Women's cancer outcomes improved by surgical evaluation

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Many women scheduled to undergo hysterectomy for pre-cancerous cell changes actually need a more comprehensive surgery, something they should discuss with a gynecologic oncologist, say researchers at the University of Alabama at Birmingham (UAB).

If seen by a specialist, it should be recommended they undergo a procedure that focuses on lymph nodes and other organs not involved in a traditional hysterectomy, said Warner Huh, M.D., a researcher at the UAB Comprehensive Cancer Center.

The finding was presented at the Society of Gynecologic Oncologists' 2009 Annual Meeting on Women's Cancer in San Antonio.

"Given the high rate of endometrial cancer, these data strongly suggest all women who have abnormal bleeding and a diagnosis of pre-cancerous lesions of the uterus should be evaluated by a gynecologic oncologist," Huh said.

Huh and his research team analyzed medical records of more than 3,322 patients treated at seven community hospitals across Alabama from 1999 to 2008. They specifically looked women diagnosed with pre-cancerous changes called complex atypical hyperplasia (CAH).

Of patients who underwent a traditional hysterectomy, about half were found to have invasive endometrial cancer after their procedure. That means too many hysterectomy patients should've had a more

comprehensive cancer surgery, something a gynecologist oncologist is trained to do, Huh said.

To avoid unwanted outcomes, women diagnosed with CAH should be referred to a gynecologic oncologist for evaluation, he said.

Source: University of Alabama at Birmingham