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以血管與腫瘤的解剖三維影像重建圖促進精確的術前計劃  
 Three-dimensional Reconstruction of Vascular-tumor Anatomy to Facilitate Accurate  
 Preoperative Planning

林建亨 黃俊麟 陳永芳 林建宏 何永仁 沈成忠  
 Lin-Ching Shen Huang-Heng Lin Huang-Chun Lin Yung-Fang Chen Chien-Hung Lin Yung-Jen Ho  
 師-Clung Shen 放射線部；中國醫藥大學  
 中國醫藥大學附設醫院, China Medical University Hospital, Taichung, Taiwan; China Medical University,  
 Department of Radiology, Taichung, Taiwan

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**PURPOSE:** A thorough understanding of vascular tumor anatomy is essential before surgery. The aim was to evaluate the efficiency of new three-dimensional (3D) reconstruction technique of vascular-tumor anatomy in preoperative planning.

**MATERIAL AND METHODS:** We reconstructed the three-dimensional (3D) CT images for surgeons preoperatively. The technique was to fuse 2 major anatomic aspects: surface-rendered semitransparent tumor with extra- and intrarenal arterial anatomy for renal tumors and surface-rendered semitransparent tumor with adjacent vital vessels and the possible feeding arteries for extrarenal tumor. Seven patients with a central small intrarenal tumor, 2 patients with a huge renal tumor and one with a big retroperitoneal tumor underwent 3D reconstruction. The demographics data, tumor size, operative method, pathologic result, hospital stay and complication were recorded.

**RESULT:** One patient was excluded due to brain metastasis and nephrectomy was not performed. The mean of patients' age was 50 yr (range: 36-68 yr), and tumor size was 9.3 cm (range: 2.6-20 cm). Two patients received radical nephrectomy; one is because patient's request and one is for huge mucinous cystadenocarcinoma of kidney after unroofing. Six patients received success partial nephrectomy and one underwent en bloc tumor resection with negative surgical margins and without complications. The average hospital stay is 6.75 days.

**CONCLUSION:** 3D image navigation precisely identified tumor specific arterial branches, thus facilitating accurate preoperative planning.

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腹腔外轉移性腫瘤的經皮冷凍治療：五病例經驗  
 Percutaneous Cryoablation for Extraperitoneal Metastatic Tumors: Initial Experience  
 with Five Patients

陳怡君 沈書慧 王家槐 李明勳 陳俊谷 周筱萍 邱怡友 張政彥  
 Yi-Chun Chen Shu-Huei Shen Jia-Hwia Wang Ming-Hsun Lee Chun-Ku Chen Hsiao-Ping Chou  
 台北榮民總醫院 放射線部  
 Department of Radiology, Taipei Veterans General Hospital, Taipei, Taiwan

**PURPOSE:** To evaluate the technical feasibility, safety and short-term outcomes of cryoablation in extraperitoneal metastatic tumors.

**METHOD:** We retrospectively review the patients with oligometastatic (number  $\leq 3$ , size  $\leq 3$  cm) extraperitoneal tumors treated with cryoablation in Taipei Veterans General Hospital from 2010 to 2013. The tumor characteristics, adapted techniques, complication, hospital days and the local tumor control rate were recorded.

**RESULT:** Total 5 patients were recruited in this study, including right obturator muscle (cervical adenocarcinoma metastatic), left paraaortic (two renal cell carcinoma, RCC; one ovarian cancer), left buttock (uterine leiomyosarcoma). The mean age was 55.8 years old (30 to 87years). During the procedure, special techniques were used including hydrodissection, balloon displacement, and preprocedure double J insertion in ureter. There was no major complication and one minor complication (hematoma). The hospital stay ranged from 2 to 5 days (mean 3.4days). The follow up period was 9 to 18 months (mean 13 months). All 5 patients achieved successful local control. One of our patients (uterine leiomyosarcoma) developed lung metastasis 9 months after the procedure.

**CONCLUSION:** Cryoablation is an effective treatment for local tumor control in selected patient with oligometastasis.

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