Don't Give Up Unless Exhausted: Recurrence Shoulder UPS

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INTRODUCTION:

Undifferentiated pleomorphic sarcoma (UPS) is a high-grade soft tissue sarcoma and it is one of the most common soft tissue sarcoma in adults. The standard care of treatment is surgical excision with microscopically negative margin. Radio and chemotherapy have been described as adjuvant treatment in UPS.

CASE REPORT:

Our patient is a 67-year-old male patient who presented with right shoulder swelling for 1 month duration which rapidly increasing in size. Examination revealed a 6cm x 6cm firm swelling over the right deltoid region which is attached to the skin and underlying muscle. After MRI he was planned for biopsy but unfortunately the patient seek treatment in a private GP where an intralesional excision was done. He presented again with recurrence swelling and biopsy revealed UPS. Systemic staging showed multiple lung metastases and decision of palliative chemotherapy was taken and subsequently lung nodules improved, and wide excision was done. The patient had 5 times recurrence and surgical excision in which only after the final surgery patient had chance before radiotherapy can be initiated due to wound complications from other surgeries. Repeated systemic staging showed sub centimeter lung nodules which is likely due to disease progression. His shoulder is currently tumor free for 10 months.

Figure 1: Wound Complication and Recurrence



Figure 2: Healed



DISCUSSIONS:

Surgical excision is the only choice of treatment for local control of STS, and it is potentially curative. Radiotherapy is used when surgical margin is closed while chemotherapy is in advanced stages of disease. In a report adjuvant RT reduced mortality and metastatic disease in 68% and 66% of UPS patients while chemotherapy evidence is still insufficient.

CONCLUSION:

In conclusion, we suggested surgeons try their best to get good local clearance of tumor when possible.

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Malaysian Orthopaedic Journal 2023 Vol 16, Supplement A

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