

Poster 2: Clinical characteristics of patients with cervical cancer undergoing fertility-sparing surgery with cervical excision and lymph node evaluation

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Topic: Cervival

Sub-Topic

Objectives

Our objective was to examine clinical characteristics of patients with cervical cancer who underwent fertility-sparing surgery with cervical excision and lymph node evaluation.

Methods

This was a retrospective cohort study sampling the Healthcare Cost and Utilization's Nationwide Ambulatory Surgery Sample. 134 (4.7%) patients were included for cervical excision and lymph node evaluation, 112 (4.0%) patients for trachelectomy with lymph node evaluation, and 2,579 (91.3%) patients for radical hysterectomy. Multinomial regression modeling was used to identify independent outcome measures for the exposure. Clinical demographics and hospital characteristics in the cervical excision and lymph node evaluation group were the main outcomes measured.

Results

The median age was 32, 34, and 45 years for the cervical excision, trachelectomy, and radical hysterectomy groups, respectively. In multivariable analysis comparing to the radical hysterectomy group, patients in the cervical excision and lymph node evaluation group were younger (adjusted-odds ratio [OR] for age ≥35 years 0.10, 95% confidence interval [CI] 0.07-0.14), and were more likely to be non-obese (aOR for obese 0.39, 95%CI 0.19-0.79) and receive the surgery in recent year (aOR for 2018-2019 vs 2016-2017 2.41, 95%CI 1.66-3.49). When compared to the trachelectomy and lymph node evaluation group, patients in the cervical excision and lymph node evaluation group were also younger (aOR for ≥35 years 0.59, 95%CI 0.35-0.99) and more likely to be non-obese (aOR for obesity 0.34, 95%CI 0.15-0.78) in sensitivity analysis.

Conclusions

This national-level analysis suggests that the utilization of cervical excision and lymph node evaluation for reproductive-age women with cervical cancer may be gradually increasing in the recent years in the United States.