Results Five studies were included in the current analysis enrolling 223 women (191 with EC and 32 with CC) and 484 SLNs. The quality of the included studies was high. The number of the examined SLNs per patient ranged between one and five. The pooled sensitivity and specificity was 0.84 (95% CI 0.64 – 0.94, I²=34.59%) and 0.95 (95% 0.88 – 0.98, I²=87.58%), respectively. The pooled LR+ and LR- was 17.07 and 0.17, respectively. The pooled DOR was calculated 100.38 (95% CI 34.21 – 294.52, I²=85.24%). The SROC curve yielded an AUC of 0.95 (95% CI 0.93 – 0.97).

Conclusion The current evidence suggests that the OSNA assay is a useful and accurate technique for the intra-operative detection of SLN metastasis in early-stage EC and CC. The combined analysis using SLNs and OSNA assay is seemingly an attractive approach to tailor individualised management. The impact of micro-metastasis and isolated tumour cells on the prognosis of women with apparent early-stage EC and CC remains debatable and should be addressed in future research.

As this evidence is preliminary, cross-institutional collaboration is warranted.

Disclosures Professor SK declares personal fees for consulting from Roche and Astra-Zeneca, outside the submitted work. The remaining authors certify that no party has a direct interest in the results of the research and that no benefit will be conferred to us or any organisation with which we are associated.