Minimally invasive hysterectomy for stage IA cervical carcinoma: a survival analysis of the National Cancer Database

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Objectives
To evaluate the outcomes of minimally invasive surgery for patients with stage IA cervical carcinoma undergoing hysterectomy.

Methods
- Data drawn from the National Cancer Database between 2010 and 2015 with at least 1 month of follow-up.
- Patients with stage IA (IA1, IA2, IA not otherwise specified).
- Squamous adenocarcinoma adenosquamous carcinoma of the cervix, no history of another tumor.
- Underwent radical or simple hysterectomy with known mode of surgery.

Results
- 1930 patients were identified.
- 685 patients (35.5%) had open, 438 patients (22.7%) had laparoscopic, and 807 patients (41.8%) had robotic-assisted laparoscopic hysterectomy.
- No difference in OS between patients open and MIS hysterectomy (p=0.87); 4-year OS rates were 97.7% and 98.6%.
- No difference in OS between the open and MIS groups for patients who had simple or radical hysterectomy.
- MIS was not associated with worse survival than laparotomy (HR 1.06, 95% CI 0.65 to 1.72).

Conclusion
In stage IA cervical carcinoma, MIS was not associated with a detrimental effect on OS. Microscopic Cervical cancer could benefit from MIS approach.

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