

Sacral Hemangiopericytoma Involving the Retrorectal Space: Case Report

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ISSN: 2070-254X

Introduction

Primary hemangiopericytoma (HP) of bone is rare, accounting for 0,1% of malignant primary bone tumors. Only a few cases of osseous hemangiopericytoma in the sacrum and involving the retrorectal space have been reported. We present such a case which was treated by surgical abdominal approach and radiotherapy.

Case report

A 42 years old woman suffered from low-back pain with radiation to the right leg and foot for two years. Physical examination revealed abnormal S1-S2 dermatome sensation. Digital rectal examination revealed a retrorectal mass. . CT of the pelvis showed an osteolytic lesion of the S1 and S2 right sacral ala and its extension into the retrorectal space. Magnetic resonance imaging of the pelvis showed a large sacral tumor with prominent mass. Abdominal approach resection was indicated after surgical staff. Pathologic exams revealed a hyper cellular spindle-cell tumor into a high vascular pattern. At immunohistochemistry the tumor is CD 34 positive, and negative for actine smooth muscle and C-kit. It was finally recognised to be a hemangiopericytoma. . Post operative MRI contol shows a residual sacral cavity communication with a retrorectal collection. Adjuvant radiotherapy has been indicated at about 45grays. Five month later she feels well.

Discussion

HP can arise in any part of the body owing to its vascular origin, but most frequently occurs in soft tissue. The ages of patients range from 12 to 90 years. Radiographic features are non specific, including osteolytic bone and cortical destruction with soft tissue extension. On histology HP cells typically cluster around numerous capillaries and usually contain round to oval nuclei. Immunohistochemistry (CD34) is helpful in the differentiation against other typical malignancies. Wide surgical excision is the treatment of choice for HP. Radiotherapy may covert a non resectable lesion into a resectable one ; the role of chemotherapy is still unclear. HP is capable of both local recurrence and distant metastasis but has low disease associated mortality.

Conclusion

At present day it's the first case of HP involving the retrorectal space treated by local excision. Adjuvant radiotherapy is therefore useful in HP. The value of chemotherapy is still doubtful.