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ARE IDRFS GOOD PREDICTORS OF SURGICAL OUTCOMES FOR PATIENTS WITH ABDOMINAL NEUROBLASTOMA

Ahmed Awad

South Egypt Cancer Institute-Assiut University, Egypt

Background: Image defined risk factors IDRFs are risk factors, detected on images and make total tumor excision risky or difficult at time of diagnosis of pediatric abdominal neuroblastoma.

Objectives: To evaluate if the IDRFs detected by MDCT are good predictors of surgical outcomes in pediatric abdominal neuroblastoma.

Material and Methods: 40 cases with abdominal neuroblastoma were evaluated in a prospective study for the presence or absence of IDRFs using contrast enhanced multi-detector computed tomography (MDCT) and correlated with the surgical outcome.

Results: According to the pre-operative MDCT, patients classified into two groups; group I have no IDRFs included 18 patients (45%) while group II, had one or more of the IDRFs included 22 patients (55 %). In group II when one or more of the IDRF were present, patients received neoadjuvant chemotherapy in the form of three courses of OPEC alternating with OJEC chemotherapy, complete excision of the mass was done in only 10 patients (45.5%), incomplete excision was done in 12 patients (54.5%). While group I who had none of the IDRFs in their pre-operative MDCT study, complete resection of the mass was feasible in all of the patients (100%).

BIOGRAPHY

Ahmed Awad currently works as the Lecturer of Surgical Oncology and Director of Endoscopy unit at South Egypt Cancer Institute-Assiut University-Egypt. He earlier worked as a Visitor researcher at the Department of Gastroenterology at Aichi Cancer Centre Hospital Japan.

ahmed_awad721@yahoo.com

