

Levonorgestrel IUD feasible for low-risk, early uterine cancer

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(HealthDay)—A levonorgestrel-releasing intrauterine device (LNG-



IUD) is effective in the majority of patients undergoing conservative treatment for low-risk endometrial cancer and complex atypical hyperplasia, according to a case-series study published online Dec. 4 in *Obstetrics & Gynecology*.

Navdeep Pal, M.B.B.S., M.P.H., from the University of Texas MD Anderson Cancer Center in Houston, and colleagues retrospectively reviewed 46 cases treated with the LNG-IUD for complex atypical <u>hyperplasia</u> or early-grade endometrial cancer from January 2003 to June 2013.

The researchers found that 15 of the 32 evaluable patients at the sixmonth time point had complex atypical hyperplasia (47 percent), nine had G1 endometrial cancer (28 percent), and eight had grade 2 endometrial cancer (25 percent). At six months, the overall response rate was 75 percent (80 percent in complex atypical hyperplasia, 67 percent in grade 1 endometrial cancer, and 75 percent in grade 2 endometrial cancer). There was a trend toward an association between lack of exogenous progesterone effect in the pathology specimen and nonresponse to the IUD (P = 0.05). In women who did not respond to the IUD, median uterine diameter was 1.3 cm larger (P = 0.04).

"Levonorgestrel-releasing IUD therapy for the <u>conservative treatment</u> of complex atypical hyperplasia or early-grade <u>endometrial cancer</u> resulted in return to normal histology in a majority of patients," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

More information: <u>Abstract/Full Text (subscription or payment may</u> <u>be required)</u>

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