Prognostic factors and patterns of recurrence among patients treated for endometrial cancer in Southern Brazil

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Background:

- Endometrial cancer is the first most common cancer in female genital tract in Western countries.
- In spite of having a higher incidence in developed nations, the mortality continues superior in low and middle-income countries as Brazil.

Objectives:

The goal of our study was:

- To compare clinical and histopathological characteristics of women with and without recurrence of endometrial cancer after primary surgical treatment.

Methods:

- A retrospective cohort study was carried out in ISCMPA with patients treated for endometrial cancer from 1995 to 2016, in Southern Brazil;
- The variables analyzed were: age, symptom and method for the diagnosis, menopausal status, body mass index (BMI), comorbidities, histopathological type, FIGO staging and recurrence rate in the sample;
- Cox regression was used to identify independent prognostic factors;
- Overall survival was calculated by using the Kaplan-Meier method.

Results:

Of the 216 women underwent surgical treatment for endometrial carcinoma and met the inclusion criteria for the study, 23 (10.6%) have developed recurrent disease after a mean time of 3.7 years (SD $\pm$ 4.2).

- Depth of myometrial infiltration, stromal cervical involvement, FIGO staging and death were variables with a significant difference between patients with and without recurrence.
- In women with cancer recurrence, 60.9% died, compared to 21.6% of those without recurrence ($p \leq 0.0001$, Chi-square test).
- Disease free survival was significant different between women with and without recurrence ($p \leq 0.0001$, log-rank test).

Conclusions:

- This study ratifies depth of myometrial infiltration greater than 50%, cervical stromal invasion and FIGO staging are important prognostic factors to endometrial cancer recurrence.
- The recurrence of this tumor is related to a reduction in overall survival.
- These data are compatible with the existing literature and complement the scarce data on endometrial cancer in Brazil.

Figure 1. Kaplan Meier survivor estimates for patients with and without relapse.

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