



Neoadjuvant Radiation Therapy versus Resection Alone in the Management of Non-Metastatic Retroperitoneal Soft Tissue Sarcoma

Elizabeth Y. Wang*

Department of Urology, Columbia University Irving Medical Center, US

INTRODUCTION

Incidental retroperitoneal paraganglioma is a rare tumor that arises from the paraganglia cells located in the retroperitoneal area [1]. These tumors are often asymptomatic and discovered incidentally during imaging studies done for unrelated reasons. Although rare, incidental retroperitoneal paragangliomas have several advantages over other types of tumors [2]. In this article, we will discuss some of the benefits of incidental retroperitoneal paragangliomas. One of the significant advantages of incidental retroperitoneal paragangliomas is their benign nature. These tumors are typically non-cancerous and grow slowly, and do not spread to other parts of the body [3]. They also tend to be well-encapsulated, making them easier to remove surgically. This benign nature of the tumors means that patients with incidental retroperitoneal paragangliomas have a much better prognosis than those with other types of cancerous tumors [4]. Although most incidental retroperitoneal paragangliomas are benign, there is still a risk of malignancy. The exact prevalence of malignant paragangliomas is unknown, but studies suggest that they account for approximately 10% of all paragangliomas [5]. Malignant paragangliomas can spread to other organs, leading to further complications and reducing the chances of successful treatment. Another advantage of incidental retroperitoneal paragangliomas is that they are often asymptomatic, meaning that patients do not experience any symptoms until the tumors grow large enough to cause pressure on surrounding tissues or organs [2]. This lack of symptoms means that patients can be diagnosed earlier, allowing for earlier treatment and a better outcome. Furthermore, because these tumors are often discovered incidentally during imaging studies done for unrelated reasons, patients may not have to undergo any additional testing or diagnostic procedures, re-

ducing the overall burden on the patient and the healthcare system.

DESCRIPTION

The biggest disadvantage of incidental retroperitoneal paraganglioma is that it often goes undiagnosed until it reaches a later stage [4]. Since these tumors are asymptomatic, patients may not be aware of their presence until they start experiencing symptoms such as abdominal pain, weight loss, and fatigue. By this time, the tumor may have grown in size, making it more difficult to treat effectively [1]. Additionally, incidental retroperitoneal paragangliomas tend to be easily identifiable on imaging studies. These tumors typically have a characteristic appearance on Computed Tomography (CT) scans and Magnetic Resonance Imaging (MRI), allowing for easy and accurate diagnosis. This makes it easier for healthcare professionals to determine the appropriate treatment course and ensure that the tumor is completely removed during surgery [3]. Surgical resection is the primary treatment for incidental retroperitoneal paragangliomas, and this procedure has a high success rate. Because these tumors are often well-encapsulated and non-cancerous, surgical removal is typically curative, and patients have an excellent chance of full recovery. Additionally, because these tumors are often discovered incidentally, patients may not have to undergo any additional treatment or therapy, reducing the overall burden on the patient and the healthcare system [5]. Furthermore, because incidental retroperitoneal paragangliomas are rare, they can provide valuable learning opportunities for healthcare professionals. Studying these tumors can help healthcare professionals better understand their biology, growth patterns, and treatment options, potentially leading to better outcomes for patients in the future.

Received:	02-January-2023	Manuscript No:	IPBJR-23-16360
Editor assigned:	04-January-2023	PreQC No:	IPBJR-23-16360 (PQ)
Reviewed:	18-January-2023	QC No:	IPBJR-23-16360
Revised:	23-January-2023	Manuscript No:	IPBJR-23-16360 (R)
Published:	30-January-2023	DOI:	10.21767/2394-3718.10.1.08

Corresponding author Elizabeth Y. Wang, Department of Urology, Columbia University Irving Medical Center, US, E-mail: eyw_2107@cumc.columbia.edu

Citation Wang EY (2023) Neoadjuvant Radiation Therapy versus Resection Alone in the Management of Non-Metastatic Retroperitoneal Soft Tissue Sarcoma. Br J Res. 10:08.

Copyright © 2023 Wang EY. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

CONCLUSION

In conclusion, incidental retroperitoneal paragangliomas have several advantages over other types of tumors. These tumors are typically benign, asymptomatic, easily identifiable on imaging studies, and have a high success rate for surgical resection. Additionally, studying these rare tumors can provide valuable learning opportunities for healthcare professionals. While incidental retroperitoneal paragangliomas are rare, their benefits are clear, making them an important area of study for healthcare professionals and researchers alike.

ACKNOWLEDGEMENT

None.

CONFLICT OF INTEREST

The author declares there is no conflict of interest.

REFERENCES

1. Bray F, Ren JS, Masuyer E, Ferlay J (2013) Global estimates of cancer prevalence for 27 sites in the adult population in 2008. *Int J Cancer Suppl* 132(5): 1133-1145.
2. Brennan MF, Antonescu CR, Moraco N, Singer S (2014) Lessons learned from the study of 10,000 patients with soft tissue sarcoma. *Ann Surg* 260(3): 416-421.
3. Nathan H, Raut CP, Thornton K, Herman JM, Ahuja N, et al. (2009) Predictors of survival after resection of retroperitoneal sarcoma: A population-based analysis and critical appraisal of the AJCC staging system. *Ann Surg* 250(6): 970-976.
4. Chouliaras K, Senehi R, Ethun CG, Poultsides G, Tran T, et al. (2019) Recurrence patterns after resection of retroperitoneal sarcomas: An eight-institution study from the US Sarcoma Collaborative. *J Surg Oncol* 120(3): 340-347.
5. Singer S, Antonescu CR, Riedel E, Brennan MF (2003) Histologic subtype and margin of resection predict pattern of recurrence and survival for retroperitoneal liposarcoma. *Ann Surg* 238(3): 358-370.