

Radical surgery removes half of pelvis, saves leg

March 22 2011, By Jackie Carr

During a radical surgery to treat a rare bone cancer, surgeons at UC San Diego Health System and Moores Cancer Center removed 50 percent of a patient's pelvis. Instead of amputating the connected leg, the surgical team, comprised of orthopaedic, vascular and urologic experts, saved the entire limb. The patient was able to walk with assistance five weeks after surgery.

"All I can tell you is that the pain was so bad. I could not walk for one month before my operation," said Carlos Ortiz, 62, a delivery driver. "Now the pain is gone, simply gone. I am so grateful."

Ortiz was diagnosed with a form of cancer called chondrosarcoma, the second most common bone [malignancy](#) affecting [older adults](#). This [cancer](#) is not responsive to chemotherapy or radiation. Surgery is the only treatment option, which, in 90 percent of cases, results in a disfiguring loss of the leg and part of the hip.

"It is an absolute joy to see Mr. Ortiz walk," said Dr. Anna A. Kulidjian, MSc, FRCSC, surgical oncologist in the Department of Orthopaedics at UC San Diego. "There was only a 10 percent chance his leg would be saved. These results represent the incredible efforts of a team of surgeons who operated for more than 14 intense hours."

During the operation to remove half the pelvis, the team freed the tumor and salvaged the leg. The growth was embedded in the pelvic bone, nerves and blood vessels and adjacent to critical structures such as the

bladder, bowel and prostate.

The surgeons disconnected the massive growth from its blood supply without disrupting critical blood flow to the buttock and leg. The leg muscle was then reconstructed and attached to the abdominal musculature. Over time, a combination of scarring and new muscle will hold the leg bone in place.

"Normally the only option for patients who undergo a hemipelvectomy, a partial removal of the [pelvis](#), is to use a wheelchair for the balance of their life. Prosthetics are not an option. Sadly, the loss of ambulation often leads to depression and a strain on the family," said Kulidjian. "By preserving his leg — in addition to urological and bowel function — Mr. Ortiz will be able to walk again, pick up his daughter, and return to his regular job. For me, there is nothing better."

The surgical team included Kulidjian and Drs. Nikhil Kansal, Scott Meyer and Christopher Kane.

Provided by University of California - Davis

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