**SURGICAL MANAGEMENT OF ADIPOCYTIC TUMORS. OUR EXPERIENCE AT THE ONCOLOGIC HOSPITAL**

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**Purpose:** The presentation of our experience on surgical management of the adipocytic tumors at the oncologic hospital.

**Material – Methods:** We present our 6-year experience on dealing with adipocytic tumors, from 2016 until 2021. That consists of 348 cases of lipomas, 24 fibrolipomas, 12 myolipomas, 4 spidle cell lipomas, 3 angiolipomas, 2 atypical lipomatous tumors, 2 myxoid liposarcomas, 1 well-differentiated liposarcoma, 1 pleomorphic liposarcoma.

**Results:** All patients submitted to surgical excision of their tumors. All liposarcomas were managed with wide surgical excision followed by radiotherapy. Chemotherapy followed excision of myxoid liposarcomas and pleomorphic liposarcoma. Patients with recurrent tumors were submitted to simple or wide excision.

**Discussion:** The clinical spectrum of adipocytic tumors ranges from benign lipomas until high-differentiated liposarcomas. Liposarcomas are divided into 5 histologic subtypes: well-differentiated, dedifferentiated, myxoid, pleomorphic and myxoid pleomorphic. The atypical lipomatous tumor is a new-described entity presenting 10-15% percentage of local recurrence and no mitotic activity. Surgical excision consists the main way of dealing with adipocytic tumors.

**Conclusions:**  Adipocytic tumors are mesenchymal tumors frequently encountered in clinical practice. Ultrasound and core-needle biopsy are reliable diagnostic methods. Cases of liposarcomas demand a more complex therapeutic approach.