

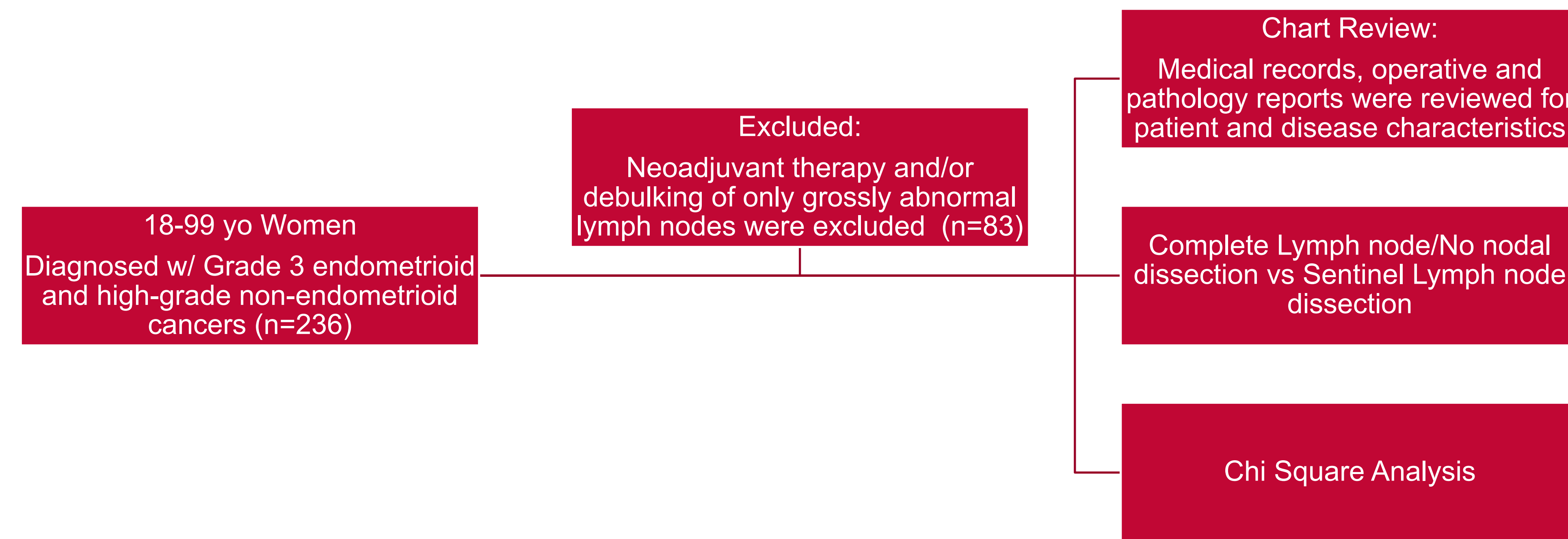
Does lymph node dissection impact adjuvant treatment or survival outcomes in high-risk endometrial cancers?

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Background

- Serous carcinomas and clear cell tumors are more likely to have lymphovascular invasion and intraperitoneal and extra-abdominal spread than their endometrioid counterparts (Slomovitz)
- Lymphadenectomy does not impact survival but does determine treatment (Zahl Eriksson)
- Sentinel Lymph Node sampling has been found to be a newer useful diagnostic tool (Ji)

Methods



Discussion/Conclusion

- Sentinel lymph node dissection in high-risk endometrial cancers led to no significant differences in recurrence free survival or cancer-specific overall. While limited by sample size and its retrospective nature, results from this single-institution study are hypothesis-generating and prompt consideration of non-inferiority trials. Performing the least invasive surgery possible can lead to fewer complications while maintaining overall survival outcomes.

Problem/Hypothesis/Aim

- Problem/Aim: As sentinel Lymph Node dissection becomes a more widely used technique for biopsy, can previous conclusions about complete lymphadenectomy and survival still apply?
- Hypothesis: There will be no difference in prognosis between sentinel lymph node dissection and complete dissection

Results/Analysis

Table 1. Patient outcomes by nodal assessment

Outcomes (months)	No Nodes Months (95%CI)	Sentinel nodes Months (95%CI)	Complete nodes Months (95%CI)	P
Recurrence free survival	61.2 (53.3-89.2)	70.3 (35.2-103.4)	86.9 (74.0-97.5)	0.63
Cancer specific overall survival	92.3 (78.4-106.2)	89.7 (59.1-102.3)	96.4 (85.9-106.9)	0.47

- No significant difference in patient characteristic besides surgical approach
- Patients with open surgery were more likely to have complete nodes than sentinel nodes when compared to a minimally invasive approach ($p < 0.001$).
- Sentinel nodal dissection significantly impacted the utilization of, or modality choice, in adjuvant therapy ($p = 0.051$).

Figure 1. Kaplan Meier Curve for recurrence free survival

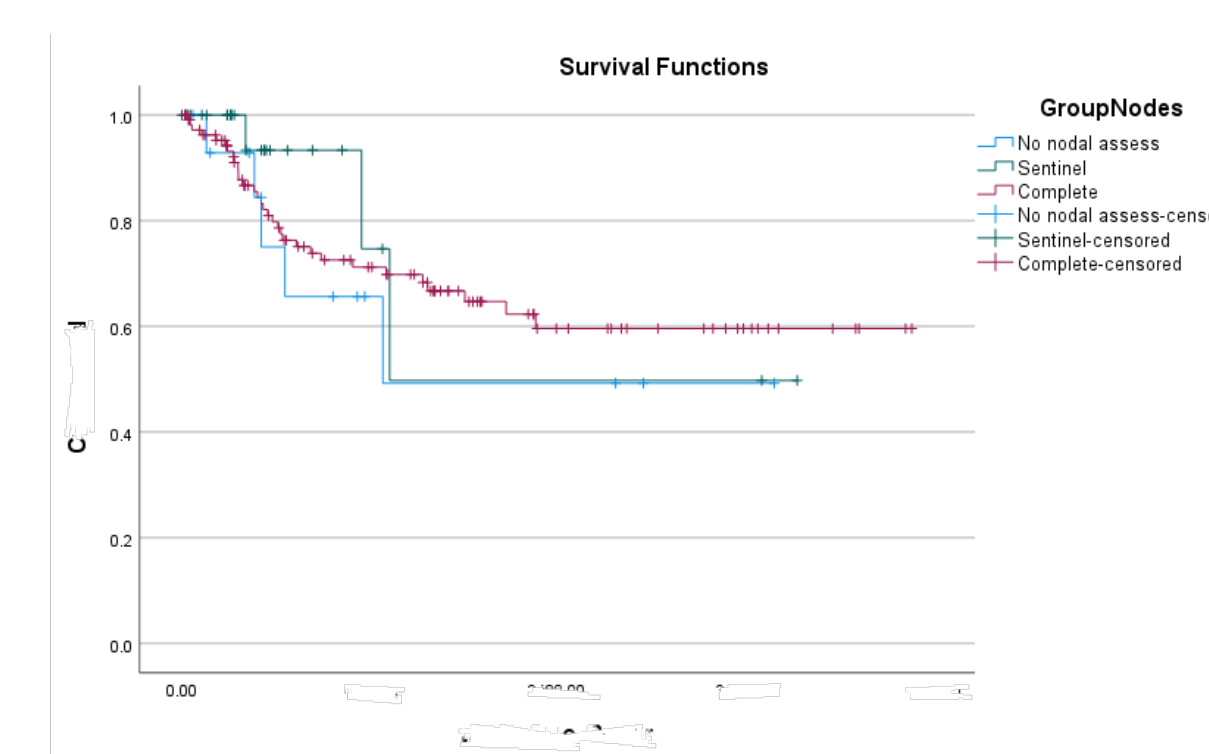
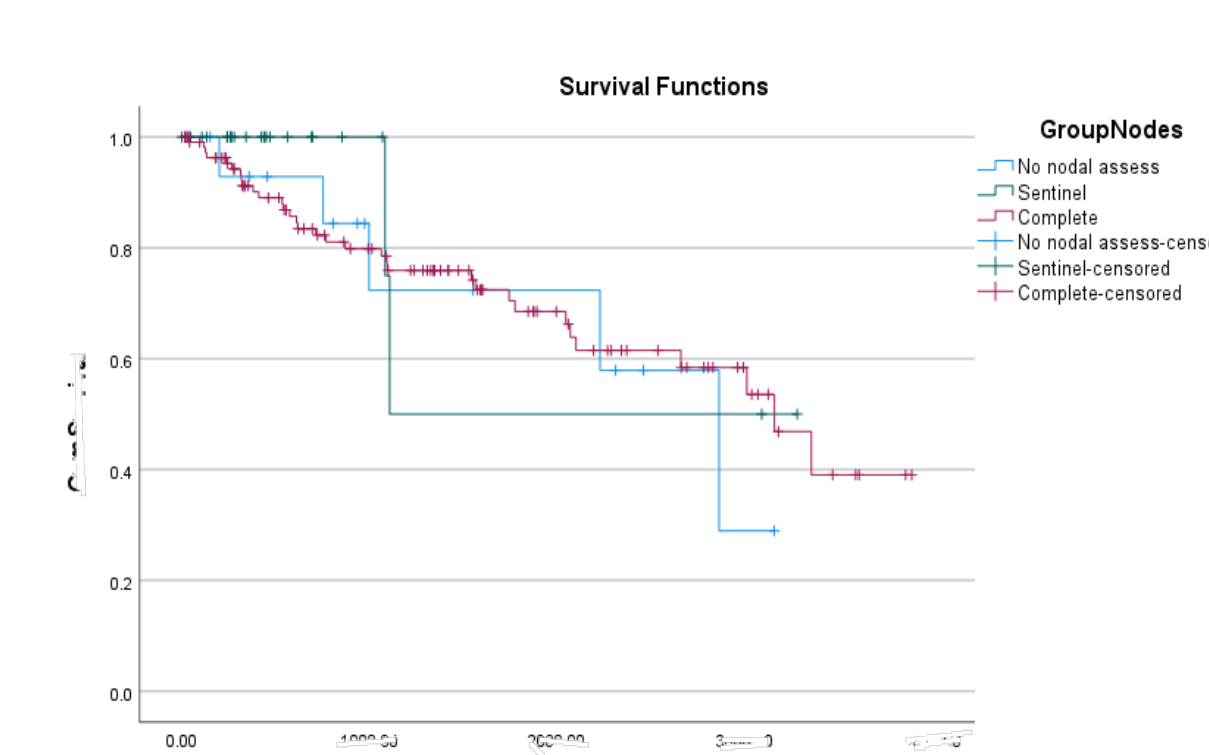


Figure 2. Kaplan Meier Curve for cancer specific overall survival



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