Results From January 2020 to December 2021, 57 patients were enrolled (54 assessable): median age 56 years, 28 (52%) pre-treated by bevacizumab, median follow-up 7.4 months. For primary endpoint, 25/54 (46.3%) patients had disease control at 3 months and 6/54 (11.1%) patients presented a Grade ≥2 GU/GI fistula/perforation (5 fistula/1 perforation). Overall response rate was 9.3% (5/54), with no complete response. Median progression-free and overall survivals were 2.8 [95%CI: 2.5–4.6] and 8.9 [6.7–14] months, respectively. Toxicity-related dose reduction was observed for 26 patients. Grade ≥3 treatment-related adverse events were GI toxicities (13% G3, 2% G5), hypertension (7.5% G3), asthenia (14.8% G3).

Conclusion Cabozantinib monotherapy showed promising efficacy with manageable toxicity in a/m CC.

Introduction/Background Lymphoepithelioma-like carcinoma (LELC) is a very rare variant of squamous cell carcinoma (0.7% of primary cervical tumors). It has been identified in the lung, thymus, stomach, salivary glands and skin. Uterine cervical localization is very rare.

Methodology A retrospective descriptive study of 3 patients diagnosed with LELC of the uterine cervix in the radiotherapy oncology department of Farhat Hached Hospital, Sousse, Tunisia.

Results The patients were 26, 63 and 74 years old at the time of diagnosis. Clinical symptoms were dominated by metrorrhagia and pelvic pain. The gynecological examination showed a bleeding ulcerating mass of 4 to 12 cm long axis, delivered through the cervix in one patient and a bleeding cauliflower-like indurated cervix in the other two. The biopsy concluded to a LELC of the uterine cervix. The MRI showed locally advanced tumor with invasion of the vagina, parametria and posterior bladder wall, classified as FIGO in all 3 patients. Node involvement of the internal iliacs was observed in one patient. Two patients had comorbidities: one was treated by exclusive Radiotherapy (RT). The third patient was delivered at a dose of 45Gy with a complement up to 66Gy in only 2 patients, at a rate of 1.8Gy/session, 5 sessions/week. The evolution was marked by the occurrence of two local recurrences after 4 to 5 years, treated by palliative CT. After a median follow-up time of 8 years, two patients died while one patient was in full recovery.

Conclusion LELC of the uterine cervix is a very rare tumor, distinguished by its morphological character and its often favorable prognosis, which was not the case in our observation given the discovery of the tumor at a late stage compared to the literature.