

Lymphovascular invasion (Core)

Reason/Evidentiary Support

Lymphovascular invasion is a predictor of tumour recurrence and lymph node metastasis.¹ However, lymphovascular space invasion does not alter the tumour stage. For example, if an endometrial adenocarcinoma is confined to the inner half of the myometrium but shows lymphovascular invasion in the outer half of the myometrium, this should still be staged as FIGO 1A. Similarly lymphovascular invasion alone in cervical, parametrial or para-ovarian vessels does not upstage the tumour. There is an increased incidence of vascular pseudoinvasion in laparoscopic hysterectomy specimens associated with the use of an intrauterine balloon manipulator.^{1,2}

References

- 1 Watari H, Todo Y, Takeda M, Ebina Y, Yamamoto R and Sakuragi N (2005). Lymph_vascular space invasion and number of positive para_aortic node groups predict survival in node_positive patients with endometrial cancer. *Gynecol Oncol* 96:651–657.
- 2 Logani S, Herdman AV, Little JV and Moller KA (2008). Vascular "pseudo invasion" in laparoscopic hysterectomy specimens: a diagnostic pitfall. *Am J Surg Pathol* 32:560-565.