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### **Editorial**

# Mesenchymal Tumors–Sarcoma: A New AEC Work Group<sup>☆</sup>



### Tumores mesenquimales-sarcomas: un nuevo grupo de trabajo en la Asociación Española de Cirujanos

Mesenchymal tumors or sarcomas are rare tumors. They represent 22% of all cancer diagnoses, and their survival rate is worse than that of the most frequent cancers. Over the course of the last decade, different organizations, such as Rare Cancers Europe, have emphasized the need to activate healthcare policies aimed at improving patient access to adequate information, effective and early treatment, clinical treatment and research about sarcomas.2 In Europe, more than 27 000 new cases of soft tissue sarcomas are diagnosed annually, with an incidence in Spain of 3.1 cases per 100 000 inhabitants (2015).3 The recent "Joint Action on Rare Cancers" of the European Commission should be considered a positive step toward better integrating rare cancers within the framework of national cancer care plans.4 Soft-tissue sarcomas are a complex and rare type of cancer that encompasses a group of more than 70 different tumor subtypes.<sup>5</sup> Its complexity, heterogeneity, rarity and ubiquity make it necessary to have clear information on the different diagnostic-therapeutic strategies associated with each of the histological subtypes. Currently, there is clear evidence of a direct relationship between the quality and precision of the diagnosis and surgical treatment with the results obtained, both for disease-free survival and overall survival; surgery is of vital importance for these patients.6

En bloc resections, especially in non-compartment anatomical areas like the retroperitoneum, involve new strategies based on neoadjuvant pre-surgical treatments, highly aggressive surgical interventions and strict follow-up to frequent recurrences. 7-10 Likewise, in the treatment of mesenchymal tumors/sarcomas, the participation of an oncological multidisciplinary team (MDT) is essential, which should consist of radiologists, pathologists, biologists, surgeons, oncorradiotherapists, pediatric oncologists, medical oncologists, etc. 11 Currently, these MDT are absolutely essential for the

development of adequate strategies that are personalized specifically for each patient. The paradigm of this situation is soft tissue sarcomas, <sup>10</sup> gastrointestinal stromal sarcomas <sup>12</sup> and so-called "rare" sarcomas. <sup>13</sup> National referral centers for sarcomas, created from the governing bodies of national cancer care plans, are aimed in this direction. However, the lack of clear funding is a constant concern, as this hinders the development of multidisciplinary teams and permanent services at these hospitals. <sup>14</sup>

At the same time, the surgical planning of these patients requires significant transversality among the different specialist surgeons (oncological, orthopedic, vascular, plastic, pediatric, etc.). In turn, all these participants must be part of the MDT. Thus, this rare oncological pathological process needs special attention and interest on the part of specially dedicated surgeons. At the request of the current board of directors of the Spanish Association of Surgeons (AEC), we have been commissioned with launching a working group, which we have called the "Mesenchymal Tumors-Sarcomas" group, in order to unify all the concerns of the surgeons of the ACS interested in this rare and complex oncological disease.

At the last National Surgery Meeting in Malaga, a group of surgeons especially interested in the subject had the opportunity to meet and form an active work group of the AEC. All the attendees agreed to form a special interest group for this disease within the AEC. Its objective will be to inform all surgeons of the AEC of the most important and most relevant current issues about the diagnosis and treatment of sarcomas. Based on the need to treat these patients in a multidisciplinary manner, with singular surgical transversality, at experienced hospitals with an MDT, objectives can be defined for improvement and excellence in the obtained results, especially those related to patient survival. The

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creation of diagnostic-therapeutic guidelines, multicenter registries and national and international cooperation are, in our opinion, essential for the proper development of this working group. That is why one of the main future objectives of the group will be to contact and collaborate with other sarcoma-specific associative groups with common interests and synergies. Examples of these include: the Spanish National Sarcoma Research Group, with more than 10 years of existence (http://www.grupogeis.org); internationally, the European Society of Surgical Oncology and its European School of Soft Tissue Sarcoma Surgery (https://www.essoweb.org/european-school-of-sts/); and the international Connecting Tissue Oncology Society, with 20 years of experience (https://www.ctos.org/).

We were motivated by the offer made by the AEC board to develop publications that would inform surgeons about current diagnostic-therapeutic strategies in different groups of sarcomas. Likewise, we took note of the possibility of including sessions, oral communications, videos and a round table/symposium on "Controversies in Sarcomas" at coming meetings of the AEC. To this end, a work group has been set up with the intention of uniting the different surgical teams and trying to achieve adequate representation of the different Spanish autonomous communities, and consequently an improvement in this specific field of surgery of mesenchymal tumors. Therefore, we would like to take the opportunity to invite Spanish surgeons interested in the oncological area of sarcomas to actively participate in this new working group, especially our symposiums and periodic meetings, the publication of studies and national registries. Those interested can register with the group through the website of the AEC/Mesenchymal Tumor-Sarcoma Division. With your participation and collaboration, we will be able to achieve the objectives both society in general and the current AEC demand of us. Finally, I would like to thank the AEC and its current board of directors for approving the creation of this working group for mesenchymal tumors-sarcomas.

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