**Results** All patients were managed by a multidisciplinary team, including an oncologist, cardiologist, cardio-resuscitator, and other specialists. An interdisciplinary approach allowed us to perform radical surgery, taking into account the tumor process’s characteristics. No intraoperative complications were noted. Postoperatively, one patient (5.9%) experienced the decompensation of CHF, which required intensive therapy.

**Conclusions** In patients with EC and severe comorbidities, the surgery should optimally be performed in tertiary hospitals with different specialists available. These patients usually require an individual management approach to prevent possible complications. Long-term outcomes, including the survival rate and quality of life, are determined by the results of EC treatment itself and how concurrent diseases are managed.