





Figure 3: Incidence of Brain Tumors (Sex wise distribution)

**DISCUSSION**

Present study was conducted in the Department of Pathology in RNT medical college Udaipur from August 2017 to July 2019 over a period of two years. It comprised of an analysis of 60 cases of Pediatric solid malignancies.

All these cases were reviewed as regards to incidence, age

**Comparison of type of childhood malignancies with other studies:**

Type of Childhood Malignancies	Gupta N et al <sup>11</sup> (%)	Sharma N et al <sup>12</sup> (%)	Saini Met et al <sup>8</sup> (%)	Wani LA et al <sup>14</sup> (%)	Nagaraja CT et al <sup>10</sup> (%)	Present Study (%)
CNS tumor	8.33	25.74	13.93	8.6	7.57	30
Lymphoma	38.33	-	8.48	23.91	31.81	23.33
Bone tumors	15	20.46	10.90	8.6	12.12	11.67
Neuroblastoma	3.33	4.9	2.42	6.5	3.03	3.33
Rhabdomyosarcoma	-	5.6	0.606	-	13.63	1.67
Retinoblastoma	3.33	2.6	4.24	23.91	3.03	3.33

In present study CNS tumors were commonest malignancies (30%) which is approximately similar to study of Sharma N et al (25.74%). Above present study second commonest malignancies lymphoma cases (23.33%) were equal to the study of cases of wani LA et al (23.91%). Present study Bone tumors cases (11.67%) slightly equal to study of cases of Saini M et al (10.90%) & Nagaraja CT et al (12.12%). Our study of Retinoblastoma (3.33%) & Neuroblastoma (3.33%) malignancies were equal to the studies of Gupta N et al (3.33% each) & Nagaraja CT et al (3.03% each).Rhabdomyosarcoma in present study (1.67%) which is slightly higher than study of Saini M et al(0.606%) and lower than study of Sharma N et al (5.6%). Present study shows that CNS tumors cases were maximum in number (30%) followed by Lymphoma cases were (23.33%), Bone tumors (11.67%) Neuroblastoma (3.33%), Retinoblastoma (3.33%) and Rhabdomyosarcoma (1.67%) also shows that childhood solid malignancies were more commonly seen in male then female. Present study shows most of cases of CNS tumors were seen in the age groups of 0-5 years (27.77%), 6-10 years (27.77%),11-14 years (27.77%) followed by 15-18 years (16.66%) and it also shows that CNS tumors more common in male than in female children. Total ratio of M:F of CNS tumors in our study was 2:1 which is similar to study of Jahan F et al<sup>15</sup> (2013) Patients included in that study where male to female ratio of 2.1:1.

**Comparison of Lymphoma, CNS tumors and Bone tumors with other studies:**

Malignancy Type	Banerjee et al <sup>16</sup>	Venugopal et al <sup>17</sup>	Sharma S et al <sup>18</sup>	Present study
Lymphoma	25.92%	20.95%	21.41%	23.33%
CNS tumors	15.32%	-	9.74%	30%
Bone tumors	10.52%	3.8%	9.74%	11.67%

Looking to the various age group, in the age group 15-18 years we could not find any specific or recordable difference. This was done as most of other authors have their study group 0-14 years.

Most of workers have included hematological malignancies in their study while we have taken cases of solid tumors only. They are not in concurrence with such study. Our study is in concurrence with study of Nagaraja CT et al (2015), Gupta N et al (2017), Wani LA et al (2018).

and sex distribution, nature and pattern. The results observed have been compared with similar studied of other authors.

**Comparison of Male: Female ratio of Childhood Malignancies with other studies:**

Saini Met et al <sup>8</sup>	Jignasa BN et al <sup>9</sup>	Nagaraja CT et al <sup>10</sup>	Gupta N et al <sup>11</sup>	Sharma N et al <sup>12</sup>	Jan Met et al <sup>13</sup>	Present study
1.5:1	1.38:1	1.57:1	1.5:1	1.04:1	1.73:1	1.73:1

The incidence was more common in males then females when all cases of childhood malignancies were taken in to account in present study (1.73:1) which is equally ratio seen in study of Jan M et al<sup>13</sup> (1.73:1) and which is slightly higher than the study from Saini M et al<sup>8</sup>& Gupta N et al<sup>11</sup> (1.5:1 )each and Jignasa BN et al<sup>9</sup> (1.38:1), Nagaraja CT et al<sup>10</sup> (1.57:1), Sharma N et al<sup>12</sup> (1.04:1).

**CONCLUSION**

Our study concluded that solid malignant pediatric tumors contribute also a childhood health problem in Udaipur region affecting all pediatric age group but more prevalent in the age group 6-10 years & 15-18 years. FNAC is an important safe and effective process for early diagnosis although histological examination is confirmatory.

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