Conclusion: A high rate of clinical responses (complete/partial) to (CT)RT was registered. Post-operative complications resulted acceptable compared to literature data. pCR is associated with excellent survival also in these tumors as demonstrated in other neoplasms. The multidisciplinary approach is crucial to complete the combined treatment planned [(CT)RT/+/- surgery]. In the future, predictive models could allow to select patients on the basis of their foreseen response.

Introduction/Background: Aggressive angiomyxoma (AA) is a rare mesenchymal tumor, typically arising in the soft tissue of the pelvis and perineum, with local aggressive behavior and frequent local recurrence. Surgical excision is the standard treatment.

Methodology: We report the case of a 47-year-old woman diagnosed with a pelvis and perineum AA. Magnetic resonance imaging revealed a 9 cm infiltrative mass at the level of the obturator externus muscle. Ischiorectal fossa was developed and the tumor extended to the left infravaginal space, lateral wall of the vagina and anal sphincter, infiltrating the left levator ani muscle and ischiorectal fossa. A high rate of clinical responses (complete/partial) to (CT)RT was registered. Post-operative complications resulted acceptable compared to literature data. pCR is associated with excellent survival also in these tumors as demonstrated in other neoplasms. The multidisciplinary approach is crucial to complete the combined treatment planned [(CT)RT/+/- surgery]. In the future, predictive models could allow to select patients on the basis of their foreseen response.
study series, supporting the clinician to integrate output analysis (Morphonode-SP).

Conclusion Our findings indicate that Morphonode Predictive Model is a simple and observer-independent tool. It could be easily integrated in the clinical routine for preoperative stratification of vulvar cancer patients.