Unfortunately, there are several toxic effects cancer patients may encounter under chemotherapeutic treatment. The most common side effects of cyclophosphamide are bone marrow suppression and subsequently susceptibility to infections, hemorrhage cystitis, cardiotoxicity, and gastrointestinal disturbances. Vincristine produces severe neurotoxicity in patients and less commonly SIADH, myelosuppression, and alopecia.60

Other regimens include VAC plus VAI (vincristine, actinomycin D, and ifosfamide or VIE (vincristine, ifosfamide, and etoposide) plus VAC for 12 months. A randomized controlled trial by Amdt et al compared the VAC regimen and the combination of vincristine, topotecan, and cyclophosphamide for the treatment of moderated risk rhabdomyosarcoma. According to the results, topotecan didn't appear more efficient than actinomycin D with 68% and 73% survival 4 years survival rates respectively. Irinotecan is another drug with is currently under investigation for its efficacy in the management of pediatric rhabdomyosarcoma when combined with the VAC regimen.2,60

A recent study by the Children's Oncology Group reported no differences between VAC and VAC/VI effectiveness for the treatment of intermediate-risk rhabdomyosarcoma although patients treated with VAC/VI regimen presented with less hematologic toxicity. In refractory cases, Intensity-modulated radiation and proton beam radiotherapy may be used complementary to assist the therapeutic approach and limit the high amount of chemotherapeutic toxicity.57,60

Although the outcome is not always favorable for the patients, the prognosis of botryoid sarcomas has dramatically improved in recent years through the combination of chemotherapy, radiotherapy, and/or surgery. Likewise most other cancers, the prognosis depends on the tumor size, histological variant, and