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ENDOSURGERY IN THE DIAGNOSIS OF ONCOLOGY IN CHILDREN

D. Rvbkova¹, P. Kerimov¹, M. Kazantsev¹, M. Rubansky¹*¹children Oncology, Federal State Budgetary Institution «N.N. Blokhin Russian Cancer Research Center» under the Russian Academy of Medical Sciences, Moscow, Russia***Objectives:** To summarize and analyze the experience of use in the diagnosis of endosurgery neoplastic diseases in children.**Methods:** From 2007 to 2012, performed 161 diagnostic operations in 153 patients. Of them diagnostic thoracoscopy – 44, diagnostic laparoscopy - 63, thoracoscopic lung resections for the differential diagnosis of cancer with an infectious process – 53 operations and one-stage laparoscopy and thoracoscopy - 1 operation. The age of patients ranged from 2 months to 19 years (median 12.6 years)

Average time during laparoscopic operations was - 62min., thoracoscopic - 54 min. The mean blood loss during laparoscopy 61ml at thoracoscopy - 104ml. Intraoperative complications appeared in 5 cases out of 161 operations. In 3 cases there was bleeding from the tumor, the superior vena cava injury and wound duodenum 1 case. In 4 of 5 cases required conversions. In one case, bleeding from the tumor site was eliminated without resorting to conversion. In 8 cases identified postoperative complications. Surgical complications in 4 registrars patients: 2 cases evisceration omentum through an incision in peripharyngeal region, two cases pneumothorax; nonsurgical complications also occurred in 4 patients: two children, pneumonia, and one case of acute bronchitis and chickenpox.

Results: During two surgeries material for histological examination was not obtained, which required in one case re endosurgery operation and suddenly open surgery. In other cases, the material obtained for morphological examination. Use of narcotic analgesics (fentanyl, promedol) was needed during surgery and during the postoperative period first day. All patients received prophylactic antibiotic therapy. Average number of hospital days was - 4 ± 2 days.**Conclusions:** Thoracoscopy and laparoscopy allows you to perform a biopsy of tumors of the chest and abdominal cavity, retroperitoneal and pelvic cavity, and given the minimal invasiveness, short postoperative period and rapid recovery after such an operation may start special treatment as soon as possible after surgery.

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SAFETY AND DIAGNOSTIC ACCURACY OF TISSUE BIOPSIES IN CHILDREN WITH CANCER

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BILATERAL ANTERIOR STERNOTHORACOTOMY (CLAMSHELL INCISION) IS A SUITABLE ALTERNATIVE FOR BILATERAL LUNG SARCOMA METASTASIS RESECTION IN CHILDREN

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IMPROVEMENTS IN THE TREATMENT OF PATIENTS SUFFERING FROM EMBRYONAL BLADDER-PROSTATE-RHABDOMYOSARCOMA – A COMPARISON BETWEEN THE CWS-96 AND CWS 2002-P TRIALS

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WILMS TUMOUR NOT RESPONDING TO PREOPERATIVE CHEMOTHERAPY