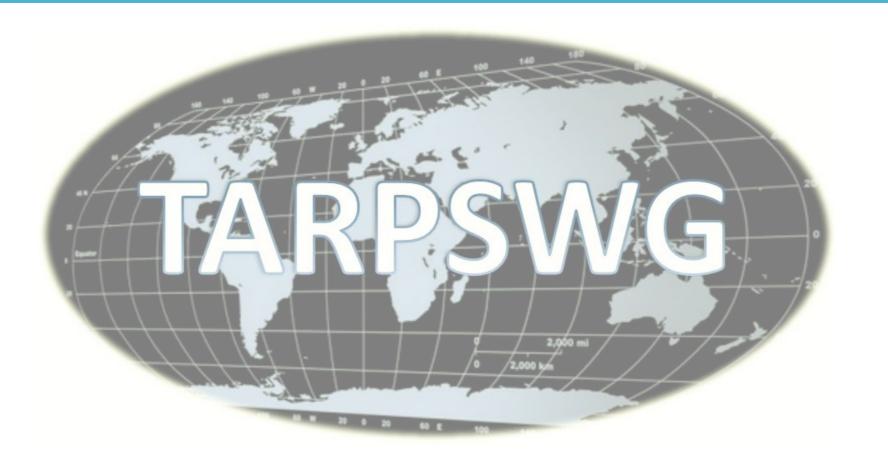
Patterns of Recurrence and Clinical Outcomes Following Surgery for Primary Retroperitoneal Leiomyosarcoma

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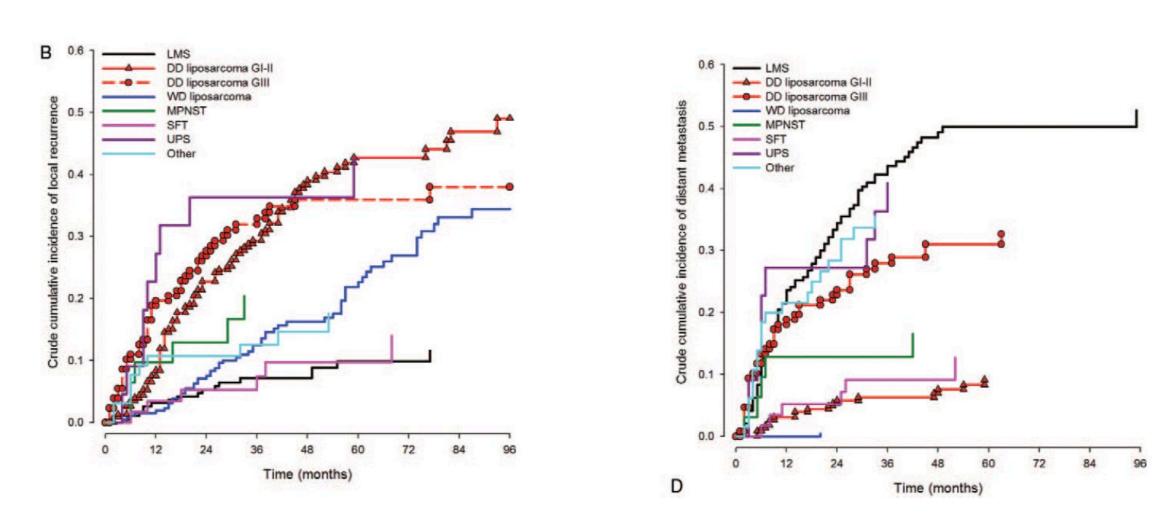
Co-PIs: Alessandro Gronchi, MD; David Gyorki, MD; Sam Ford, PhD



Background



- Primary retroperitoneal LMS: 20/25% of all RPS.
- LMS are characterized by aggressive oncological behaviour and poorer long-term overall survival compared to other histologies (low risk of local recurrence, but very high risk of distant metastases).
- Previous literature reports old data (e.g. 2002 2011).
- Aim: to analyze contemporary outcomes and patterns of recurrence in patients undergoing surgery for primary retroperitoneal LMS.



Gronchi et al. 2016, Ann Surg

Methods



- Primary objective: To describe overall survival (OS), local recurrence (LR), and distant metastasis (DM) following surgery for primary LMS. Compare with previous study by Gronchi et all. to assess improvement over time.
- Secondary objectives: To assess additional potential prognostic factors beyond established ones (e.g. tumour grade), with a particular interest on:
- preoperative chemotherapy. Specifically, the overall response to chemotherapy and outcomes will be evaluated as well as the response to different chemotherapy regimens.
- anatomical origin of the tumour (e.g., vascular origin such as from the inferior vena cava or renal vein).
- preoperative biopsy accuracy.

Methods



- Population of interest: LMS operated on between 2016 2024 (RESAR).
- Additional data fields: exact tumour's origin (e.g. gonadal vein etc).

Statistics

- OS for the cohort will be assessed using Kaplan-Meier curves, with rates of LR and DM quantified using competing-risks regression models with death, LR and DM as the three competing events.
- Consistency of tumour grading between preoperative biopsy and postoperative histology will be quantified using percentage agreement and weighted Kappa statistics.
- Multivariable Cox regression models will then be used to identify independent prognostic factors, with the anatomical origin of the tumour and use of preoperative chemotherapy being of particular interest.

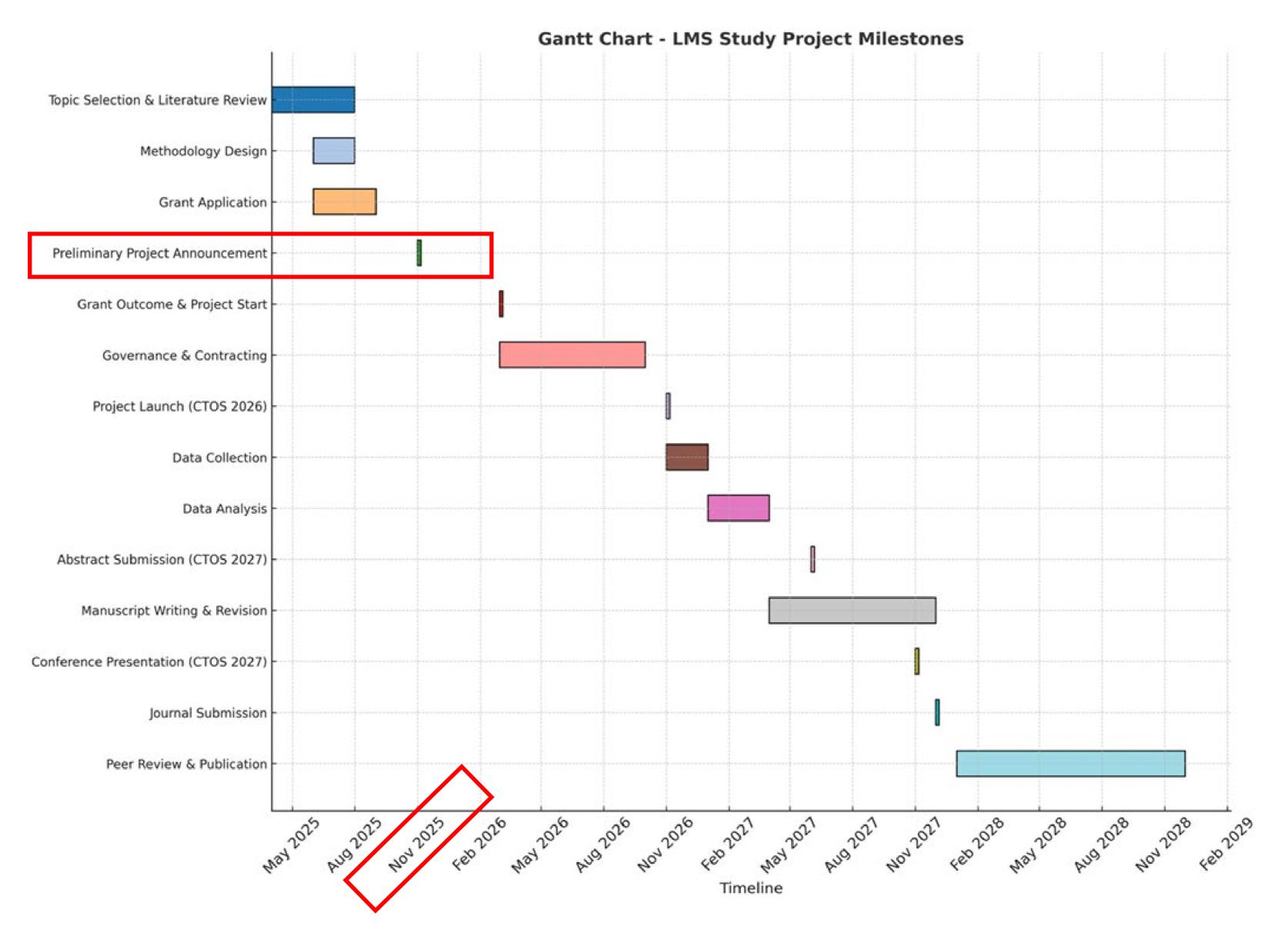
Importance



- Largest reported series of outcomes for patients treated for primary retroperitoneal LMS.
- To identify prognostic factors, either confirming those already known or uncovering new ones.
- To evaluate whether preoperative chemotherapy is associated with improved outcomes.
- Help to design new clinical trials based on our findings.

Plan







Plan

• Application submitted to the RESAR governance committee in July 2025

Join us!



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