Ovarian Cancer in Children and Adolescents

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Ovarian cancer represents a small proportion of the tumors in children and adolescents, about 3-4% of solid tumors in this age group. Little accurate information is available regarding the true incidence of ovarian tumors in children and adolescents in Romania. The objective of this study was to evaluate the particularities of ovarian cancer in children and adolescents, to analyze the survival and late effects. This historical prospective study is based on the data from the medical records of 32 patients - children and adolescents - with ovarian cancer who were treated between 1990- 2008 in Institute of Oncology Bucharest, Romania. The highest incidence was for the age group of 10-14 years (17 cases), followed by the 15-19 years old group (14 cases). The histological types were: disgerminoma (12 cases), undifferentiated carcinoma (4 cases), differentiated carcinoma (5 cases), endodermal sinus tumor (5 cases), mixed tumors (6 cases). Stages at the time of diagnosis were as following: stage I-5 cases, stage II- 10 cases, stage III- 16 cases (50% of patients) and stage IV-1 case. The primary tumor was unilateral in the majority of cases: 23 patients (72%) and bilateral for 9 patients. The treatment was multimodal. Initial management was surgical for all patients: unilateral oophorectomy in 15 cases, bilateral oophorectomy in 8 cases and bilateral oophorectomy + hysterectomy in 7 cases. In 1 case the purpose of the surgical intervention was citoreduction, in 3 cases- palliative surgery and in 4 cases second-look surgery (positive in 2 cases). All patients received chemotherapy following specific protocols. Radiotherapy was used in 12 cases (pelvic and abdominal RT in 8 cases and only pelvic RT in 4 cases) and hormonal substitution used in 3 cases. All cases were followed-up at least 1 year after the end of the treatment. Clinical observation: In the cured cases the procreation was conserved (2 patients with normal pregnancy, normal accouchement and healthy child). The most frequent metastases: peritoneum, lungs, liver. Mortality: 10% (1 casestage I with incomplete treatment, 1 case stage II, 1 case stage IV). Conclusions: 1. ovarian tumors in children and adolescents are rare, the highest incidence being at pubertal age. 2. the most frequent histological type was germ-cell tumors. They are curable if early diagnosed. 3. Survival rate in stage III was very good with modern multimodal treatment.

Acute Gynecological Abdomen in Children

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Acute abdomen is acutely emerging pathological processes in the abdominal cavity of different etiology and clinical course. Among the reasons causing the acute abdomen in children is the torsion ovarian formations in about 15%. Causes of acute abdomen in gynaecology can be divided into 3 groups: acute intra-bleeding (ectopic pregnancy, ovarian apoplexy - poor circulation in the internal reproductive organs (the torsion stem tumors and tumor formations ovarian torsion and / or necrosis of myoma node); acute inflammatory diseases of internal genital organs with involvement in the process of the peritoneum. The aim of the work was to demonstrate the frequency of gynecological diseases in girls occurring in the clinic of an acute abdomen. In the National Center of Pediatric Surgery |N. Georgiou" from 2004 to 2009 were operated on 126 children with pathology of the internal female genital organs, hospitalized with clinical acute abdomen. Among them are marked 59 (47%) children with apoplexy of the ovary, 52 (41%) with ovarian cysts, 21 (16,6%) with a uterin

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