

BM more often occur in cases of central, especially pelvic location of primary lesions (in 4 children of 6) than in cases of peripherally located primary tumor, but this difference is not statistically significant ($\chi^2 = 2.01$ $p = 0.18$).

Conclusion: It is our opinion medical professionals must be more aware of the possibility of BM in patients with ES (especially in central ES cases) and should conduct the appropriate diagnostic procedures to exclude it.

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PUBLICATION

About distribution of primary children's brain tumors in Kazakhstan

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The study of cancer etiology has shown that ecological trouble, radiation and other factors play a significant role in tumor development of some localization, and first of all, central nervous system. The main purpose of this study was revealing regularities of frequency and distribution of brain tumors in children of Kazakhstan (KZ).

During period 1980–1987 on the average 46 children with newly registered diagnosis of brain tumor are revealed annually in KZ. Brain tumors make 10–12% from common pediatric malignancy. Intensive index is 0.9 per 100 000 of children. Territorial distribution of this pathology is irregular. High brain tumor incidence is characteristic for Northeast regions – large industrial centers (East and North Kazakhstan, Pavlodar, Karaganda. Minimal rates of incidence were recorded in regions where the agriculture predominates.

Study of pediatric morbidity among various ethnic groups established that ratio of Kazaks and Russians was approximately identical.

Thus, the certain regularity in frequency of distribution of primary children's brain tumors in KZ is established. Brain cancer incidence is maximal in industrial developed regions and contiguous to Semipalatinsk nuclear range, and minimal in regions of traditional agrarian direction.

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PUBLICATION

Retinoblastoma in Kazakhstan between 1956–1990

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Purpose: To evaluate potential effect of different factors on retinoblastoma (RBL) incidence.

Methods: Archives of ophthalmological centers of Kazakhstan were analyzed. Principal means of the study were epidemiological (descriptive and correlational) methods. The indirect standardization was applied. The differences were evaluated for statistical significance. The level of disease incidence in Kazakhstan as published in official reports was taken as a standard.

Results: 363 cases of RBL were registered between 1956–1990 (200 boys and 163 girls). Intensive index was 0.22 ± 0.03 per 100 000 of children. For analyzing the disease dynamics during the period 1956–1990 we divided it to shorter periods of five years. Between 1986–1990 intensive index increased 3 times comparing to 1956–1960 and standard – 2.6 times. Incidence among boys and girls was approximately equal. For the period under study RBL dominated among children born in rural areas (in cities 2.89 ± 0.62 or $1:34000$, in rural areas – 3.69 ± 0.63 or $1:26000$). But this statistically is not trustworthy. All data taking into account the activity of the sun. Correlation between sun's activity and increase of RBL incidence was established.

Conclusion: Frequency of RBL among children in Kazakhstan was analyzed between 1956–1990. This analysis revealed positive correlation between sun's activity and RBL incidence. We should wait the sharp increase of tumor rate in the year of maximum sun's activity.

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PUBLICATION

Arthroplasty of the knee after resection of a sarcoma in children

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Purpose: The results of osteoplasty of the distal femur and proximal tibia in sarcomas were evaluated.

Methods: 41 patients (21 males and 20 females) aged from 4.5–16 years (mean age 10.64 years) were operated on. There were 34 osteogenic sarcomas, 2 giant cell malignant tumors, 1 chondrosarcoma, 1 fibrosarcoma,

1 reticulosarcoma and 1 Ewing's sarcoma. 29 tumors were situated in the distal femur and 11 ones were situated in the proximal tibia. In 35 cases, boiled down autografts and in 6 cases, allografts were used. 31 patients received polychemotherapy and 10 of them underwent radiation therapy.

Results: 8 patients with osteogenic sarcoma died of lung metastases. In 4 patients, limb amputation was done. Seven patients had graft fractures with subsequent union after conservative therapy and in one case after surgery. The remaining patients show good anatomic, functional and oncologic results.

Conclusion: Osteoplasty plus polychemotherapy for sarcomas was found to be optimal in children.

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PUBLICATION

3 cases of viral encephalitis in pediatric oncohematologic department in patients at the end of chemotherapy treatment

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Purpose: Infectious complications caused by opportunist microorganisms during intensive chemotherapy remain great problem because of high mortality level. Analysis of their frequency and pts outcome helps in developing adequate supportive management

Materials: 3 patients with oncologic diseases under different phases of chemotherapy (1st with ALL during intensification; 2nd with RMS during the last chemotherapy cycle; 3rd with neuroblastoma on the 1st maintenance CT-cycle) with age of 6 y 6 m, 1 y 8 m and 5 y correspondingly. NMR-imaging procedure was informative in 2 from 3 cases (1st – with diffuse picture and 3rd one – with nodular involvement). Serologic investigations were successful in 1 from 3 cases, but all pts had Herpes Zoster and/or Herpes Symplex clinical manifestations just before or during course of encephalitis.

Results: Therapy by i.v. Acyclovir in dose $500 \text{ mg/m}^2 \times 3/\text{day}$ was used in all three cases, but was effective in 2 pts (1st and 3rd) with fast regression of encephalitic symptoms (convulsions, somnolence, headache, hypothermia). Autopsy in 2nd case revealed diffuse necrotic changes of brain.

Conclusion: Early using of high dose Acyclovir is useful for any case of encephalitic clinical picture in patient under long immunosuppressive therapy.

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PUBLICATION

Acute lymphoblastic leukemia: Therapy results in one Pediatric Oncohaematologic Center in Ukraine

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Purpose: Introducing of modern treatment strategy for children and adolescents with acute lymphoblastic leukemia was necessary for improvement the final results of their therapy and giving them chance for surviving.

Methods: Modern Protocol based on BFM-ALL-Strategy was used from January, 94 in Pediatric Oncohaematologic Department in Kiev Regional Oncologic Dispensary for 54 patients with ALL (34 boys and 20 girls), median age of group was 6 y 5 m (range 8 m – 18 y 3 m). Original BFM-Protocol was adopted to the conditions of the country (using of 1 g/m^2 MTX in M-phase instead of 5 g/m^2).

Results: pEFS of this group of patients for 61 month was 0.81 (SD = 0.07) with pS = 0.82 (SD = 0.07). Treatment failures: NR-1, ED-2, Death in Rem. – 4, Rel – 3; 2 patients were LFU; 44 were in CCR on 01.01.99.

Conclusions: Dramatic improvement of general therapy results was shown for children with ALL after introducing of modern therapy strategy. Additional consequence of this process was adequate training of staff and achieving experience for further development.

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PUBLICATION

Cefepim and ceftazidime in combination with amikacin in febrile neutropenia of childhood: Which regimen is more effective?

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The efficacy of amikacin ($800 \text{ mg/m}^2/\text{day}$ IV 1×1) in combination with either cefepim (150 mg/kg/day IV tid) or ceftazidime ($4500 \text{ mg/m}^2/\text{day}$ IV tid) in treating childhood febrile neutropenia was studied in 90 patients