



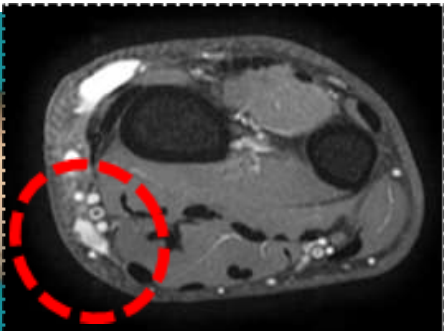
Unplanned Excision of Soft Tissue Sarcoma of the Wrist

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Purpose : Case report of Malignant Peripheral Nerve Sheath Tumor (MPNST) in the area of the wrist

Materials and Methods : A 42-year-old man observed swelling at the radial side of the R wrist, progressively worsening. The patient recalled a wrist injury 2 months ago. MRI Imaging without contrast showed possible hematoma vs sarcoma. In open surgical debridement, a solid mass was found, which was removed for the most part. The biopsy revealed sarcoma of the sheaths of the peripheral nerves G2. Magnetic resonance imaging a month later revealed residual disease in close contact with the radial artery and the extensor tendons of the thumb.



A radical resection of the remaining tumor was performed, including skin size 7x11 cm, the distal radial artery, the abductors and the short extensor of the thumb.

The FCR tendon was transferred to the thumb abductors and the soft tissue defect was restored with a free radial flap harvested from the left forearm. The anastomosis was performed centrally, end-to-end with the radial artery of the right forearm. The donor area of the forearm was covered with a skin graft from the thigh.

Result: The patient had an uncomplicated postoperative course. Radiotherapy 54G initiated six weeks postoperatively. One year postoperatively he has full wrist and thumb movement and soft tissue healing. The patient is free of local and systemic disease.

Conclusion: Sarcomas with a relatively small diameter may look like benign lesions. Incomplete resection requires a new surgical resection of the existing surgical field. Flap coverage and postoperative radiotherapy are often required to ensure a low rate of local recurrence.

