## A retrospective analysis of the diameter of metastatic lymph nodes in apparently early stage endometrial cancer

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## ABSTRACT

Aims and background. The objective of this retrospective study was to assess the diameter of metastatic lymph nodes in a population of women with apparently early stage endometrial cancer at laparotomy.

Methods and study design. Among 700 cases with endometrial cancer, 27 cases with disease clinically limited to the uterus in the laparotomy and found to have retroperitoneal node metastasis after pathologic examination were included in this study. Pathologic characteristics of the tumors, pelvic and para-aortic node counts and the largest diameter of each metastatic node were evaluated.

Results. The median number of nodes removed was 38; median number of pelvic and para-aortic nodes was 29 and 8, respectively. A total of 85 metastatic nodes were identified. Mean diameter of the metastatic para-aortic and pelvic nodes was 6.8 mm and 9 mm, respectively. Nine patients had single metastatic nodes, and the diameters of the single metastatic para-aortic lymph node was 1 mm in one case, 2 mm in one case, 3 mm in one case and 4 mm in one, and 5 mm in two patients. Two cases had isolated para-aortic lymph node metastasis without pelvic lymph node metastasis. Diameters of the metastatic para-aortic lymph nodes were 4 and 5 mm in one case and 4 mm in the other case.

Conclusions. The diameters of metastatic nodes may be as small as 1 mm. By sampling or selective para-aortic and/or pelvic lymphadenectomy, some of the nodes might go undiagnosed, and such understaged cases cannot take adjuvant therapy (chemotherapy-radiotherapy). For correct staging of cases with endometrial cancer, complete systematic para-aortic and/or pelvic lymphadenectomy might be appropriate.

**Key words:** endometrial cancer, lymph node diameter, lymph node sampling.

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