

Vaginal brachytherapy cuts mortality in early uterine cancer

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(HealthDay)—For women with surgically staged IA or IB endometrial

adenocarcinoma, use of vaginal brachytherapy (VB) is associated with a reduction in mortality, according to a study published online Aug. 10 in *Cancer*.

Using the National Cancer Data Base, Nicholas R. Rydzewski, from the Northwestern University Feinberg School of Medicine in Chicago, and colleagues identified 44,309 women with surgically staged IA or IB endometrial adenocarcinoma who were treated with total hysterectomy from 2003 to 2011. The authors analyzed factors associated with treatment type and performed survival analyses.

The researchers found that 88.4 percent of the 33,380 women with [stage IA](#) tumors and 51.6 percent of the 10,929 women with stage IB tumors received no radiotherapy (RT). Independent associations were seen for older age, comorbid disease, higher histologic grade, and larger tumor size with increased mortality. For both stage IA and IB disease, receipt of VB was independently associated with a reduction in [mortality](#) (hazard ratios, 0.81 and 0.62, respectively).

"Analyses of this large database support the utility of postoperative VB for many [women](#) with stage I endometrial [cancer](#)," the authors write.

"Unfortunately, RT appears to be underused in this population. Greater adherence to consensus guidelines may lead to improved outcomes."

More information: [Abstract](#)
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