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DECENIO DE LA IGUALDAD DE OPORTUNIDADES PARA MUJERES Y HOMBRES
" AÑO DEL FORTALECIMIENTO DE LA SOBERANÍA NACIONAL "

PEDIATRÍA

➤ **A case report of blastic plasmacytoid dendritic cell neoplasm in a hispanic child**

INVESTIGADORES: Katy Ordoñez Tanchiva, Pamela Contreras Chavez, Silvana Lucero Loli Guevara, Carlos Rodrigo Quispe Vicuña, Neharika Bhardwaj, Frederick Lansigan, Erik Deconinck.

REVISTA: Case Reports Leuk Res Rep 2021 Jul 30;16:100262. doi: 10.1016/j.lrr.2021.100262. eCollection 2021.

ABSTRACTO: Plasmacytoid dendritic cell neoplasms are aggressive and rare hematologic malignancies characterized by clonal expansion of plasmacytoid dendritic cells with frequent cutaneous involvement. The pathogenesis is not well established, and it shows enhanced expression of CD56, CD4 and CD123 detected by flow cytometry and immunohistochemistry. We report a case report of this rare disease in a hispanic child with complete remission after using a protocol for high-risk acute lymphoblastic leukemia.

➤ **Reliability and validity of a Spanish-language measure assessing clinical capacity to sustain Paediatric Early Warning Systems (PEWS) in resource-limited hospitals**

INVESTIGADORES: Asya Agulnik, Sara Malone, Maria Puerto-Torres, Alejandra Gonzalez-Ruiz, Yuvanesh Vedaraju, Huiqi Wang, Dylan Graetz, Kim Prewitt, Cesar Villegas, Adolfo Cardenas-Aguierre, Carlos Acuna, Ana Edith Arana, Rosdali Díaz, Silvana Espinoza, Karla Guerrero, Angélica Martínez, Alejandra Mendez, Erika Montalvo, Dora Soberanis, Antonella Torelli, Janeth Quelal, Erika Villanueva, Meenakshi Devidas, Douglas Luke, Virginia McKay, EVAT Study Group.

REVISTA: BMJ Open 2021 Oct 20;11(10):e053116. doi: 10.1136/bmjopen-2021-053116.

ABSTRACTO: Background: Paediatric Early Warning Systems (PEWSs) improve identification of deterioration, however, their sustainability has not been studied. Sustainability is critical to maximise impact of interventions like PEWS, particularly in low-resource settings. This study establishes the reliability and validity of a Spanish-language Clinical Sustainability Assessment Tool (CSAT) to assess clinical capacity to sustain interventions in resource-limited hospitals. Methods: Participants included PEWS implementation leadership teams of 29 paediatric cancer centres in Latin America involved in a collaborative to implement PEWS. The CSAT, a sustainability assessment tool validated in high-resource settings, was translated into Spanish and distributed to participants as an anonymous electronic survey. Psychometric, confirmatory factor analysis (CFA), and multivariate analyses were preformed to assess reliability, structure and initial validity. Focus groups were conducted after participants reviewed CSAT reports to assess their interpretation and utility. Results: The CSAT survey achieved an 80% response rate (n=169) with a mean score of 4.4 (of 5; 3.8-4.8 among centres). The CSAT had good reliability with an average internal consistency of 0.77 (95% CI 0.71 to 0.81); and CFAs supported the seven-domain structure. CSAT results were associated with respondents' perceptions of the evidence for PEWS, its implementation and use in their centre, and their assessment of the hospital culture and implementation climate. The mean CSAT score was higher among respondents at centres with longer

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time using PEWS ($p < 0.001$). Focus group participants noted the CSAT report helped assess their centre's clinical capacity to sustain PEWS and provided constructive feedback for improvement. Conclusions: We present information supporting the reliability and validity of the CSAT tool, the first Spanish-language instrument to assess clinical capacity to sustain evidence-based interventions in hospitals of variable resource levels. This assessment demonstrates a high capacity to sustain PEWS in these resource-limited centres with improvement over time from PEWS implementation.

➤ **Primary central nervous system sarcoma with DICER1 mutation-treatment results of a novel molecular entity in pediatric Peruvian patients**

INVESTIGADORES: Rosdali Y Diaz Coronado, Martin Mynarek, Christian Koelsche, Pamela Mora Alferez, Sandro Casavilca Zambrano, Antonio Wachtel Aptowitz, Felix Sahm, Andreas von Deimling, Ulrich Schüller, Michael Spohn, Dominik Sturm, Stefan M Pfister, Andres Morales La Madrid, Raymundo Sernaque Quintana, Gustavo Sarria Bardales, Tatiana Negreiros Chinchihuara, Luis Ojeda Medina, Pamela Garcia-Corrochano Medina, Danny A Campos Sanchez, Jimena Ponce Farfan, Stefan Rutkowski, Juan L Garcia Leon.

REVISTA: Cancer 2021 Oct 21. doi: 10.1002/cncr.33977.

ABSTRACTO: Background: A high frequency of primary central nervous system (CNS) sarcomas was observed in Peru. This article describes the clinical characteristics, biological characteristics, and outcome of 70 pediatric patients. Methods: Data from 70 pediatric patients with primary CNS sarcomas diagnosed between January 2005 and June 2018 were analyzed. DNA methylation profiling from 28 tumors and gene panel sequencing from 27 tumors were available. Results: The median age of the patients was 6 years (range, 2-17.5 years), and 66 of 70 patients had supratentorial tumors. DNA methylation profiling classified 28 of 28 tumors as primary CNS sarcoma, DICER1 mutant. DICER1 mutations were found in 26 of 27 cases, TP53 mutations were found in 22 of 27 cases, and RAS-pathway gene mutations (NF1, KRAS, and NRAS) were found in 19 of 27 tumors, all of which were somatic (germline control available in 19 cases). The estimated incidence in Peru was 0.19 cases per 100,000 children (<18 years old) per year, which is significantly higher than the estimated incidence in Germany (0.007 cases per 100,000 children [<18 years] per year; $P < .001$). Patients with nonmetastatic disease ($n = 46$) that were treated with a combination therapy had a 2-year progression-free survival (PFS) rate of 58% (95% CI, 44%-76%) and a 2-year overall survival rate of 71% (95% CI, 57%-87%). PFS was the highest in patients treated with chemotherapy with ifosfamide, carboplatin, and etoposide (ICE) after upfront surgery followed by radiotherapy and ICE (2-year PFS, 79% [59%-100%], $n = 18$). Conclusions: Primary CNS sarcoma with DICER1 mutation has an aggressive clinical course. A combination of surgery, chemotherapy, and radiotherapy seems beneficial. An underlying cancer predisposition syndrome explaining the increased incidence in Peruvian patients has not been identified so far.

➤ **Resilient health care in global pediatric oncology during the COVID-19 pandemic**

INVESTIGADORES: Dylan E Graetz, Elizabeth Sniderman, Cesar A Villegas, Erica C Kaye, Iman Ragab, Aliaksandra Laptsevich, Biemba Maliti, Gita Naidu, Haiying Huang, Pascale Y Gassant, Luciana Nunes Silva, Daniela Arce, Jacqueline

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Montoya Vasquez, Ramandeep Singh Arora, Ana Patricia Alcasabas, Desy Rusmawatingtyas, Muhammad Rafie Raza, Pablo Velasco, Joyce Kambugu, Anna Vinitsky, Carlos Rodriguez-Galindo, Asya Agulnik, Daniel C Moreira, COVIMPACT Study Group.

REVISTA: Cancer 2021 Nov 12. doi: 10.1002/cncr.34007.

ABSTRACTO: Background: In the face of unprecedented challenges because of coronavirus disease 2019, interdisciplinary pediatric oncology teams have developed strategies to continue providing high-quality cancer care. This study explored factors contributing to health care resilience as perceived by childhood cancer providers in all resource level settings. Methods: This qualitative study consisted of 19 focus groups conducted in 16 countries in 8 languages. Seven factors have been previously defined as important for resilient health care including: 1) in situ practical experience, 2) system design, 3) exposure to diverse views on the patient's situation, 4) protocols and checklists, 5) teamwork, 6) workarounds, and 7) trade-offs. Rapid turn-around analysis focused on these factors. Results: All factors of health care resilience were relevant to groups representing all resource settings. Focus group participants emphasized the importance of teamwork and a flexible and coordinated approach to care. Participants described collaboration within and among institutions, as well as partnerships with governmental, private, and nonprofit organizations. Hierarchies were advantageous to decision-making and information dissemination. Clinicians were inspired by their patients and explained creative trade-offs and workarounds used to maintain high-quality care. Conclusions: Factors previously described as contributing to resilient health care manifested differently in each institution but were described in all resource settings. These insights can guide pediatric oncology teams worldwide as they provide cancer care during the next phases of the pandemic. Understanding these elements of resilience will also help providers respond to inevitable future stressors on health care systems.

➤ **Seeking cancer treatment for their children: experience of parents from areas distant from Lima-Peru**

INVESTIGADORES: Gladys Carmela Santos Falcón, Lili Ana Ordoñez Espinoza, María Del Carmen Velandres Siles, Roberto Zegarra Chapoñan, Jhon Alex Zeladita Huaman.

REVISTA: Rev Gaucha Enferm 2021 Dec 6;42:e20200323. doi: 10.1590/1983-1447.2021.20200323. eCollection 2021.

ABSTRACTO: Objective: To understand the experiences of parents of children with cancer who come from areas distant from Lima-Peru during the search for cancer treatment for their children. Method: A descriptive-exploratory qualitative approach study. Focus groups and semi-structured interviews were carried out. The sample consisted of 18 parents who come from remote areas from Lima who attended specialized hospitals. The qualitative analysis was of thematic content, proposed by Minayo. Results: Three categories emerged: Accessing cancer care in Lima hospitals; Having diverse personal experiences during their child's treatment; and Reporting the socioeconomic and labor impact during their stay in Lima. Final considerations: Understanding these experiences could help health professionals to implement strategies of socioeconomic support to facilitate access to health services for children with cancer. Hospitals must guarantee the satisfaction of the basic needs of parents.