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Efficacy of percutaneous radiofrequency ablation of osteoid osteoma in children

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Abstract

Background

Percutaneous radiofrequency (RF) ablation of osteoid osteoma has high technical and clinical success rates. However, there are limited data on its use in the treatment of osteoid osteoma in children.

Objective

To assess the safety and efficacy of CT-guided percutaneous RF ablation of osteoid osteoma in children and compare the outcomes with published data on its use in patients unselected for age.

Materials and methods

From January 2003 to July 2006, 23 children with osteoid osteoma were treated with CT-guided RF ablation using a straight rigid electrode. Their mean age was 11 years (range 3.5–16 years) and there were 15 boys and 8 girls. The procedures were carried out under general anaesthesia. Follow-up was performed to assess technical and clinical outcome. The mean follow-up period was 2.5 years (range 13–49 months).

Results

Technical success was achieved in 21 children (91.3%). Failure occurred in two children, in one due to failure to adequately localize the nidus within the dense sclerosis and in the other because of a short ablation time (2 min) because he developed hyperthermia. Clinical success was achieved in 18 patients within 2–5 days (primary clinical success rate 78.2%). These patients were allowed to fully weight-bear and function without limitation 1 week after the procedure. Pain recurrence was observed in two patients; one was treated successfully with a second ablation after 6 months (secondary clinical success rate 82.6%). Hyperthermia was observed in two patients during the procedure. Three other minor

complications were observed: wound infection in one child and skin burn in two children. No major immediate or delayed complications were observed.

Conclusion

Percutaneous CT-guided RF ablation is an effective and safe minimally invasive procedure for the treatment of osteoid osteoma in children. It has high technical and clinical success rates that are slightly lower than those of patients with a wider range of ages.

Keywords

Osteoid osteoma Radiofrequency ablation Children

References

 Jaffe HL (1935) "Osteoid osteoma": a benign osteoblastic tumor composed of osteoid and atypical bone. Arch Surg 31:709–728

Google Scholar

2. Springfield DS (1996) Osteoid osteoma. In: Morrissy RT, Weinstein SL (eds) Lovell and Winter's pediatric orthopaedics, 4th edn. Lippincott-Raven, Philadelphia, pp 422–435

Google Scholar

3. Ahar K (2004) The role and limitations of radiofrequency ablation in treatment of bone and soft tissue tumors. Curr Oncol Rep 6:315–320

CrossRefGoogle Scholar

4. Rosenthal DI, Hornicek FJ, Wolfe MW et al (1998) Percutaneous radiofrequency coagulation of osteoid osteoma compared with operative treatment. J Bone Joint Surg Am 80:815–821

PubMedGoogle Scholar

5. Towbin R, Kaye R, Meza M et al (1995) Osteoid osteoma: percutaneous excision using a CT-guided coaxial technique. AJR 164:945–949

PubMedGoogle Scholar

6. Roger B, Bellin M, Wioland M et al (1996) Osteoid osteoma: CT-guided percutaneous excision confirmed with immediate follow-up scintigraphy in 16 outpatients. Radiology 201:239–242

PubMedGoogle Scholar

7. Sans N, Galy-Fourcade D, Assoun J et al (1999) Osteoid osteoma: CT-guided percutaneous resection and follow-up in 38 patients. Radiology 212:687–692

PubMedGoogle Scholar

8. Rosenthal D, Alexander A, Rosenberg A et al (1992) Ablation of osteoid osteomas with a percutaneously placed electrode: a new procedure. Radiology 183:29–33

PubMedGoogle Scholar

9. Rosenthal DI, Springfield DS, Gebhardt MC et al (1995) Osteoid osteoma: percutaneous radiofrequency ablation. Radiology 197:451–454

PubMedGoogle Scholar

10. Woertler K, Vestring T, Boettner F et al (2001) Osteoid osteoma: CT-guided percutaneous radiofrequency ablation and follow-up in 47 patients. J Vasc Interv Radiol 12:717–722

PubMedCrossRefGoogle Scholar

11. Rosenthal DI, Hornicek FJ, Torriani M et al (2003) Osteoid osteoma: percutaneous treatment with radiofrequency energy. Radiology 229:171–175

PubMedCrossRefGoogle Scholar

12. Vanderschueren GM, Taminiau AH, Obermann WR et al (2004) Osteoid osteoma: factors for increased risk of unsuccessful thermal coagulation. Radiology 233:757–762

PubMedCrossRefGoogle Scholar

13. Cantwell CP, O'Byrne J, Eustace S (2006) Radiofrequency ablation of osteoid osteoma with cooled probes and impedance-control energy delivery. AJR 186:S244–S248

CrossRefGoogle Scholar

14. Mahnken AH, Tacke JA, Wildberger JE et al (2006) Radiofrequency ablation of osteoid osteoma: initial results with a bipolar ablation device. J Vasc Interv Radiol 17:1465–1470

PubMedCrossRefGoogle Scholar

15. Akhlaghpoor S, Tomasian A, Shabestari AA et al (2007) Percutaneous osteoid osteoma treatment with combination of radiofrequency and alcohol ablation. Clin Radiol 62:268–273

PubMedCrossRefGoogle Scholar

16. Peyser A, Applbaum Y, Khoury A et al (2007) Osteoid osteoma: CT-guided radiofrequency ablation using a water-cooled probe. Ann Surg Oncol 14:591–596

PubMedCrossRefGoogle Scholar

17. Greenspan A, Remagen W (1997) Differential diagnosis of tumors and tumor-like lesions of bones and joints. Lippincott-Raven, Philadelphia, pp 33–50

Google Scholar

18. Vanderschueren GM, Hogendoorn PC, Bloem JL et al (2002) Technical considerations in CT-guided radiofrequency thermal ablation of osteoid osteoma: tricks of the trade. AJR 179:1633–1642

PubMedGoogle Scholar

19. Gebauer B, Tunn PU, Gaffke G et al (2006) Osteoid osteoma: experience with laser- and radiofrequency-induced ablation. Cardiovasc Intervent Radiol 29:210–215

PubMedCrossRefGoogle Scholar

20. Kjar RA, Powell GJ, Schilcht SM et al (2006) Percutaneous radiofrequency ablation for osteoid osteoma: experience with a new treatment. Med J Aust 184:563–565

PubMedGoogle Scholar

21. Martel J, Bueno A, Ortiz E (2005) Percutaneous radiofrequency treatment of osteoid osteoma using cool-tip electrodes. Eur J Radiol 56:403–408

PubMedCrossRefGoogle Scholar

22. Mastrantuono D, Martorano D, Verna V et al (2005) Osteoid osteoma: our experience using radiofrequency (RF) treatment. Radiol Med (Torino) 109:220–228

Google Scholar

23. Rimondi E, Bianchi G, Malaguti MC et al (2005) Radiofrequency thermoablation of primary nonspinal osteoid osteoma: optimization of the procedure. Eur Radiol 15:1393–1399

PubMedCrossRefGoogle Scholar

24. Cioni R, Armillotta N, Bargellini I et al (2004) CT-guided radiofrequency ablation of osteoid osteoma: long-term results. Eur Radiol 14:1203–1208

PubMedCrossRefGoogle Scholar

25. Vanderschueren GM, Taminiau AH, Obermann WR et al (2002) Osteoid osteoma: clinical results with thermocoagulation. Radiology 224:82–86

PubMedCrossRefGoogle Scholar

26. Lindner NJ, Ozaki T, Roedl R et al (2001) Percutaneous radiofrequency ablation in osteoid osteoma. J Bone Joint Surg Br 83:391–396

PubMedCrossRefGoogle Scholar

27. Ismat G (2006) The management of osteoid osteoma: updates and controversies. Curr Opin Pediatr 18:36–41

CrossRefGoogle Scholar

28. Fredric H, Alvaro C, Xiaoping X et al (2007) Core body temperature regulation of pediatric patients during radiofrequency ablation. Pediatr Radiol 37:297–300

CrossRefGoogle Scholar

29. Morrison PR, Brown SD, vanSonnenberg E (2005) Pediatric return electrodes for radiofrequency ablation in children. AJR 185:84–85

PubMedGoogle Scholar