

Endometrial Cancer treatment analysis

How common is endometrial cancer? *In the United States, cancer of the endometrium is the most common cancer of the female reproductive organs. The American Cancer Society estimates for cancer of the uterus in the United States for 2018 are: About 63,230 new cases of cancer of the body of the uterus (uterine body or corpus) will be diagnosed. About 11,350 women will die from cancers of the uterine body. These estimates include both endometrial cancers and uterine sarcomas. Up to 8% of uterine body cancers are sarcomas, so the actual numbers for endometrial cancer cases and deaths are slightly lower than these estimates.*

Lifetime chance of getting endometrial cancer - *Endometrial cancer affects mainly postmenopausal women. The average age of women diagnosed with endometrial cancer is 60. It is uncommon in women under the age of 45. This cancer is slightly more common in white women, but black women are more likely to die from it. There are more than 600,000 survivors of endometrial cancer.*

Endometrial cancer is not a site often discussed at Contra Costa Regional Medical Center Tumor Board. Therefore, a review was conducted to ensure treatment is concordant with evidence-based national treatment guidelines (National Comprehensive Cancer Network – NCCN guidelines). Our review consisted of 15 endometrial cancer cases diagnosed in 2017. Of the 15; nine - stage I, one - stage II, one - stage III, two - stage IV, and two - stage unknown.

According to NCCN guidelines stage I endometrial cancer (Grade 1 and 2) is treated with surgical resection followed by observation or vaginal brachytherapy and/or EBRT. Stage I endometrial cancer (Grade 3) patients may also be treated with systemic therapy. CCRMC treated nine - stage I endometrial cancers with surgical resection; of the nine one patient received vaginal brachytherapy post operatively, and one patient received hormone therapy via intrauterine device post operatively. All stage I patients received treatment concordant with NCCN guideline recommendations.

Evaluation of stage II endometrial cancer (Grade 1 and 2) treatment per NCCN guidelines includes surgical resection followed by vaginal brachytherapy and/or EBRT, (Grade 3) +/- systemic therapy. One stage II endometrial cancer patient treated at CCRMC received surgical resection followed by EBRT and vaginal brachytherapy revealing concordance with NCCN treatment guidelines.

Stage III and IV endometrial cancer treatment recommend by NCCN guidelines is surgical resection followed by systemic therapy and/or EBRT +/- vaginal brachytherapy. CCRMC treated one stage III patient who received surgical resection, chemotherapy followed by EBRT. Two stage IV patients were treated at CCRMC; one patient received surgical resection followed by chemotherapy while one patient was not treated due to comorbidities and therefore was recommended hospice care. Two stage unknown patients did not receive treatment.

Conclusion of this analysis is all patients diagnosed and/or treated at CCRMC for endometrial cancer are concordant with recommendations outlined in NCCN treatment guidelines.