Poster 46: Cancer Survival in Women Diagnosed with Leiomyosarcoma of the Uterus
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Topic: Uterine

Objectives
Black women with endometrial cancer have a disproportionately worse disease-specific survival and markedly higher mortality compared to white women. In addition, Black women are more likely to have uterine sarcomas compared to white women. The aim of this study was to examine overall prognosis and survival among different racial groups diagnosed with high-grade uterine leiomyosarcoma.

Methods
An inter-institutional review of women diagnosed with uterine leiomyosarcoma (LMS) between January 2000 to December 2020 was performed from the hospital systems’ cancer registry databases. Patient and treatment course data were collected. Patients with a primary diagnosis of uterine smooth muscle tumor of uncertain malignant potential with subsequent diagnosis of metastatic LMS and those with LMS of other gynecologic origin were excluded. Overall survival outcomes were stratified by race and ethnicity. Survival analysis was performed using Kaplan-Meier product limit estimator, and significance (P value < 0.05) was calculated by log rank tests.

Results
This study included 64 women with median age 51 years (range 25 – 85 years). The most common symptom at presentation was abnormal uterine bleeding (n=33, 51.6%). The most frequent stage at diagnosis was stage I (n=40; 62.5%). Thirty patients were Black (47%), 19 were non-Hispanic, non-Black (27%), and 15 were Hispanic, non-Black (32%). Median overall survival among all patients was 92 months. Median overall survival was 65 months among Hispanic, non-Black women, 101 months among Black women, and 105 months among non-Hispanic, non-Black women (p = 0.298). Median overall survival was 105 months for Stage I disease and 40 months for Stages II-IV disease (p = 0.048).

Conclusions
Most women with leiomyosarcoma present with stage I disease. We found no significant difference in overall survival between races. The dismal overall survival seen for Stages II-IV underscores the need for improved therapy options.

Abstract Table or Graph