

Treatment of Malignant Bone Tumors

Pediatric Orthopedic Department
University of Basel, Switzerland



Treatment Concept in high-grade malignant bone tumors (osteosarcomas, Ewing-sarcomas)

Chemotherapy



1

2

3

4

5

6

7

8

9

months



Biopsy



Surgery



Ewing-sarcoma:
ev. irradiation

Types of resection

radical

wide marginal intraleisional

tumor

wide or
radical

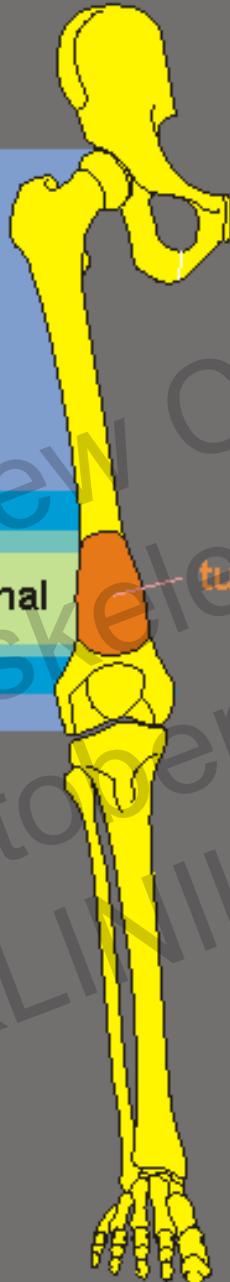
R0

marginal

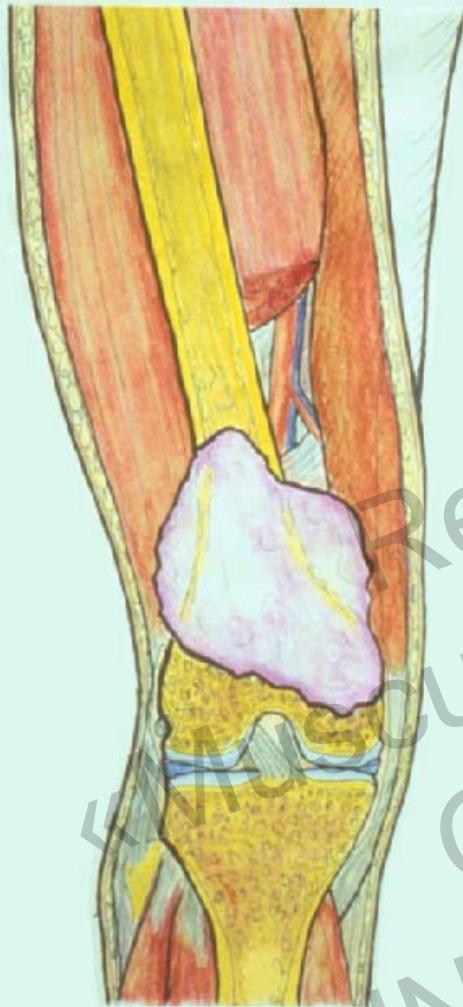
R1(R2)

intralegio-
nal

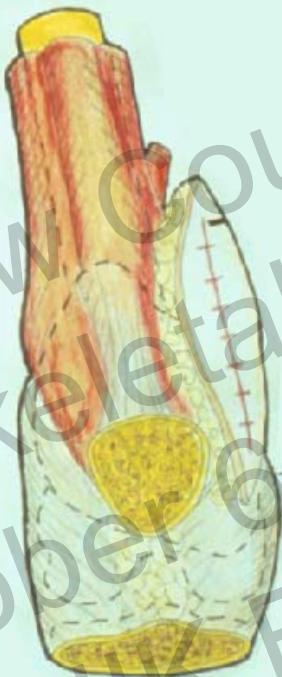
R2



***Principle of
wide
resection***

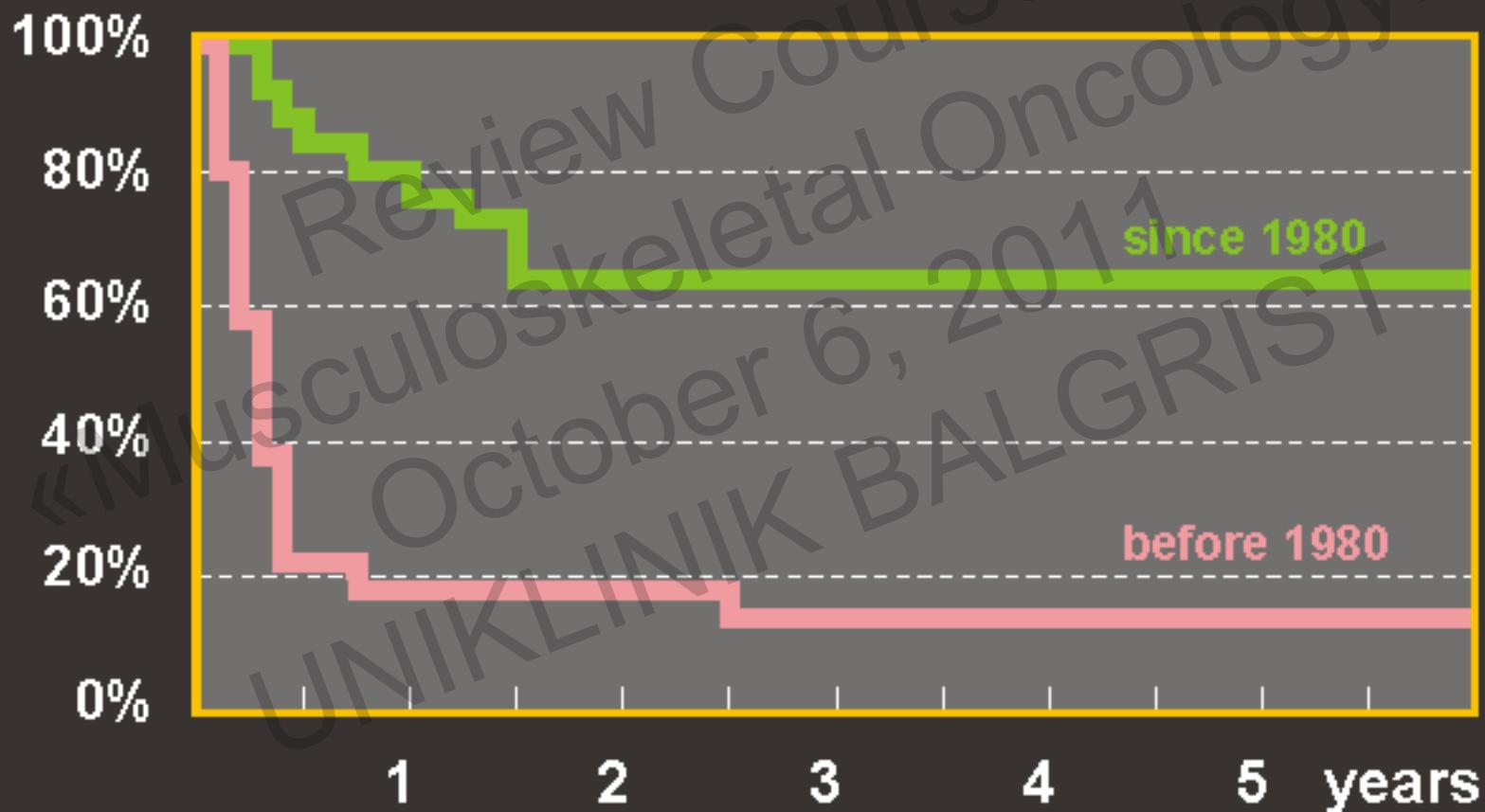


Frontal section

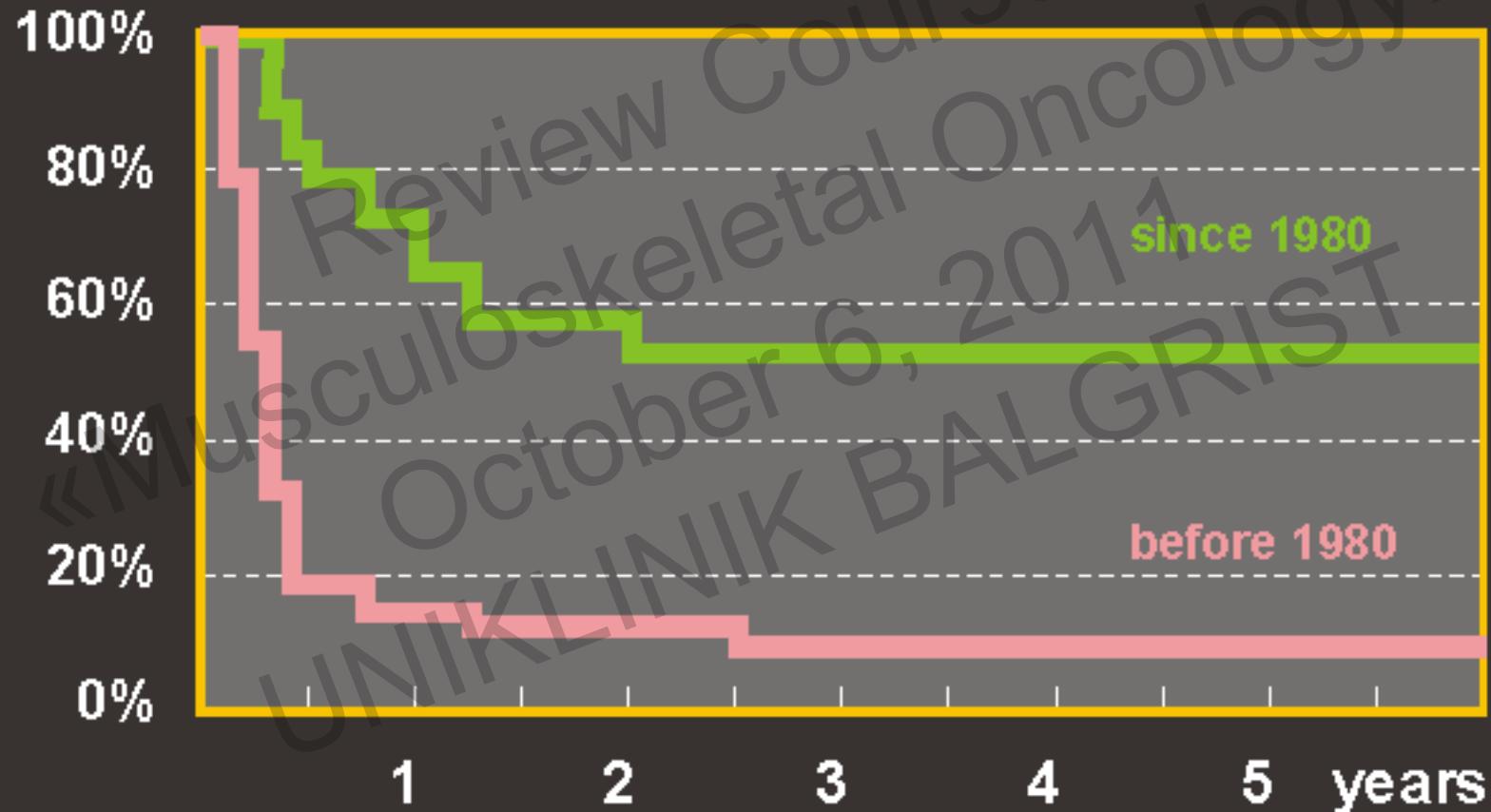


reseected
piece

5-year survival in osteosarcomas



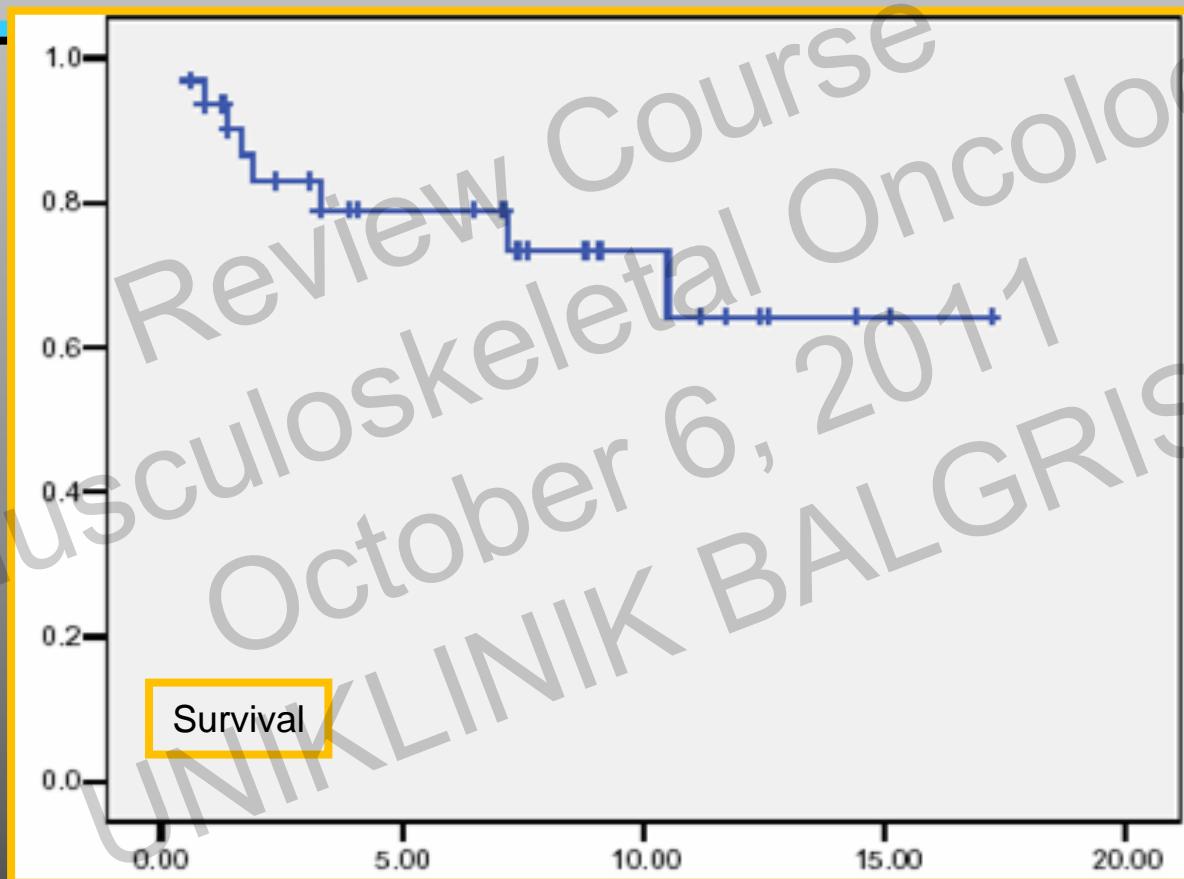
5-year survival in Ewing-sarcomas



Results in Ewing-sarcomas (n = 32) UKBB Basel

Overall survival = 75%

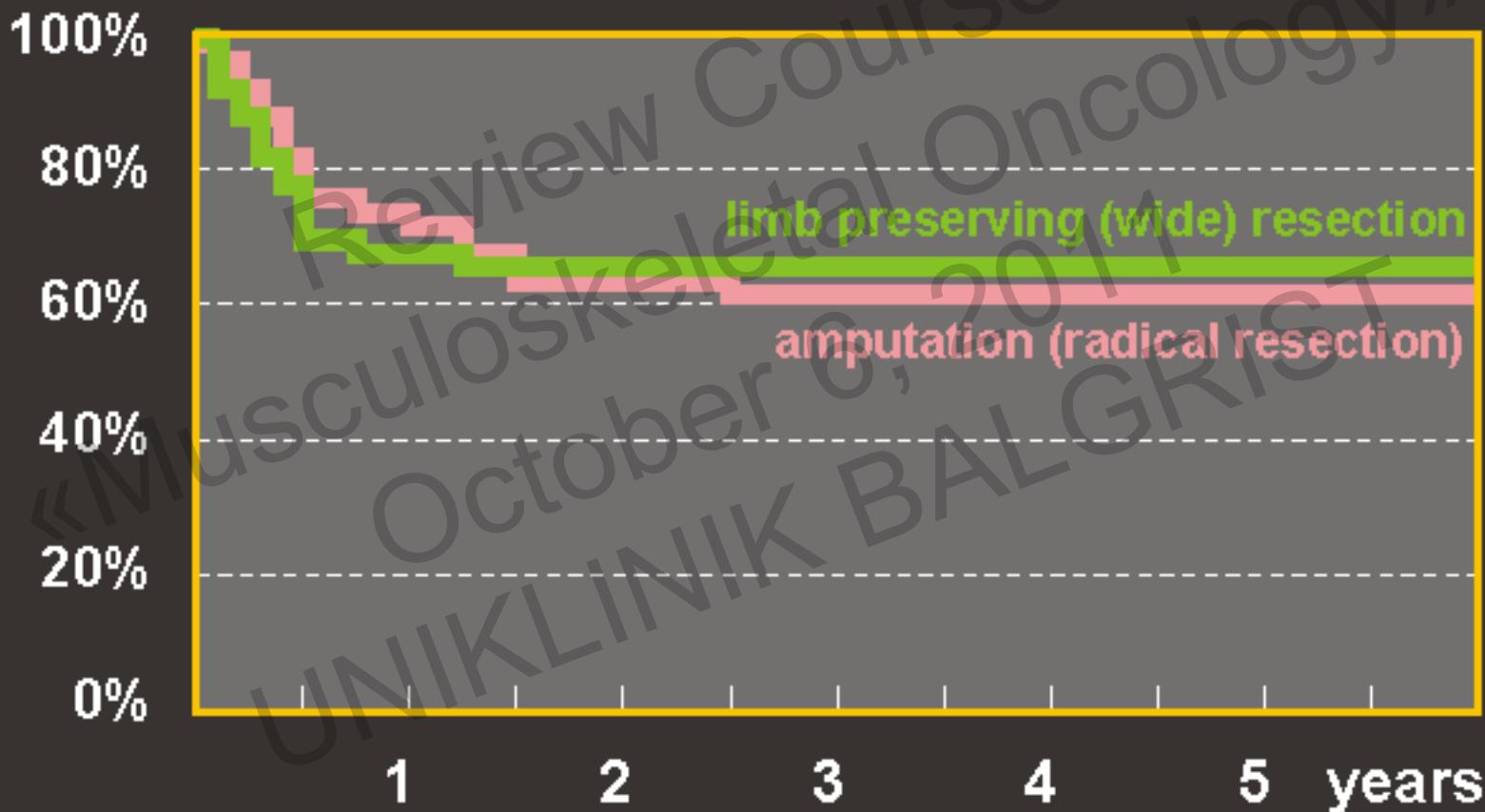
Krieg, Paulussen, Hefti: Results of treatment of Ewing's sarcomas at a single institution in Switzerland - Birmingham 2008)



5 year survival rate = 79 %

10 year survival rate = 73.4 %

Survival rate according to type of resection



Options for reconstruction

- **autologous bone**
 - extracorporal irradiation
- **homologous bone (allograft)**
 - combination with autologous bone
- **endoprostheses**
 - combination with allograft
- **special techniques (Joint transfer,
rotationsplasty etc.)**

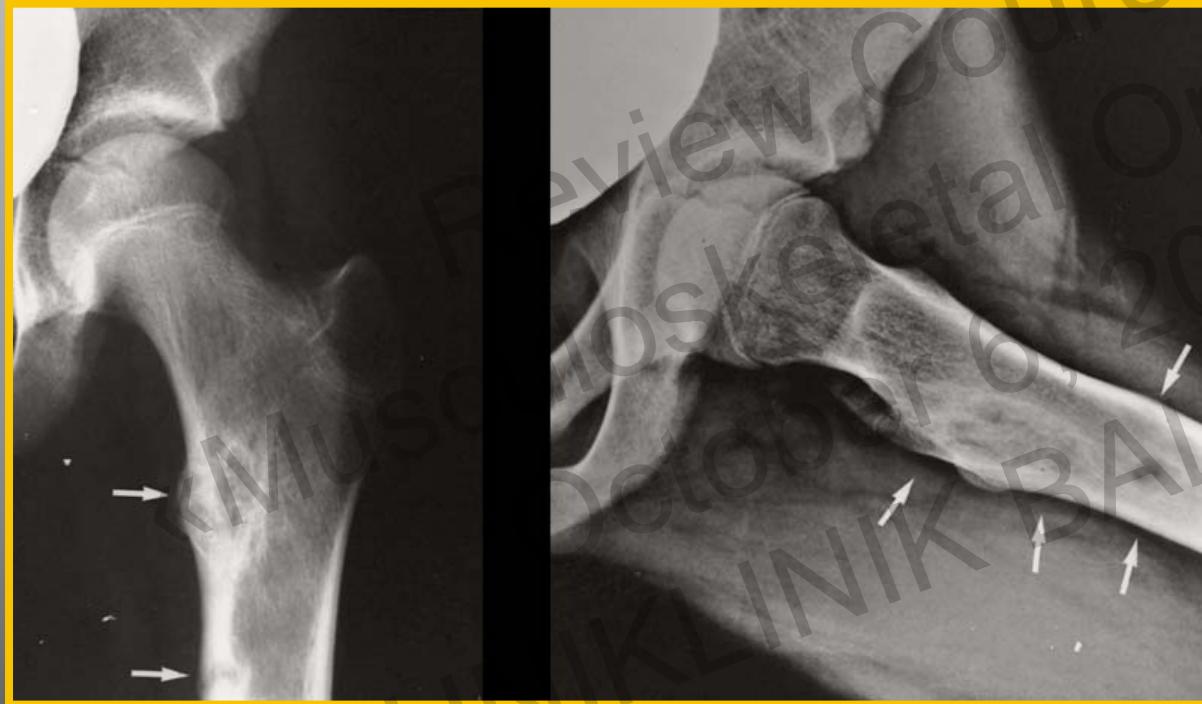
Options for reconstruction

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 - combination with autologous bone
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- **special techniques (Joint transfer,
rotationsplasty etc.)**

Options for reconstruction

- **autologous bone**
 - non-vascularized
 - vascularized
 - extracorporal irradiation

Low-grade chondrosarcoma



S.M.

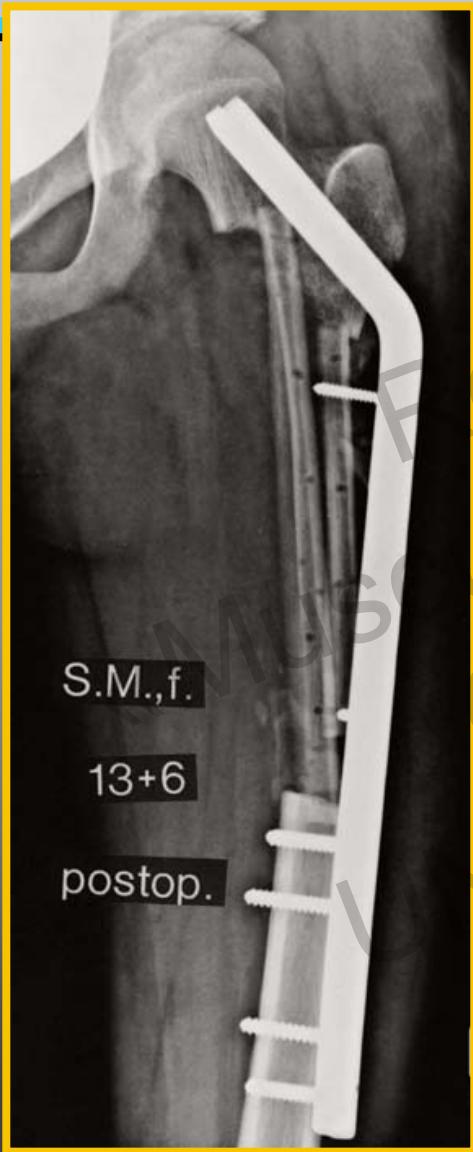
13+6

S.M. f., 13+6



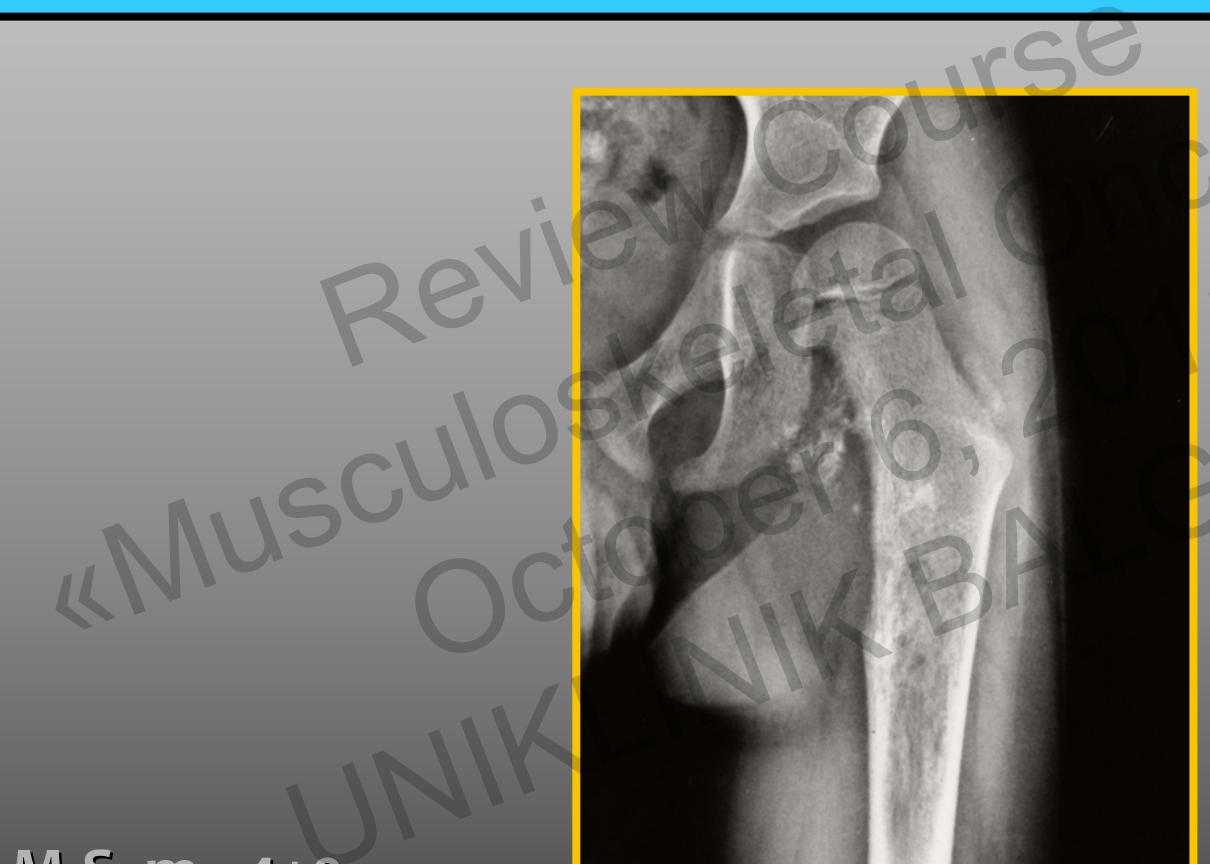
Options for reconstruction

autologous bone (non vascularized fibula)



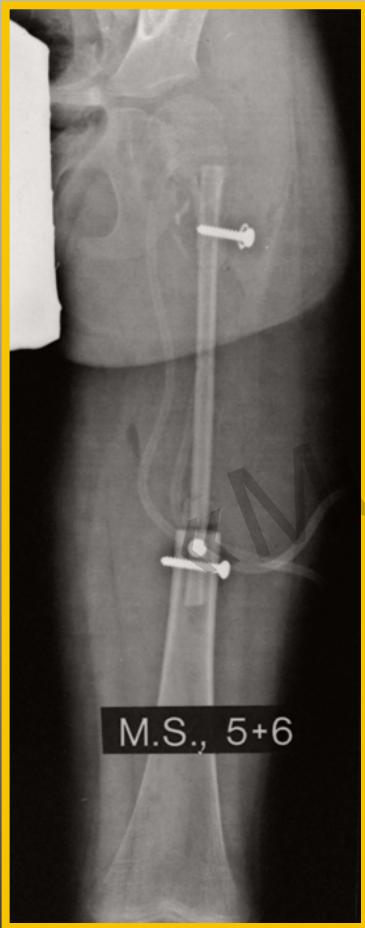
Hemangiopericytoma

(low-grade malignant tumor)

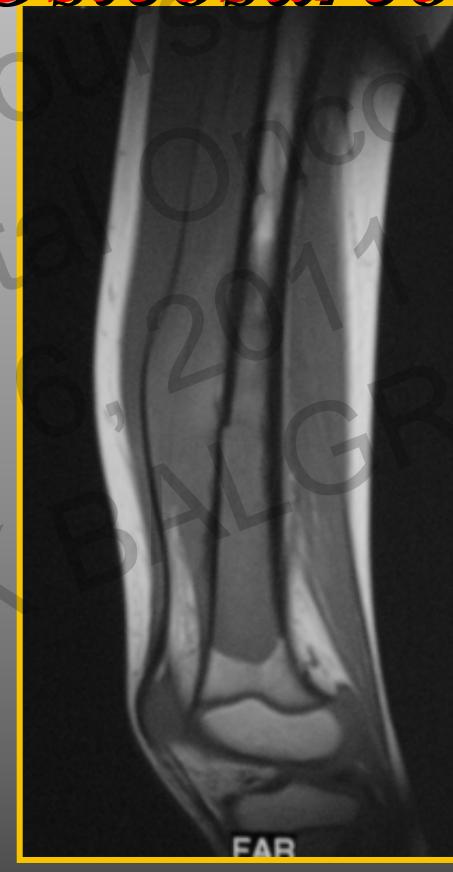


Options for reconstruction

non-vascularized autologous bone



Options for reconstruction



Osteosarcoma

K.O. m. 8 J.

Options for reconstruction

vascularized autologous bone

Osteosarcoma



K.O. m. 8 y.



6y. postop.



In which cases do we use vascularized instead of non-vascularized bone?

- poor soft tissue coverage (forearm, lower leg, hand, foot)
- restricted possibilities for fixation (tumor close to the epiphysis)
- failure of non-vascularized bone (non-union)

Options for reconstruction

- **autologous bone**
 - extracorporeal irradiation
- **homologous bone (allograft)**
 - combination with autologous bone
- **endoprostheses**
 - combination with allograft
- **special techniques (Joint transfer,
rotationsplasty etc.)**

Options for reconstruction extracorporal irradiation and reimplantation

Ewing-sarcoma



D.B., m. 7 y.



Options for reconstruction

extracorporal irradiation and reimplantation

Ewing-sarcoma



D.B., m. 7 y.

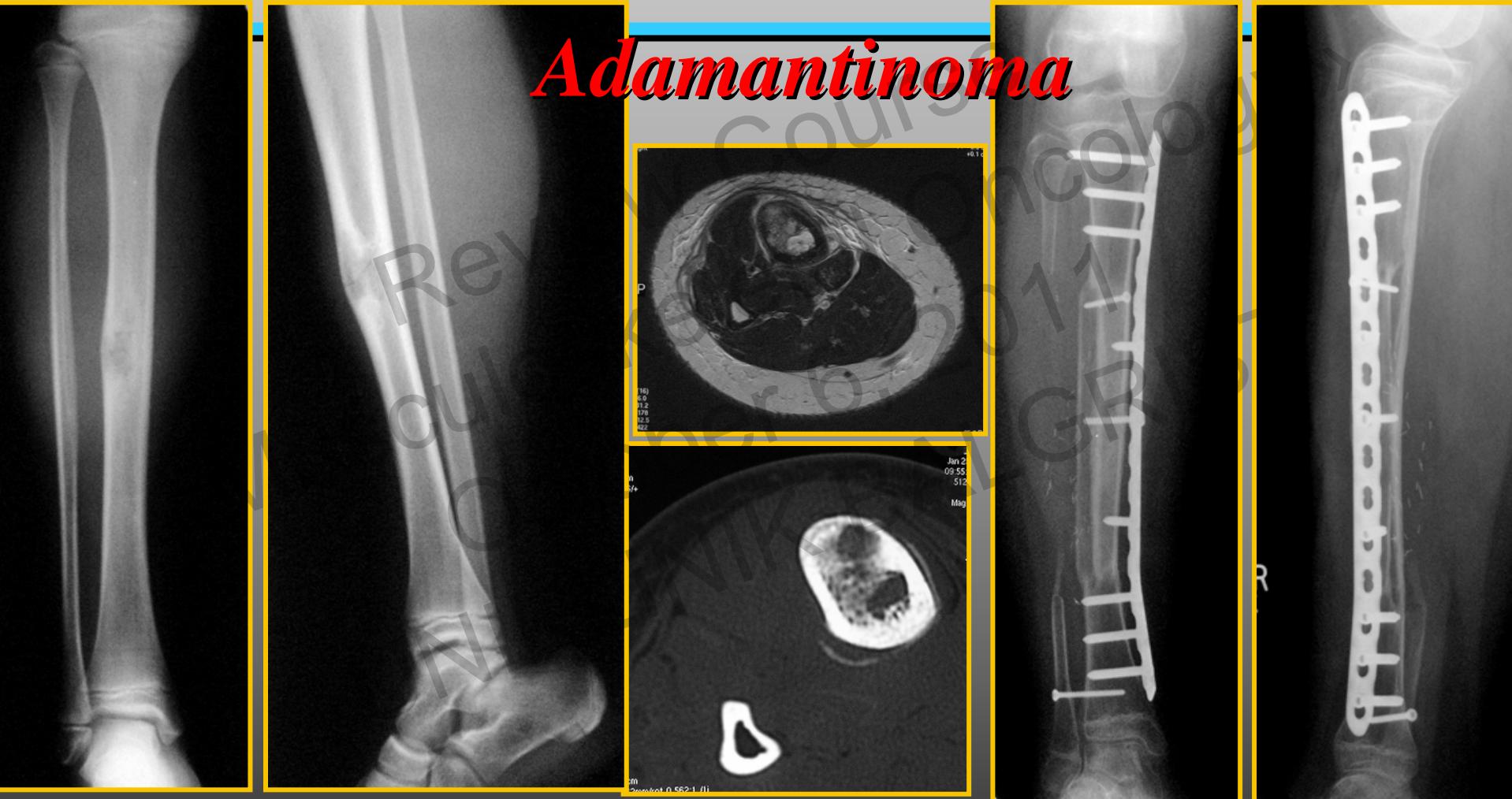


6 months postop..

Options for reconstruction

extracorporal irradiation and reimplantation (in combination with vascularized fibula)

Adamantinoma



L.T., w. 12J.

6 Mon. postop.

Options for reconstruction

- autologous bone
 - extracorporal irradiation
- homologous bone (allograft)
 - combination with autologous bone
- endoprostheses
 - combination with allograft
- special techniques (Joint transfer,
rotationsplasty etc.)

Options for reconstruction

allograft



Fibro-cartilaginous mesenchymoma



V.K. m., 12+2



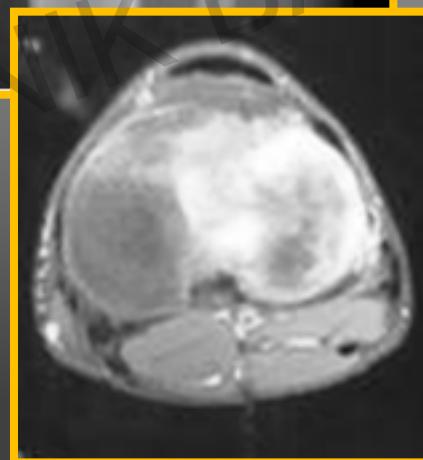
2 y. postop



Options for reconstruction

- autologous bone
 - extracorporal irradiation
- homologous bone (allograft)
 - combination with autologous bone
- endoprostheses
 - combination with allograft
- special techniques (Joint transfer,
rotationsplasty etc.)

Osteosarcoma



S.J., m., 19 years

MUTARS® tumor endoprostheses

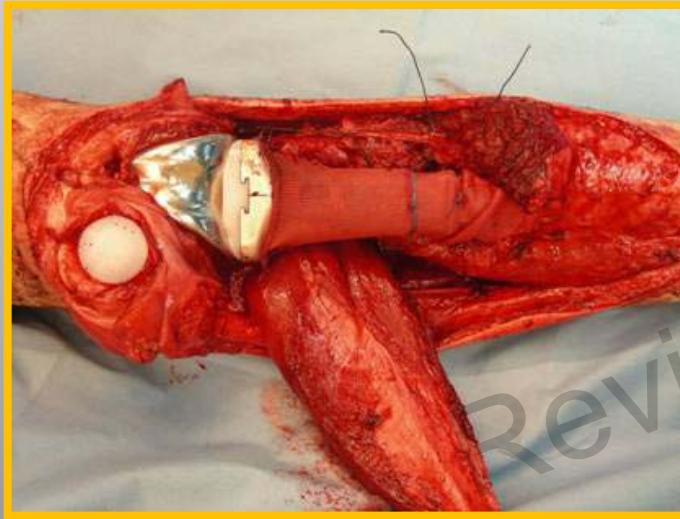
Universitäts-Kinderhospital
BB



- modular system
- rotating hinge knee joint
- antiinfectious silver coating
- attachment tube



Endoprosthesis with attachment tube

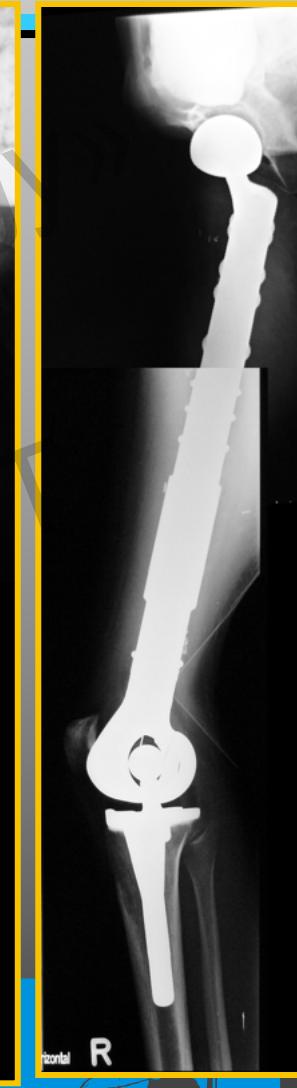
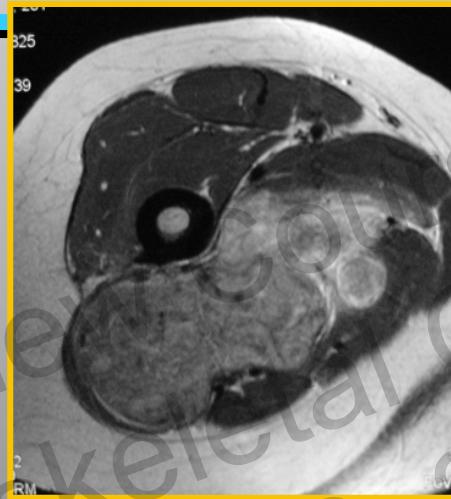
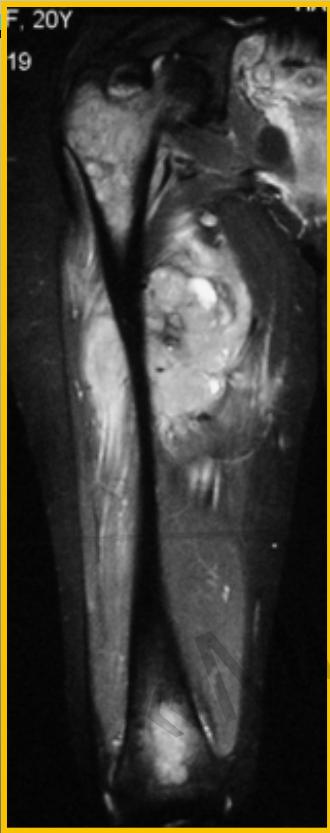


S.J., m., 19 years



Options for reconstruction

total femur endoprosthesis



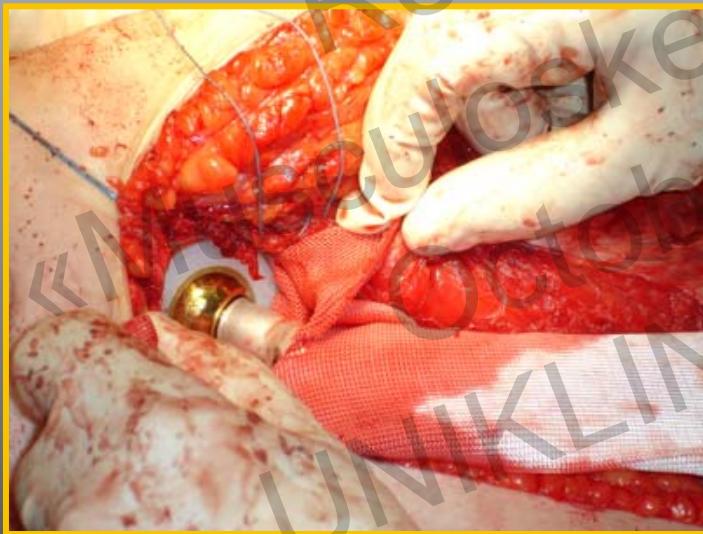
J.K. w., 20y.

Ewing-sarcoma



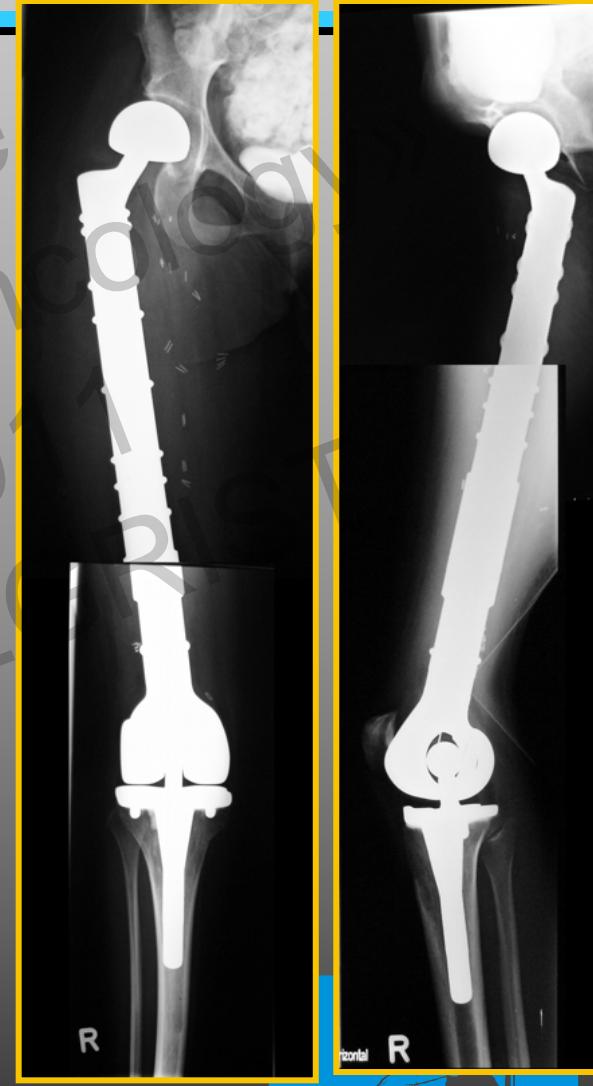
Options for reconstruction

total femur endoprosthesis

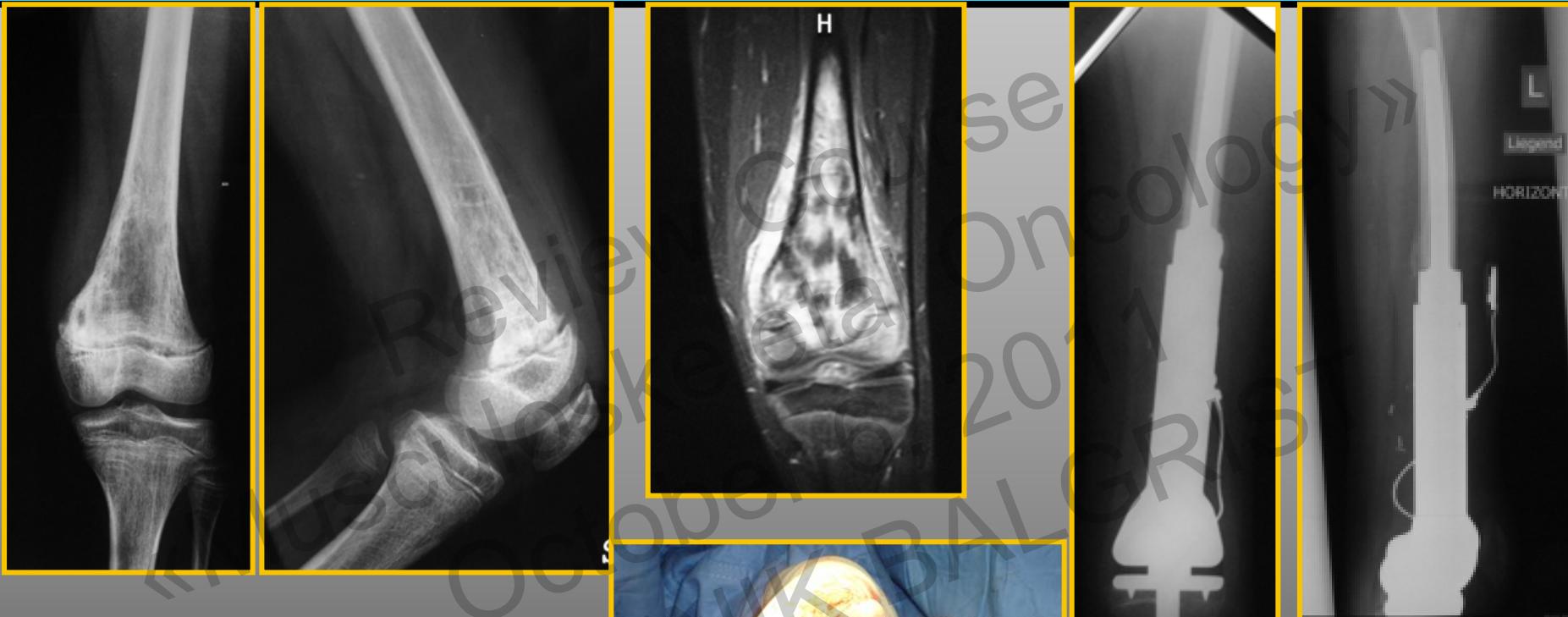


J.K. w., 20y.

Ewing-sarcoma

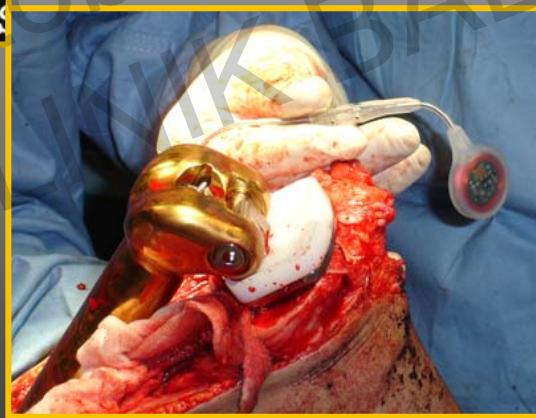


Options for reconstruction expandable endoprosthesis (principle of Fitbone)



M.R. m., 12+3

osteosarcoma



Mutars® Xpand

- non-invasive lengthening (via electromagnetic signal)
- lengthening modules as custom implants
 - maximal lengthening: 5cm



Options for reconstruction

- autologous bone
 - extracorporal irradiation
- homologous bone (allograft)
 - combination with autologous bone
- endoprostheses
 - combination with allograft
- special techniques (Joint transfer,
rotationsplasty etc.)

Options for reconstruction rotationplasty



I.B. m., 9+6

osteosarcoma

Options for reconstruction rotationplasty



I.B. m., 10+5

osteosarcoma

Options for reconstruction

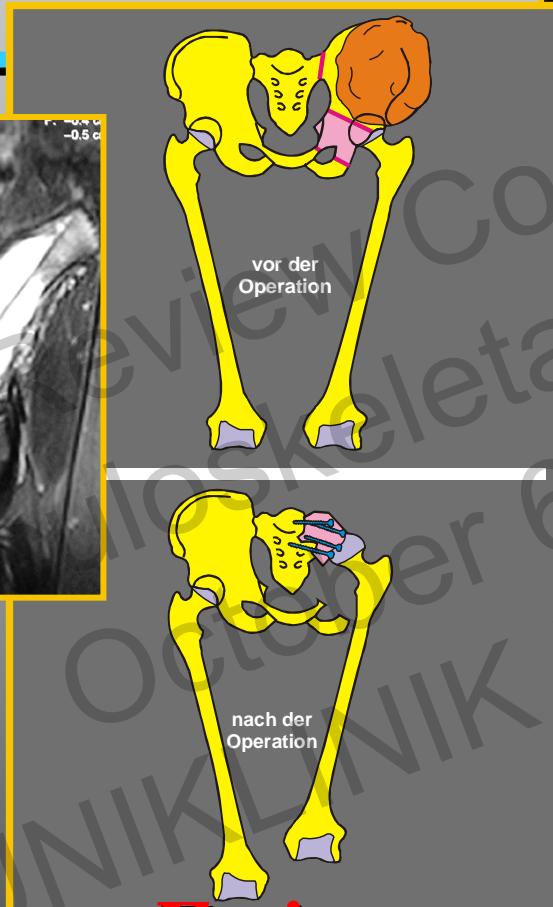
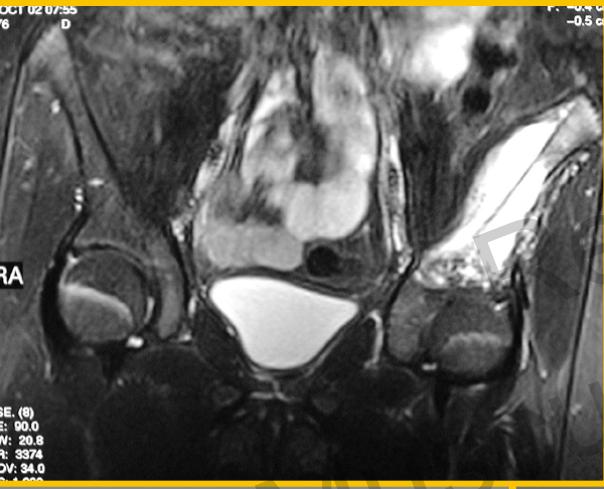
Clavicula-pro-humero-plasty



H.S., f. 14+8

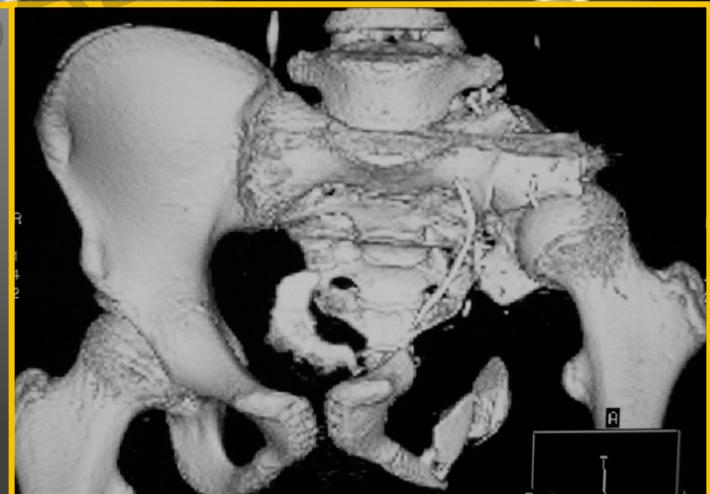
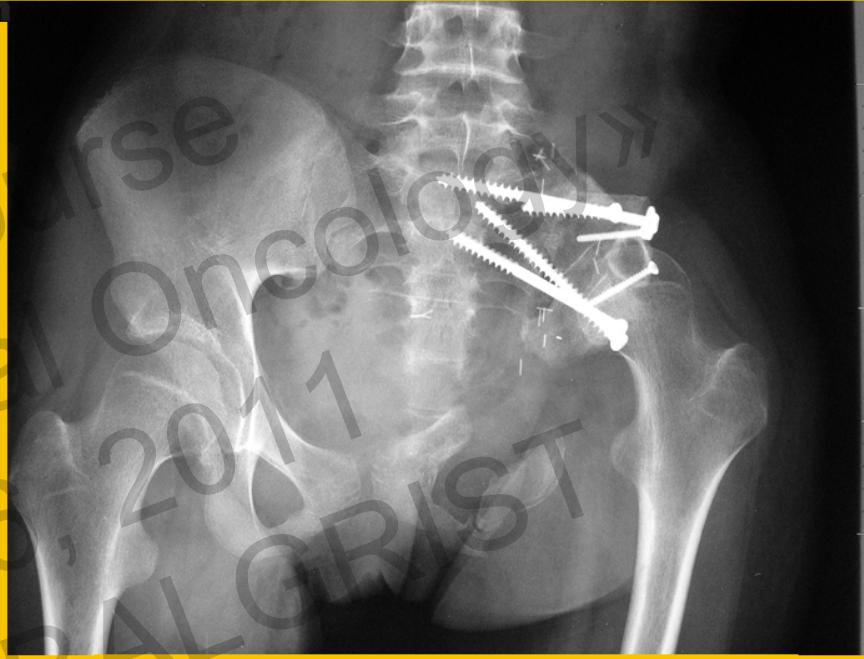
Options for reconstruction

Hip joint transfer to the sacrum



N. M., f., 13+4

*Ewing-
sarcoma*



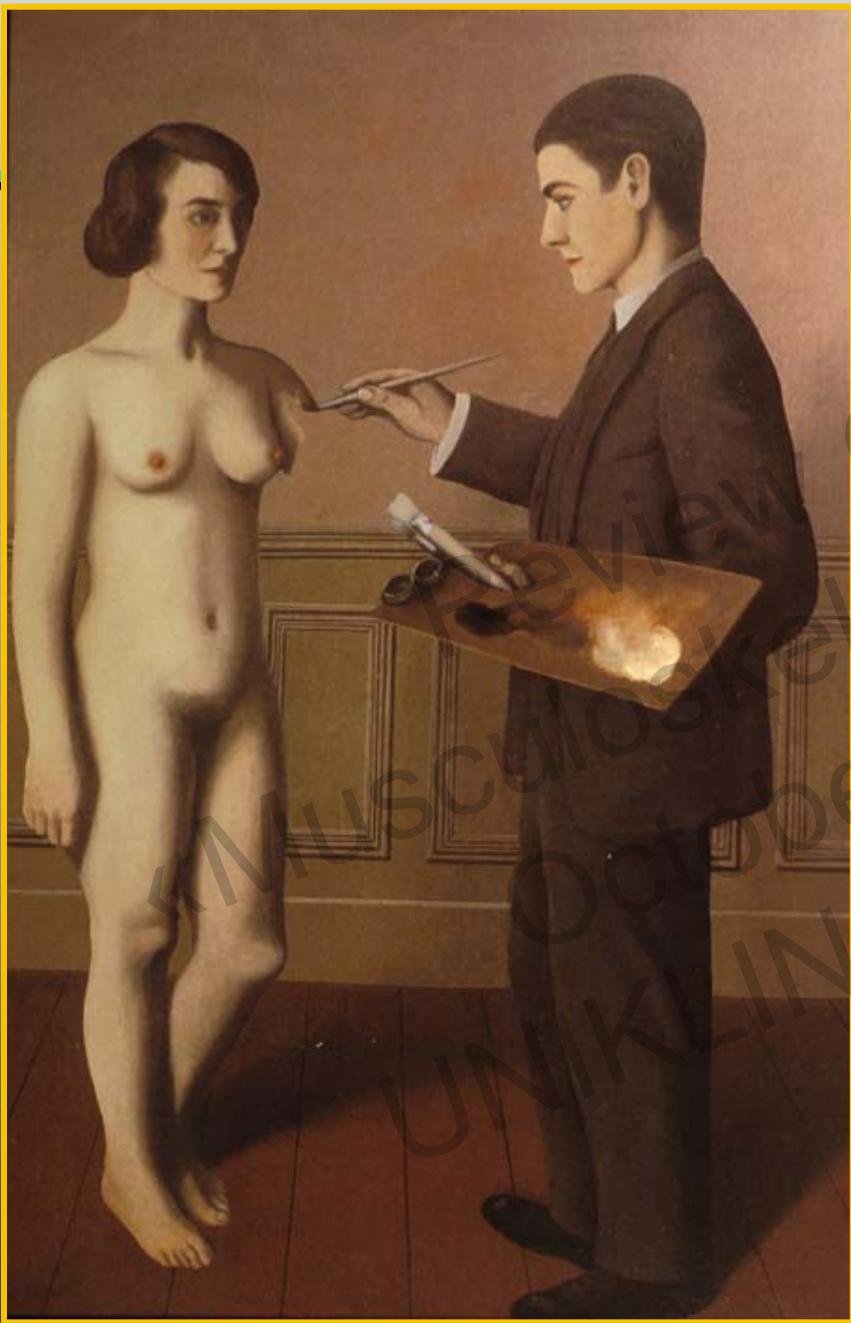


Lengthening with Fitbone- nail after hip joint transfer

N. M., f., 19y.



Cosmas and Damianus 300 AD



René Magritte 1928:
La tentation de l'impossible

Substitution of missing parts

