

ulna, vertebra, scapula, ribs, and skull. It occurs almost exclusively in individuals younger than 30 years old and affects Caucasians much more often than other races ([National Cancer Institute, 2015d](#)).

Therapeutic Management

Limb salvage procedures might be feasible in extremity lesions, and amputation may be considered if the results of radiotherapy render the extremity useless or deformed (e.g., from retarded growth in young children). The treatment of choice for the majority of lesions is involved field radiotherapy and chemotherapy.

Nursing Care Management

The psychological adjustment to Ewing sarcoma is typically less traumatic than it is to osteosarcoma because of the preservation of the affected limb. Many families accept the diagnosis with a sense of relief in knowing that this type of bone cancer does not necessitate amputation. Consequently, they need preparation for the various diagnostic tests, including bone marrow aspiration and surgical biopsy, and adequate explanation of the treatment regimen. Radiotherapy often causes a skin reaction of dry or moist desquamation followed by hyperpigmentation. The child should wear loose-fitting clothes over the irradiated area to minimize additional skin irritation. Because of increased sensitivity, protect the area from sunlight and sudden changes in temperature. Encourage the child to use the extremity as tolerated. Occasionally the physical therapist may plan an active exercise program to preserve maximum function.

The child needs the same considerations for adjusting to the effects of chemotherapy as any other patient with cancer. The drug regimen usually results in hair loss, severe nausea and vomiting, peripheral neuropathy, and possible cardiotoxicity. Make every effort to outline a treatment plan that allows the child maximum resumption of a normal lifestyle and activities.

Other Solid Tumors

In addition to the cancers already discussed, several other types of