

Preface

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Malignancies in children are more virulent than those in adults. Therefore, chemotherapy is of utmost importance in pediatric therapy protocols. Polychemotherapy has proved to be superior to monochemotherapy in systemic diseases as well as sarcomas and embryonic tumors. However, to exploit all chemotherapeutic possibilities, high toxicity must be taken into account; in this respect, the supportive therapy is as important as the cytotoxic treatment itself.

As malignant diseases do not frequently occur in children and their treatment involves serious side effects, it is essential that these protocols be applied only in pediatric oncology centers. These centers must cooperate closely, since the only way to obtain therapeutic results exceeding the usual achievements is through prospective multicenter trials.

Ifosfamide has gained importance in many trials, with good reason. The possibilities and risks involved in its therapeutic use, as reported by different trial study groups, were therefore presented and discussed during a recent symposium. Ifosfamide is an alkylating agent. It has a broad spectrum of indications similar to that of cyclophosphamide, but there seems to be no cross resistance between these two agents. Ifosfamide is used in acute leukemias, non-Hodgkin's lymphomas and solid tumors such as Wilms' tumor, rhabdomyosarcoma, Ewing sarcoma, and germ cell tumors. A great many study groups in The Netherlands, United Kingdom, Argentina, Egypt, USA, Belgium, France and Germany are working on the use of ifosfamide in the various tumors it is thought will yield to it. Because of their importance, the contributions were compiled in this monograph.