Depth of cervical stromal invasion (Non-Core)

The National Comprehensive Cancer Network Clinical Practice Guidelines in Oncology Uterine Neoplasms lists deep cervical stromal invasion as an adverse risk factor in patients with Stage II endometrial carcinoma. While external beam radiation therapy is preferred in patients with surgically staged Stage II endometrial carcinoma, vaginal brachytherapy is listed as a valid option for those patients with low grade disease with minimal cervical stromal invasion and no tumour outside the corpus and cervix. 1

There is no clear definition of what constitutes 'minimal cervical stromal invasion'. A retrospective, single institution study by Orezzoli et al (2009) stratified cervical stromal invasion into four subcategories (≤ 1 millimetre (mm); >1 mm and ≤ 3 mm; >3 mm and ≤ 5 mm; >5 mm), and found no statistical association with survival.² Barnes et al (2019) reported on their retrospective, single institution experience study on brachytherapy alone in patients with low grade endometrial carcinoma and cervical stromal invasion confined to the inner half of the cervix, which showed good results.³ Absolute depth of cervical stromal invasion and percentage of cervical stromal invasion are non-core elements.

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