

CJ3.

EVALUATION OF SARCOMAS SEEN AT THE GENERAL HOSPITAL KANDY FROM 1977 - 1984

M.R.D.M. SENANAYAKE, B.R.R.N. MENDIS*, L. BABAPULLE** AND G.J. PANAGODA

*Division of Microbiology, Department of Oral Medicine and Periodontology,
*Department of Oral Pathology, Faculty of Dental Sciences, University of Peradeniya,
**Formerly Department of Pathology, General Hospital, Kandy, Sri Lanka*

Sarcomas are malignant connective tissue tumors, growing very rapidly, invading and also destroying the surrounding tissues. An attempt was made to shed more light on this very important area.

The records of biopsies, which had been accessioned from Jan. 1977 to Dec. 1984 in the Department of Pathology, General Hospital Kandy, were analyzed for the entries on sarcomas. A total of 24679 biopsy records were scrutinized for this study. When the biopsy registers were analyzed a total of 118 biopsies were identified as sarcomas. Variable percentages of sarcomas were noticed during the investigation. These values are depicted in Table 1.

Table 1: The reported frequency of sarcoma in the General Hospital Kandy (1977 to 1984)

Year	1977	1978	1979	1980	1981	1982	1983	1984
No of biopsies	2697	3171	3531	4315	2554	2647	2851	2913
No of sarcomas	10	14	12	20	14	15	18	15
%	0.37	0.44	0.34	0.46	0.54	0.56	0.63	0.51
Mean % of sarcomas	0.47%							

Histopathological classification has revealed the presence of the following sarcomas in the biopsy records with varying numbers. These are muscle (30), bone cartilage joint (30), lymphatic tissue (27), fibrous connective tissue (11), soft tissue (09), nerve tissue (04), mesothelial tissue (01) and 06 were unclassified sarcomas. Further, the data were analyzed to ascertain the influence of the gender on the development of sarcomas. A distinct difference was noticed between males and females on the development of bone cartilage joint (M:F = 2.3:1) and lymphatic tissue (M:F = 2.7:1) sarcomas. However, a clear difference was not observed between males and females on the development of muscle, fibrous connective tissue, soft tissue, nerve tissue and mesothelial sarcomas. Further, six sarcomas remained as unclassified. The results further demonstrated that the bone cartilage joint sarcomas were common not only among young adult patients (> 20 yrs; 46.60%), but also in young patients (10 - 19 yrs; 46.20%). Children below nine years also developed bone sarcomas (6.6%). When muscle sarcomas were analyzed, 40% of cases were observed under the age of 39 years, 30 % of muscle sarcomas were observed between the age group of 40 - 49 years, and 30% of muscle sarcomas were noticed above the age of 50 years. 40 % of lymphatic tissue sarcomas were detected under the age of 39 years, 18. 50 % of lymphatic tissue sarcomas were demonstrated between the age group of 40 - 49 yrs, and 41.50% of lymphatic tissue sarcomas were noticed above the age of 50 years. In conclusion, it can be stated that sarcomas are rare tumors seen in the General Hospital Kandy. Sarcomas are seen in children, young adults and also in those over 50 years of age. Medical practitioners should be always watchful for these tumors in little children.