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Endovascular embolization with nephron-sparing surgery (NSS) for treatment of nephroblastoma in children: A case report and literature review

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Objective: The objective of this study was to report the endovascular embolization combined with nephron-sparing surgery for treatment of nephroblastoma in one child.

Methods: We analyzed the clinical and follow up data of one case of nephroblastoma children treated with endovascular embolization and NSS in our hospital in November 2017. (Patient data: boy, admitted to hospital for abdominal mass for two days, abdominal CT: right renal neoplastic lesion, the size was about: $10 \times 8 \times 8$ cm, with expansion adjacent to the inferior vena cava, which was seen with soft tissue density filling, considered of nephroblastoma with thrombus in inferior vena cava.) CTA showed that the right renal arteriovenous vein entered the mass, and the filling defect was visible near the inferior vena cava. After admission, the patient was discharged with chemotherapy with vincristine and dactinomycin. After three weeks, the tumor did not show a significant reduction by ultrasound, but no tumor thrombus was seen in the inferior vena cava.

Results: The child was admitted to hospital for vascular interventional embolization therapy of cancer and a week later, abdominal ultrasound showed that the tumor shrank significantly, then NNS was performed and during operation we found that the tumor was easy to remove. It was clearly defined at the boundary and blood supply was sparse. During operation, no low temperature treatment and vascular-disruption were subjected to the residual kidney. Postoperative chemotherapy was continued according to the course of treatment. Follow-up of five months showed no recurrence and metastasis of the tumor.

Conclusions: Endovascular embolization has a positive effect on the NNS, but it still requires a large number of clinical samples for treatment data and long-term follow-up results for evaluation.