

Gastrointestinal Stromal Tumors: A clinicopathologic study of 67 cases

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ABSTRACT

Is to study the clinicopathologic aspects of Gastrointestinal Stromal Tumors (GISTs) with correlation between surgical resection, pathological characteristics; disease free survival (DFS) and overall survival (OS) for all cases in a combined retrospective and prospective study. A retrospective study for 33 patients with GISTs at the National Cancer Institute, Minia Oncology Center and Fayoum Teaching hospital between January 2001- December 2006 and a prospective study for 34 patients at the National Cancer Institute, Minia oncology center and Fayoum Teaching hospital between January 2007 - January 2011. All patients were evaluated pre-operatively and underwent exploratory laparotomy with surgical resection for curative intent; they were followed up for a period ranging from 24 to 60 Months. Among the 67 patients, there were 25 males and 42 females; 77.61% of patients were above 40 years. Abdominal pain (40.3%), abdominal mass (38.8%) and GIST bleeding (34.8%) were the main presentations. The stomach was the most common site of origin of the disease (49.3%) followed by small intestine (28.4%). Tumors were high grade in (70.1%) and low grade in (29.9%). Complete resection of all gross disease was accomplished in 53 patients (79.1%) and residual disease in 14 patients (20.9%). Overall survival and disease free survival were statistically significant in relation to the size of the tumor, the grade of the tumor, and the resection status. Complete surgical resection, including en block resection of locally advanced tumors, remains the only curative treatment for GISTs. The overall survival and disease free survival were significantly affected by size of the tumor, grade of the tumor and the resection status.

Keywords: Gastrointestinal stromal tumor — Sarcoma - CD117 - CD34 — Imatinib - surgical resection.