ENDOMETRIAL CARCINOMA IN PATIENTS WITH SENTINEL LYMPH NODE BIOPSY: RECURRENCES

I. Aizpuru¹, I. Jaunarena¹, P. Cobas¹, R. Ruiz¹, M. Gorostidi¹, M. Moreno², A. Lekuona¹

¹ Department of Obstetrics and Gynecology, Donostia University Hospital, Spain.

² Department of Pathology, Donostia University Hospital, Spain.

Contact: iratiaizpuola@gmail.com

BACKGROUND:

We describe the cases of recurrence in endometrial carcinoma with sentinel lymph node biopsy (SLNB) study and analyze possible factors associated with recurrence.

MATERIAL AND METHODS:

Type of study: Retrospective cohort study

Population: patients with recurrent endometrial carcinoma in whom SLNB was performed between 2014-2018.

- Stages IA G1-2: Hysterectomy, double adnexectomy and SLNB
- Stages IA G3 and above: weadded pelvic and para-aortic lymphadenectomy

Factors that may associate with recurrence were analyzed:

- ✧ High tumor grade (G3)
- ✧ Lymphovascular space invasion (LVSI)
- ✧ Myometrial invasion (MI) ≥50%
- ✧ Positive SLNB

RESULTS

	MEAN	SD
Age	68.4 years	10.5
BMI	29.4 kg/m ²	4.9
Tumor size	41.2mm	15.2

SURVIVAL FUNCTION

- ✓ Mean number of months until recurrence: 12.6 (SD = 9.6)
- ✓ Median: 9 months [95% CI; 7.3-10.7]
- ✓ 83% relapsed within the first year of postoperative follow-up (SD = 0.11)
- ✓ No association was found between lower survival and none of the prognostic factors marked

CONCLUSION

Recurrence rate of endometrial cancer intervened in SLNB study was 7.5%, being mostly serous adenocarcinoma or G3. 83% recurred within the first year of postoperative control. No association was found between lower survival and none of the possible factors indicated.