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子宫内膜乳头状浆液性腺癌与透明细胞癌临床分析

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Clinical Analysis of Uterine Papillary Serous Carcinoma and Uterine Clear Cell Carcinoma

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摘要

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摘要 目的: 分析子宫内膜乳头状浆液性腺癌(UPSC)与透明细胞癌(UCCC)的临床特点及预后。方法: 回顾性分析天津市中心妇产科医院2004年4月至2012年7月收治的41例UPSC与19例UCCC临床资料。结果: UPSC完全手术分期24例, 早期(仅I期)9例, 晚期(III、IV期)15例。UCCC完全手术分期10例, 早期(仅I期)6例, 晚期(III、IV期)4例。单因素分析显示: 脉管浸润、腹水/腹腔冲洗液细胞学阳性及淋巴结转移者总生存期(OS)较短; 脉管浸润、肌层浸润、腹水/腹腔冲洗液细胞学阳性者无病生存期(DFS)较短。多因素Cox回归分析显示: 淋巴结转移、腹水/腹腔冲洗液细胞学阳性者的患者OS较短; 脉管浸润、腹水/腹腔冲洗液细胞学阳性者的患者DFS较短。结论: UPSC确诊时多为晚期, 预后差。治疗强调全面手术分期, 脉管浸润、肌层浸润、腹水/腹腔冲洗液及淋巴结转移与预后相关。

关键词: 子宫内膜乳头状浆液性腺癌 透明细胞癌 治疗 预后分析

Abstract: Objective: This study was designed to analyze the clinico-pathological features and prognostic factors of uterine papillary serous carcinoma (UPSC) and uterine clear cell carcinoma (UCCC). Methods: A retrospective analysis of 41 UPSC patients and 19 UCCC patients who were treated in Tianjin Central Hospital of Gynecology Obstetrics between April 2004 and July 2012 was performed. Results: Among the UPSC patients, 24 were subjected to comprehensive surgical staging, which revealed that 9 (37.5%) and 15 (62.5%) patients exhibited early- (only I) and advanced-stage (III/IV) carcinoma, respectively. For the UCCC patients, 10 were subjected to comprehensive surgical staging, which showed that 6 (60%) and 4 (40%) patients manifested early- (only I) and advanced-stage (III/IV) carcinoma, respectively. Univariate analysis results showed that vascular invasion, positive ascites/peritoneal washing cytology, and lymph node metastasis were the important prognostic factors for overall survival (OS). For disease-free survival (DFS), vascular invasion, myometrial invasion, and positive ascites/peritoneal washing cytology were the important prognostic factors. Multivariate analysis results revealed that vascular invasion and positive ascites/peritoneal washing cytology were the important prognostic factors for OS, whereas positive ascites/peritoneal washing cytology and lymph node metastasis were the important prognostic factors for DFS. Conclusions: Poor prognosis of patients was observed when most of them were initially diagnosed with UPSC, particularly when the diagnosis revealed advanced-stage carcinoma. Thus, comprehensive surgical staging is recommended. Furthermore, vascular invasion, myometrial invasion, and lymph node metastasis as well as the result of ascites/peritoneal washings should be considered during prognosis.

Key words: Uterine papillary serous carcinoma Uterine clear cell carcinoma Treatment Prognostic analysis

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