

Early Stage Epithelial Ovarian Cancer (EOC)

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Background: We analyzed case records of 109 patients with early stage EOC diagnosed between Jan 1991 to Dec 2002 at our Institute to study the outcome.

Patients and Methods: Patient's median age was 46 years, ranging from 15 to 76 years.. FIGO staging revealed : stage1A – 28 (25.7%), I B – 6 (5.5%), I C – 53 (48.6%), II A – 2(1.8%), II B – 6(5.5%) and II C in 14 (12.8%) patients. Histopathologic subtypes were : serous papillary – 45%, mucinous – 27.5% , endometroid – 10.1%, clear cell – 3.7%, undifferentiated – 2.8% and adenocarcinoma NOS – 10%. Tumour grading (n=96) revealed : Grade 1 – 36(37.5%), II – 16(16.7%), and III in 44(45.8%) patients. Post surgery, residual disease was nil in 100 patients, less than 0.5cm in 2 (both Stage II C) and 0.5 - 1 cm in 7 patients (Stage II B – 1,II C – 6). 12 patients opted for conservative surgery in view of young age and nulliparity.

Results: 84 of 109 patients received adjuvant chemotherapy using either Cisplatin + Cyclophosphamide (CP) -55, CP+ Adriamycin (CAP) - 10, Taxol + Carboplatin – 5,

Carboplatin alone – 8 and melphalan alone as a single agent in 6 patients as per the existing chemotherapy protocols over these years. Currently, 89 (81.7%) patients are alive at a median follow up of 46 months. Kaplan and Meier probability of 5 and 10 years survival are 81% & 78% for stage I and 80% & 60% for stage II, respectively. Twenty-three (21%) patients had relapsed (Stage I A – 4, I C–13, II A- 3, II C –3), the median time to relapse was 22 months (range 6 to 90 months), 10 patients have died of progressive disease. 6 are alive and disease free and 2 are being treated with salvage chemotherapy. Among 12 patients (all belong to stage I) who underwent conservative surgery, 9 patients have received adjuvant chemotherapy. Six patients conceived & delivered healthy babies. 2 of these 12 patients have relapsed of whom one patient died of progressive disease.

Conclusions: Present study confirms the better outcome for patients with early stage EOC. Our findings suggest that patients with carefully staged IA disease can be considered for conservative surgery with similar outcome.

