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138例宫颈腺癌卵巢转移危险因素分析

肖仲清, 舒勇宽, 龙生根

江西省妇幼保健院肿瘤科 (南昌市330006)

Analysis of Risk Factors for Ovarian Metastasis in 138 Cases of Cervical Adenocarcinoma

Zhongqing XIAO, Kuanyong SHU, Shenggen LONG

Department of Gynecological Oncology, Jiangxi Maternity and Child Healthcare Hospital, Nanchang 330006, China

摘要

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摘要 探讨宫颈腺癌卵巢转移的危险因素。方法：回顾性分析1993年1月至2008年12月江西省妇幼保健院肿瘤科收治的138例宫颈腺癌患者的临床病理资料（首次治疗方式均为手术治疗），采用SPSS 19.0统计软件Fisher精确检验分析和Logistic回归分析其卵巢转移的危险因素。结果：138例宫颈腺癌I~II期患者中发生卵巢转移4例，转移率2.90%；Fisher精确检验分析显示：临床分期（P<0.01）、宫旁受侵（P<0.01）、输卵管转移（P<0.05）、盆腔淋巴结转移（P<0.01）与卵巢转移相关；Logistic回归分析显示：FIGO 2009临床分期（OR=27.923）、输卵管转移（OR=133.000）与卵巢转移相关。结论：对于临床I~II期宫颈腺癌患者保留卵巢存在一定风险，但是对于希望保留卵巢功能的年轻患者，在仔细评估卵巢转移高危因素后可考虑保留卵巢。

关键词： 宫颈腺癌 卵巢转移 危险因素

Abstract: To analyze risk factors for ovarian metastasis from cervical adenocarcinoma. Methods: The clinicopathologic data of 138 patients with adenocervical cancer admitted to the Department of Gynecological Oncology, Jiangxi Maternity and Child Healthcare Hospital between January 1993 and December 2000 were analyzed retrospectively. The risk factors of ovarian metastasis were subjected to Fisher accurate inspection analysis and logistic regression analysis using SPSS 19.0. Results: Among the 138 cervical adenocarcinoma (stages I and II) patients, 4 had ovarian metastasis and the transfer rate was 2.90%. The Fisher accurate inspection analysis showed that ovarian metastasis was related to the clinical stage (P < 0.01), palace metastasis (P < 0.01), fallopian tube metastasis (P < 0.05), and pelvic lymph node metastasis (P < 0.01). The logistic regression analysis showed that ovarian metastasis was related to the FIGO clinical stage (OR = 27.923) and oviduct metastasis (OR = 133.000). Conclusion: There are some risks for clinical stage I-II cervical adenocarcinoma patients. The risk factors for ovarian metastasis for young patients who want to keep ovaries must be carefully assessed.

Key words: Cervical adenocarcinoma Ovarian metastasis Risk factors

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通讯作者: 肖仲清 E-mail: xzq369@yahoo.cn

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电话/传真: (022)23527053 E-mail: cjco@cjco.cn cjcotj@sina.com 津ICP备1200315号