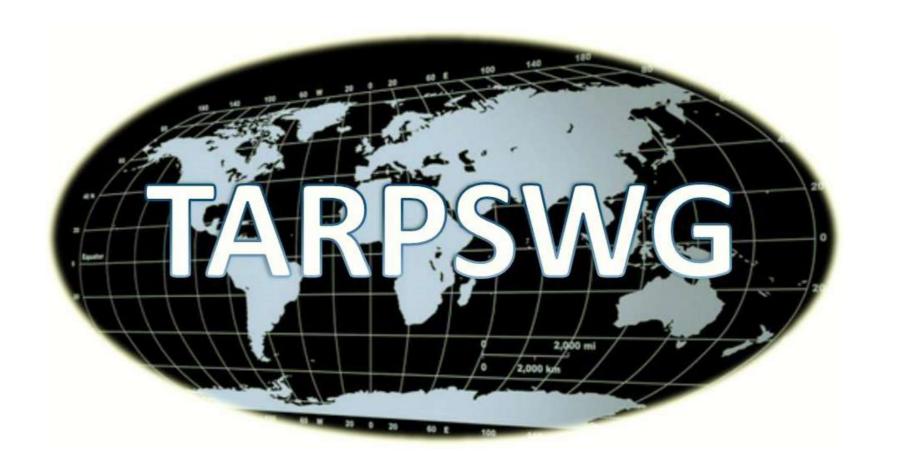
Prediction of Morbidity Following Surgery for Primary Retroperitoneal Sarcomas Using a Surgical Complexity Score: An Analysis within the Retroperitoneal Sarcoma Registry (RESAR)

PI: Alessandro Gronchi, M.D.
Fondazione IRCCS Istituto Nazionale dei Tumori
Milan, Italy

Co-PI: Mark Fairweather, M.D.
Brigham and Women's Hospital, Dana-Farber Cancer Institute
Harvard Medical School, Boston, MA

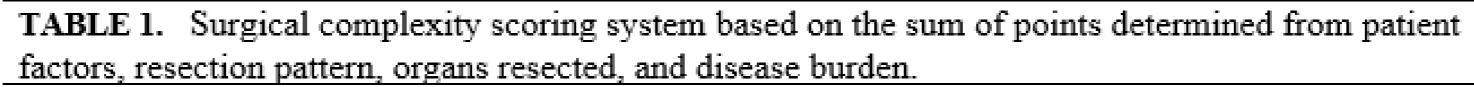


Study Aim:



To develop a surgical complexity score for patients undergoing surgery for primary retroperitoneal sarcoma and evaluate its ability to predict 30-day postoperative morbidity (Clavien-Dindo grade \geq 3)

- RESAR patients January 1st, 2017- July 1st, 2020 (?)
- Data transfer forms being finalized
- Update RESAR datasets with date of complication out to 30-days postop



Patient Factors	Score	Organs resected	Score
Age ≥65	1	Liver	1
Diabetes	1	Psoas muscle	1
Body mass index ≥30	1	Psoas fascia	0
Hypertension/coronary artery disease	1	Femoral/sciatic nerve	1
ECOG score ≥2	1	Colon (left, right, transverse)	1
Chronic obstructive pulmonary disease	1	Rectum	1
Chronic kidney disease	1	Adnexa or spermatic cord	1
Neoadjuvant chemotherapy/radiation	1	Uterus	1
Resection Pattern		Parietal muscle	1
Vascular resection	4	Diaphragm	1
Pancreaticoduodenectomy ^a	4	Kidney	1
Colon, kidney, spleen, pancreas +/- other	1	Adrenal gland	0
Disease Burden		Bone	1
(cumulative size of resected tumors)		Pancreas	1
Low (<10cm)	0	Spleen	1
Medium (10-20cm)	1	Iliac vein	1
High (>20cm)	2	Inferior vena cava	1
Surgical Complexity Score		Small bowel	1
Low	≤5	Stomach	1
Intermediate	6-9	Duodenum	1
High	≥10	Iliac artery	1

Pancreaticoduodenectomy organ count includes duodenum/pancreas only.

