Difficulties of pulmonary metastasectomy resections in pediatric patients.

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Difficulties of pulmonary metastasectomy resections in pediatric patients.
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Introduction:
Complete resection of metastatic disease can prolong life in pediatric patients with osteosarcoma. An aggressive surgical treatment is recommended in which all metastatic disease is resected.

Materials:
We retrospectively reviewed the medical records of 71 children who were operated on in the Department of Surgical Oncology for Children and Youth between January 2000 and December 2014. Seventy one children (42 boys; 29 girls; median age 16 years, range 6-23 years) who underwent pulmonary metastasectomy resection were included in the study.

Results:
A total of 117 thoracotomies were performed. In 32%(37) of them the resected lesions were benign in histopathological examination
65% of the resected malignant lesions were 5 mm and less in size.
What we found in lesions that weren’t malignant: fibrosis, inflammatory lesions, vascular changes, aletectasis, empyema, calcifications, thrombouses, reactive nodes;

Conclusion:
Chest CT cannot be reliable in distinguishing between benign and malignant pulmonary nodules, especially 5mm and less in size.
The inconsistency between CT scans and pathologic review needs new solutions to minimize unnecessary thoracotomy in pediatric patients with osteosarcoma.

Keywords : pulmonary metastasectomy, osteosarcoma, children
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