Synovial sheath hamstring (About One Case)

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Introduction
Synovialosarcoma is one of the most common soft tissue sarcomas. Despite its name, the synoviolosarcoma does not seem to be of synovial origin, but is rather derived multipotent cells. Paradoxically, the more often it is tumors that are within distance joints. Synovialosarcoma is in order of frequency the third histological type among soft tissue sarcomas. The upper and lower limbs are most affected, particularly para-articular articulations. A large tumor regions manifest as mass of slow evolution, located deep. The diagnosis is mainly based on histology which is complemented by immune histochemistry and cytogenetics. Complete surgical removal of the tumor is the basis of treatment. Adjuvant radiotherapy for appears beneficial residual tumor. As for chemotherapy, it remains to be explored its role.

Discussion
Synovialosarcoma represents 5% to 10% of soft tissue sarcomas. It occurs in 90% of cases with age < 50 years. The lower member is reached more frequently than the upper member.
Surgery is the primary treatment modality as radiotherapy and postoperative chemotherapy allow better local control. Biopsy always precedes surgery. (1-2-3)

The evolution is characterized by the occurrence of local recurrence in 60% cases and especially lung metastases (75% cases). (4-5)

The survival was 55% at 5 years. The poor prognostic factors are tumor size > 5 cm or less, histological grade, poorly differentiated characteristics, surgical margins, presence of metastases. (6-7)

**Conclusion:**

The synovial sarcoma is a rare and severe disease requiring multidisciplinary coordination as well as between research teams to achieve therapeutic advances and deduce universal consensus.

**Bibliography:**