



Robotic surgery in the treatment of endometrial cancer

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Introduction

Endometrial cancer is a type of uterine cancer that originates in the inner lining of the uterus (endometrium). There are two types based on histological characteristics; type I cancers account for 80% of all endometrial cancers and are of endometrioid origin, while type II cancers originate mostly from serous, clear cells or in the presence of atrophic endometrium. The first step in treatment procedure is surgical staging, which consists of total hysterectomy with bilateral salpingo-oophorectomy and lymph node sampling. Robotic surgery for endometrial cancer has been reported to have decreased blood loss, shorter hospital stays and less postoperative complications when compared to traditional methods of surgery.

Aim of study

The purpose of our study was to determine if robotic surgery is safe for older women with endometrial cancer.

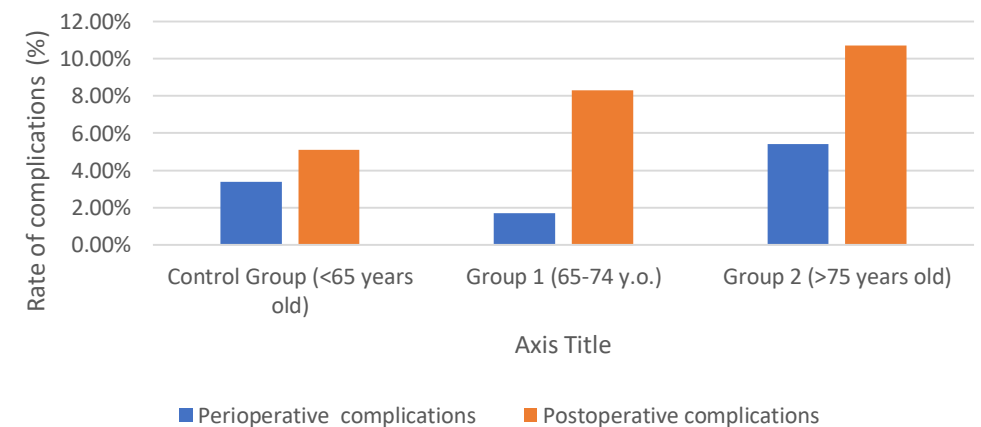
Method

In this retrospective study we have studied 354 patients of different age groups who had undergone robotic staging for treatment of endometrial cancer of different stages. They were divided into groups based on their age: Group 1 (65-74 years old), Group 2 (>75 years old) and control group (<65 years old). The rate of complications in these patients were then determined.

Results

We could observe an overall trend of increase in the rate of complications as the age of the patient increased. In the control group (patients <65 years old) the rate of perioperative complications was 3.4% and postoperative complications was 5.1%. While in Group 1 (65-74 years old), the rate of perioperative complications was 1.7% and the rate of postoperative complications was 8.3%. In group 2 (>75 years old), the rate of perioperative complications was 5.4% and the rate of postoperative complications was 10.7%.

Rate of complications according to age group



Conclusion

Our study has shown that older patients are at increased risk of perioperative morbidity and mortality due to the increased rate of complications present. However despite this, these results were marginal and robotic surgery still seems to be same for older patients.