The quality of diagnostics has improved due to an increase in incidence of stage I, as well as improved approaches to treatment, which is confirmed by data on an increase in survival. In addition, there was no difference in survival rates between urban and rural residents with a greater increase in survival rate among rural residents.

Introduction/Background

Tumors of the clitoris are very rare and it accounts 0.06% of all cancers of the female genital tract. This tumor has high malignant potential and very bad outcome of all treatment options.

Methodology

A 27-year-old girl presented to our hospital for an examination due to urinary incontinence, pelvic pain and visible tumor mass in the region clitoris. Clinical examination revealed a firm mass of size 5 cm in diameter. Tumor mass was arising from the clitoral area surrounded by normal connective tissue and mobile over the bone, with painful swelling of the clitoris. The patient has not been able to urinate for 24 hours and she has experienced swelling and pain in the clitoris for the past two months.

Results

Trans-vaginal ultrasound of internal genital organs, colposcopy examination of cervix and pap smear test were normal. With a clinical diagnosis of tumor, the patient was investigated with pelvis X-ray, chest X-ray and there was no positive findings. CT of the abdomen showed multiple metastatic changes in urinary bladder and pelvic wall. Tumor markers like CEA and Ca 125 were in normal range. We investigated with pelvis X-ray, chest X-ray and there was no positive findings. CT of the abdomen showed multiple metastatic changes in urinary bladder and pelvic wall. Tumor markers like CEA and Ca 125 were in normal range. We placed urinary catheter and took biopsy from the tumor mass. The histology confirmed squamous cell carcinoma but a primary carcinoma of the clitoris. Tumors were arising from the clitoral area surrounded by normal connective tissue and mobile over the bone, with painful swelling of the clitoris. The patient has not been able to urinate for 24 hours and she has experienced swelling and pain in the clitoris for the past two months.

Conclusion

Carcinomas clitoris are rare and important because of its aggressive nature of clinical course leading to early death in young patients.

Introduction/Background

Little is known about the unmet needs of women with vulvar cancer. The aim of this study was to explore the needs of women with vulvar cancer at the time of diagnosis.

Methodology

This is a prospective, longitudinal nationwide cohort study investigating health-related quality of life in women with vulvar cancer. Eligible women were diagnosed with primary vulvar cancer between 2019 and 2021. Participants completed five validated instruments including 15 items from the Supportive Care Needs Survey Short Form (SCNS-SF34) before start of treatment, and during follow-up. Here, we present results from the baseline questionnaire.

Results

136 of 153 (89%) included women completed the baseline questionnaire. Median age was 69 years, 62% were living in a relationship, and 70% had one or more comorbidities. Most women (73%) were diagnosed at FIGO stages IA-II, 96% were treated by surgery. More than every second woman reported needs for eight of the 15 selected items of the SCNS. The most reported needs concerned information about treatment, side-effects, and improved self-care. Besides, two thirds of women needed help in managing the fear of cancer spread (figure 1). Expressing high needs for information and help with fear of cancer spread was associated with more comorbidities (information how to help yourself: OR 10.2 (95% CI 1.9 – 54.6); information about side-effects: OR 10.2 (95% CI 1.9 – 54.6); information about care: OR 5.4 (95% CI 1.9 – 25.5); fear of cancer spread: OR 15.9 (95% CI 1.8 – 140.6)), but not with age, partner status, or FIGO stage.