

# 子宫内膜癌临床病理特征与盆腹腔淋巴结转移的相关性分析

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**Title:** The correlation analysis between clinical pathological characteristics and pelvic or para-aortic lymph node metastasis in endometrial carcinoma

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**摘要:** 目的: 探讨子宫内膜癌临床病理特征与盆腹腔淋巴结转移的相关性。方法: 选取162例子宫内膜癌患者, 分析临床病理资料, 探讨盆腹腔淋巴结转移的相关因素。结果: 162例子宫内膜癌患者中, 9例发生盆腔淋巴结转移, 7例发生腹主动脉旁淋巴结转移。非内膜样腺癌、FIGO III期、脉管浸润、治疗前CA125高于正常水平的患者盆腔淋巴结转移率高, 差异有统计学意义; FIGO III期、脉管浸润、肿瘤直径>2 cm、治疗前CA125水平高于正常及盆腔淋巴结阳性的患者腹主动脉旁淋巴结转移率高, 差异有统计学意义。多因素COX回归分析: FIGO分期、病理类型、脉管浸润为淋巴结转移的高危因素。结论: 非子宫内膜样腺癌、FIGO分期、脉管浸润、治疗前CA125高水平与子宫内膜癌盆腔淋巴结转移存在相关性, FIGO分期、脉管浸润、肿瘤直径、治疗前CA125水平、盆腔淋巴结与子宫内膜癌腹主动脉旁淋巴结转移存在相关性。

**Abstract:** Objective: To explore the relationship between clinical pathological characteristics and lymph node metastasis in endometrial carcinoma. Methods: 162 patients were recruited and clinical pathological data were collected and analyzed. Results: 9 cases had pelvic lymph node metastasis and 7 cases appeared para-aortic lymph node spread in total patients. It was shown that there was significant difference on metastasis rate in the patients with non-endometrial adenocarcinoma, FIGO III stage, vascular infiltration, higher pre-treatment CA125 level ( $P < 0.05$ ). The same statistic result was displayed in patients having para-aortic lymph node metastasis, which in FIGO III stage, vascular infiltration, tumor diameter ( $> 2$  cm), higher pre-treatment CA125 standard and pelvic lymph node metastasis ( $P < 0.05$ ). Multivariate COX regression analysis showed that FIGO stage, pathologic types and vascular infiltration were the risk factors of patients with lymph node metastasis. Conclusion: There is convincing relationship between pelvic lymph node metastasis and non-endometrial adenocarcinoma, FIGO III stage, vascular infiltration and higher pre-treatment CA125 levels in endometrial carcinoma patients. While the factors associated with para-aortic lymph node metastasis in patients with endometrial carcinoma were FIGO III stage, vascular infiltration, tumor diameter ( $> 2$  cm), higher pre-treatment CA125 levels and pelvic lymph node dissemination.

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备注/Memo: -

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