IS-011  Preoperative chemotherapy in advanced Wilms’ tumor: effectiveness and feasibility. Experience from Bangladesh

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Purpose: Many children present with advanced stage of Wilms’ tumor in developing countries like Bangladesh. Larger size and metastasis extensions in vital organs make surgery difficult and may result is catastrophic consequences. Preoperative chemotherapy could reduce the size to a respectable level. Hence conducted a study to see the rate of resectability of locally advanced Wilms’ tumor after neoadjuvant chemotherapy.

Methods: Prospective study from September 1999 to November 2000. Ten patients were enrolled with advanced Wilms’ tumor (tumors with intracaval and aortal extension, size more than 10cm X 9cm with ultrasonographic (US) evidence of paraaortic lymph nodes involvements). Diagnosis was confirmed by FNAC. Preoperative chemotherapy was given for one month with Vincristine Actinomycin D and Cyclophosphamide. The patients were followed up every 2 weekly by US to assess the reduction of tumor size. Then post chemotherapy radical nephroureterectomy was done after 2 weeks. Data analysis done by SPSS version 9.0. Results: Tumor was significantly reduced in 8 patients both clinically and by US. The change in the metastatic lesions was also compared by US at the same time. Two patients died during the course of neoadjuvant chemotherapy from septicemia Tumor of 8 patients was completely resected after one month with uneventful postoperative recovery.

Conclusion: Preoperative chemotherapy makes the unresectable Wilms’ tumor totally resectable. This can be easily practiced in developing countries with limited resources. And now this approach is being followed in our institute.