

Is endometriosis a prognosis factor in epithelial ovarian cancer?

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INTRODUCTION

The association between endometriosis and epithelial ovarian cancer (EOC) has long been known. However, it is still under debate whether there are some specific clinical pathological characteristics of endometriosis that could play a differential role in the prognosis factor of patients with EOC.

MATERIAL AND METHODS

A retrospective study from 2013 to 2014 identified patients with EOC with or without concurrent endometriosis at Hospital Universitario Virgen de la Arrixaca.

The objective is to analyze the clinical features of EOC with concurrent endometriosis based on age at diagnosis, FIGO stage, percentage of optimal surgery, histological subtypes and number of relapse at 6 months follow up.

RESULTS

54 patients with EOC were identified, 18 of them (33,3%) with concurrent endometriosis. In average, these patients were 5 years older than the group with noncommittal endometriosis, and they were more likely to have an early stage (<IIA), (94,4% vs 50%).

Besides, 89% of optimal surgery versus 75% with noncommittal endometriosis.

From the group of patients with endometriosis, 12 had clear cell (16,7%) and endometrioid (49,9%). On the other hand, patients without concomitant endometriosis, 4 of 36 had clear cell (2,8%) and endometrioid cancer (8,3%).

In 6 months follow up, there were not relapse in these patients compared to 11% (4/36) in patients without concurrent endometriosis.

CONCLUSION

Patients with epithelial ovarian cancer (EOC) and concurrent endometriosis present at the diagnosis early FIGO stages (<IIA) , with optimal surgeries in high percentage and disease-free to 6 months follow up. Our study supports the hypothesis that endometriosis could be a good prognosis factor in patients with EOC with a relatively favorable outcome.

Mots clefs : endometriosis, epithelial ovarian cancer, prognosis factor, clinical features

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