SURGICAL OUTCOMES AND SURVIVAL ANALYSIS FOLLOWING PRIMARY SURGERY IN BORDERLINE AND MALIGNANT EPITHELIAL OVARIAN CANCERS (EOCS) – SINGLE CENTRE EXPERIENCE FROM SOUTH INDIA

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Introduction/Background Ovarian cancer is the second most common genital malignancy among women in India. Surgery has a unique role and its aim is staging and to remove all visible disease known as optimal cytoreduction. Primary debulking surgery (PDS), although, is the standard of care, its evidence is primarily indirect, derived from retrospective data. In this study we analysed the experience at our centre and also hoped to strengthen the armamentarium of published data on PDS in ovarian cancer.

Methodology This retrospective longitudinal study included women who underwent primary surgery for borderline and malignant EOCs 2011 - 2017 at VPS Lakeshore Hospital and Research Centre, Kochi, India. Patients’ age, tumour stage, histopathology, surgery status (optimal, suboptimal), post-operative stay and recovery, adjuvant chemotherapy, progression-free survival (PFS), and overall survival (OS) rate was collected. Primary outcome measured was OS and PFS. Secondary outcomes measured were morbidity and adverse effects. Univariate and multivariate Cox proportional hazard regression was used for OS and PFS. For statistical significance, p value of less than 0.05 was considered statistically significant.

Results A total of 81 patients who underwent primary surgery were analysed and followed up for a period of 5 years. 61.73% had stage I disease and 23.4% had stage III disease. 79 out of the 81 patients underwent optimal cytoreduction. 97.5% 5 year OS was 94.35% for stage 1 and 2 and 70.83% for stage 3 and 4. 5 year PFS for stage 1 and 2 was 94.73% and for stage 3 and 4 was 44.91%. Optimal cytoreduction was found to have a statistically significant positive correlation with OS on both univariate (p value = 0.0003) and on multivariate (p value = 0.0005) and PFS on univariate (p value = 0.0003) analysis.

Conclusion Primary surgery plays a key role with optimal debulking significantly contributing to OS and PFS.

Disclosures None