumora gastrica

MALIGNANT TUMOR WITH DIFFERENT LOCALISATION AFTER KLATSKIN TUMOR SUCCESSFULLY RESECTED

Case report IIIb klatskin tumor successfully resected with good postoperative outcome is diagnosed 3 years later with a gastric tumor