IS LYMPH NODE RATIO A PROGNOSTIC FACTOR IN STAGE IIIC (P) CERVICAL CANCER?

Methods: In this retrospective multicenter study, and Obstetrics stage IIIC (p) cervical cancer.

Objective: The aim of this study was to determine the prognostic value of lymph node ratio (LNR) as two groups according to LNR; LNR<0.05 and LNR≥0.05.

Results: Results: The median age of the patients was 50 (range, 25–81) years. Two hundred forty (71.6%) 95 (28.4%) patients were FIGO stage IIC1 and IIC2, respectively. There were 263 (78.5%) women with squamous cell carcinoma, 37 (11.0%) with adenocarcinoma, 28 (8.4%) with adenosquamous cell carcinoma, and 7 (2.1%) with other histologies. The median number of the harvested nodes was 39 (range, 5–138). The median number of removed pelvic lymph nodes was 28 (range, 1–97) whereas the corresponding figure 1 was 11 (range, 1–54) for para-aortic lymph nodes. With a median follow-up period of 30 months, the 5-year overall survival rates for LNR<0.05 and LNR≥0.05 were 87.7%, and 64.5%, respectively (p<0.001). Patients with a LNR greater than 5 percent had 2.7-fold increased risk for death (HR:2.7, 95% CI: 1.5–4.7, p<0.001)

Conclusion Conclusion: LNR≥0.05 seems to be a prognostic factor for decreased overall survival in stage IIIC (p) cervical carcinoma.

Dynamics of Urination in Patients after Radical Surgical Treatment of Cervical Cancer

Introduction/Background: The main question of the surgeon in the postoperative period is the possibilities of assessing the function of the lower urinary tract. Symptomatic assessment of urination disorders does not allow to diagnose since many symptoms are subjective and non-specific for a particular disease. Urodynamic study allows to assess the state of the urinary system and determine further tactics.

Methodology: The study included 173 patients with morphologically verified cervical cancer IB1-IB2 stages who underwent radical hysterectomy (RH). The main group consisted of 42 patients after RH type C1 using the water-jet technique. The comparison group A included 79 patients who underwent RH type C1 with the traditional technique. The comparison group B included 52 patients who accepted radical hysterectomy RH

Disclosures: The main advantage of water-jet method is selective dissection and preservation of nerve fibers and vessels with minimal deformation of the surrounding tissue. In the main group patients had no sign of bladder dysfunction and restored the function of the lower urinary tract in the shortest time.