

Sentinel node biopsy safe for vulvar squamous cell cancer

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For women with squamous cell carcinoma of the vulva, sentinel lymph node biopsy may be safely used in place of inguinal femoral lymphadenectomy, according to research published online July 2 in the *Journal of Clinical Oncology*.

(HealthDay) -- For women with squamous cell carcinoma (SCC) of the vulva, sentinel lymph node (SLN) biopsy may be safely used in place of inguinal femoral lymphadenectomy, according to research published online July 2 in the *Journal of Clinical Oncology*.

To determine the safety of SLN as a replacement for inguinal femoral lymphadenectomy, Charles F. Levenback, M.D., of the University of Texas MD Anderson Cancer Center in Houston, and colleagues conducted a Gynecologic Oncology Group study involving 452 women with SCC where the primary tumor was limited to the vulva and the tumor size was between 2 and 6 cm with at least 1-mm invasion. Participants underwent intraoperative lymphatic mapping, biopsy of

SLNs, and inguinal femoral lymphadenectomy.

The researchers identified at least one SLN in 418 of the women. A total of 132 women were node positive, with 8.3 percent of these being false-negatives. Immunohistochemical analysis of the SLNs identified 23 percent of true positives with a sensitivity of 91.7 percent and a false-negative predictive value of 3.7 percent. The false-negative predictive value was even lower, at 2.0 percent, in women with tumors smaller than 4 cm.

"[Sentinel lymph node](#) biopsy is a reasonable alternative to inguinal femoral lymphadenectomy in selected women with [squamous cell carcinoma](#) of the vulva," the authors write.

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