

**Poster 33: Tumor size predicts overall survival in uterine carcinosarcoma****Presenting Author:** Hannah M. Beer, MD UT Southwestern Medical Center

Topic

Uterine

Sub-Topic

**Objectives**

The study objective is to determine if tumor size predicts survival in uterine carcinosarcoma (UCS) and if tumor size correlates with lymph node (LN) metastasis.

**Methods**

We performed a retrospective review of patients treated for UCS at our institution from 2009-2023. Patients with Stage I – IIIC UCS who underwent surgery followed by chemotherapy +/- radiation were included. Patients were grouped based on tumor size (< 5cm, 5-< 10cm, and >10cm). Study endpoints were overall survival (OS) and progression-free survival (PFS). Patients were grouped based on tumor size 1-< 3cm, 3-< 5cm, 5-< 10cm, and >10cm when assessing tumor size association with LN metastasis. Kaplan-Meier plot and log rank test were used to generate survival analysis. Chi square tests were used to assess associations.

**Results**

75 patients with Stage I to IIIC UCS were included. The median age was 64 years old. The majority were black (54%) with an average BMI of 32. 22 patients (29%) had tumor size < 5cm, 33 patients (44%) had tumor size 5-10cm and 20 patients (27%) had tumor size > 10cm. The median PFS and OS was 20.2 months (95% CI: 15.4 – 72.5 months) and 28.9 months (95% CI: > 21.7 months). Those with smaller tumor size had longer PFS and OS ( $p=0.042$  and  $p=0.018$  respectively). Larger tumor size did not correlate with lympho-vascular space invasion ( $p=0.197$ ). 47 patients (63%) had Stage I-IIIB UCS and 28 patients (37%) had Stage IIIC. There was no difference in PFS and OS based on tumor size in lymph node negative patients ( $p=0.49$  and  $p=0.18$  respectively). Tumor size was not associated with lymph node metastasis ( $p=0.094$ ).

**Conclusions**

Tumor size is predictive of overall survival and progression free survival. Tumor size is not predictive of lymph node metastasis.