

ABSTRACT

Introduction: Due to the aggressive behavior of soft tissue sarcomas, compartmental resection and even amputation were the main therapeutic options. The current objective is resection with free margins and limb preservation. For this, advances in adjuvant therapy and microsurgical techniques have optimized the results. **Methods:** This paper describes in detail the surgical technique for reconstructing the lower limb using a free flap, bilaterally, after excision of a sarcoma performed at the Hospital do Servidor Público Estadual “Francisco Morato de Oliveira”, in São Paulo, in male patient of 39-year-old. **Case report:** A 39-year-old male patient with a diagnosis of sarcoma in the right lower limb, in close contact with the sciatic nerve, with no cleavage plane, undergoing chemotherapy and radiotherapy. 45 days after the end of the neoadjuvant treatment, resection of the lesion was performed, and a cleavage plane with the sciatic nerve was found, with preservation of the same. For limb reconstruction, the bilateral deep inferior epigastric artery perforating flap was chosen due to the need for volume beyond local coverage. Patient presented good postoperative evolution, with well perfused and lossless flap, walking without support / help. **Discussion:** Based on the patient’s staging, location and clinical conditions, the surgeon should evaluate the possibility of resection of sarcoma with free margins, usually between 2-3cm. The use of the lower limb reconstruction technique with a free flap has the advantages of allowing closure of large defects with local volume replacement and lower morbidity generated at both aesthetic (single incision) and functional (preserving rectus abdominis) donor sites.

Keywords: Sarcoma; microsurgery; lower Limb.

Correspondência:

Bernardo Luiz Campanário Precht
E-mail: bernardolcp@gmail.com
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Serviço de Cirurgia Geral do Hospital do Servidor Público Estadual “Francisco Morato de Oliveira”, HSPE-FMO, São Paulo, SP, Brasil.
Endereço: Rua Pedro de Toledo, 1800, 8º andar - Vila Clementino - CEP: 04039-901, São Paulo, SP, Brasil.