intoxications. 119 transactions were in ASFA category-1. Complications were observed on 59 (%24,8) procedures. **Conclusion:** The most common complications are; vascular access releated (obstruction) (21/59), hypotension (11/59), urticaria (7/59), technical malfunctions (7/59) and hypocalcemia (4/59). No exitus was observed due to the procedures. Therapeutic plasmapheresis procedure doesn't cause serious undesirable changes in laboratory values and serious complications are rare. Therapeutic plasmapheresis can be safely applied to pediatric patients in appropriate indications by making necessary adjustments.

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PEDIATRIC ONCOLOGY ABSTRACT CATEGORIES

LYMPHOMAS

PP 33

NON-HODGKIN'S LYMPHOMA: A RETROSPECTIVE ASSESSMENT OF CLINICAL FEATURES AND TREATMENT OUTCOMES

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Objective: The purpose of our study is to evaluate the demographic and clinical characteristics of pediatric Non-Hodgkin's Lymphoma (NHL) patients diagnosed and followed at our center, and also describe their survival rates and possible associations between outcomes and clinical features and to compare these data with the published reports from other clinical centers. **Methodology:** Children with NHL who were followed up and treated at Adana City Training and Research Hospital between 2013 and 2021 were included in the study. A total of 60 patients' files were collected and analyzed retrospectively. Age, gender, time of diagnosis, histopathological subtypes, primary location of the tumor, extranodal involvement, stage, bone marrow (BM) and central nervous system (CNS) involvement status, lactate dehydrogenase (LDH) levels at the time of diagnosis, type of chemotherapy, risk stratification, first line treatment response, localization of the radiotherapy if applied, relapse and survival outcomes were accessed from the files and analyzed. Patients with missing data in their files, patients who left the center without completing their treatment and patients who started treatment in another center and continued in our hospital were not included in the study. **Results:** The median age was 7 years (between 2-18 years) and the male/female ratio was 3.2. Burkitt's Lymphoma (48.5%) was the most common, Lymphoblastic Lymphoma (31.7%) was the second common histopathologic subtype and the primary site of the disease was abdomen in 34 patients (56.7%). It was seen that 28 of the patients (46.6%) had extranodal involvement, CNS involvement was only in 1 patient (1.6%) and bone marrow involvement was found in 13 patients (21.6%). It was determined that 80% of the patients were in the advanced stage (Stage 3-4) and complete remission was observed in 60.1% of the patients after the first line treatment. It was observed that the overall survival rate was 80.8%, and the event-free survival rate was 75% during the 96-month follow-up. Age, gender, primary site of the tumor, presence of extranodal involvement and stage did not have a statistically significant effect on overall and event-free survival. The effect of histopathological subtype on overall survival was found to be significant and highest survival rates were observed in B cell lymphoblastic and diffuse large B cell lymphoma. It was observed that the overall and event-free survival rate was significantly lower in the group with a LDH level above 500 U/L, which was measured at the time of diagnosis ($p=0.01$ and $p=0.008$). It was seen that the treatment response and both overall and event-free survival rates were found to be significantly higher in the groups with complete and partial response after the first line treatment ($p<0.001$). The treatment-related mortality rate was found to be 45.4%, and the most common cause was febrile neutropenia/sepsis. **Conclusion:** Although childhood Non Hodgkin's Lymphomas have an aggressive nature and are detected in an advanced stage, survival results are good. It is very important to determine the risk groups to choose the appropriate intensive chemotherapy regimen and provide adequate supportive treatment for preventing treatment-related mortality and better outcomes.

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SOFT TISSUE SARCOMAS

PP 34

SUCCINATE DEHYDROGENASE SUBUNIT B DEFICIENT PEDIATRIC GIST

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Case report Gastrointestinal stromal tumors (GISTs) occur exceedingly rare in children and adolescents. Eighty five percent of pediatric GISTs and 15 % of adult GISTs lack oncogenic mutations in KIT and PDGFRA. The results of tyrosine kinase inhibitor therapy in GIST cases with SDH deficiency are limited and controversial. Here, we would like to present a pediatric SDH deficient GIST case treated with surgery and Imatinib Mesylate. We obtained a good response with Imatinib Mesylate.

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