Abstract EP155/#329

DEEP CERVICAL INJECTION: A NOVEL TECHNIQUE TO INCREASE BILATERAL SENTINEL LYMPH NODE DETECTION RATE IN ENDOMETRIAL CANCER PATIENTS WITH INDOCYANINE GREEN (TRSGO-SLN-008)

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Results A total of 163 patients had undergone primary surgery and 2 patients for recurrence. The audit showed that the target for categories of general indicators and pre-operative work-up were met. There was lack in compliance of the intra-operative management, with only 34% among presumed early-stage disease undergoing successful MIS, 31% undergoing sentinel lymph node procedure and 53% among them being done using indocyanine green with 18% bilateral mapping rate. None of the patients had complete molecular classification. Compliance of adjuvant treatment provided was adequate. Minimal required elements in surgical reports were in 81% and pathological reports in 91% of patients falling short of the set target.

Conclusions The audit helped us identify the need to increase MIS, use and adapt sentinel lymph node procedure with ICG dye more aggressively. There is also a need for improvement in documentation of pertinent information on surgical and pathology reporting. Molecular classification should be routinely incorporated into the diagnostic algorithm to aid in adjuvant therapy.
Objectives To identify trends associated with incidence of high risk endometrial cancers in native versus US Asians.

Methods Data were obtained from the United States Cancer Statistics and Republic of China Cancer Registry from 2001–2017. We defined high risk cancers as grade 3 endometrial (G3E), serous, clear cell, and carcinosarcoma. SEER*Stat 8.3.9.2 and Joinpoint regression program 4.9.0.0 were used to calculate trends.

Results Of 55,031 endometrial cancer patients, 28,204 (51%) were US and 26,827 (49%) were native Asians. In subset, serous cancer incidence (per 100,000) in 2017 was highest in US Asians (serous 1.25, G3E 1.15, carcinosarcoma 0.82) whereas G3E was over four fold higher than other cells types in native Asians (G3E 2.63, serous 0.64, carcinosarcoma 0.51). Over the 17 year study period, the incidence of high risk cancers increased annually at 2.3% in US Asians (serous increase: 6.3%) compared to 21.9% in native Asians (G3E increase: 14.8% (p<0.001). In analyzing mortality trends, US Asians had a higher annual increase in mortality compared to native Asians (+2.11% vs -2.99%). US Asians had an over two fold higher risk of death for ages 70+ at 22.9 (per 100,000) compared to 10.6 in native Asians.

Conclusions The incidence for high risk uterine cancer is increasing significantly more in the Republic of China vs. US. However, mortality rates are higher in the US. Further research is needed to better understand the social determinants and regional differences that may contribute to these trends.

Objective: The objective of this study was to analyze the protein overexpression and gene amplification of HER2/neu in endometrial carcinoma (EC) and to evaluate its role as a prognostic factor in Korean women.

Methods The tissue microarray was constructed of 191 patients with EC of diverse histologic type and tested. HER2/neu expression and amplification status were analyzed using immunohistochemistry (IHC) and silver in situ hybridization (SISH), respectively. All cases had been treated and followed up at a single tertiary medical center in Seoul, Korea between July 2009 and October 2020.

Results According to the histology type, 191 EC patients consisted of 157 endometrioid carcinoma, nine uterine serous papillary carcinoma (USPC), one clear cell carcinoma, one squamous cell carcinoma, eight mixed, and 15 uterine carcinosarcoma (UC). HER2/neu protein overexpression was observed in eight of 191 (4.2%) EC. The overexpression rates of USPC, UC and endometrioid carcinomas were 33.3%, 26.6% and 0.6%, respectively. HER2/neu protein overexpression was significant in USPC (P < 0.000) and associated with a poor overall survival (OS) (P < 0.000). HER2/neu gene amplification was confirmed in seven of 184 (3.8%), except for seven cases that were not applied, which was detected in three cases of USPC and four cases of UC. OS was significantly shorter in patients who showed amplification of HER2/neu (P < 0.000).

Conclusions HER2/neu protein overexpression and gene amplification in Korean women were significantly correlated with a worse OS. HER2/neu can be considered as an important predictor of survival outcome in EC patients.

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