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Clinical outcome of recurrent locally advanced cervical cancer (LACC) submitted to primary multimodality therapies

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Objectives: Recurrence of disease represents a clinical challenge in cervical cancer patients, especially when all available treatment modalities have been used in the primary setting. The aim of this study was to analyze the patterns of recurrence and their association with clinical outcome in locally advanced cervical cancer (LACC) patients submitted to primary chemoradiation (CTRT) followed by radical surgery (RS).

Methods: This study was conducted on 364 LACC patients treated with CTRT plus RS since January 1996 to July 2012. For each relapse, information on date of clinical/pathological recurrence, and pattern of disease presentation were retrieved. Post-relapse survival (PRS) was recorded from the date of recurrence to the date of death for disease or last seen. Survival probabilities were compared by the log rank test. Cox's regression model with stepwise variable selection was used for multivariate prognostic analysis for PRS.

Results: Within a median follow-up of 42 months, 75 recurrences (20.6%) and 54 disease-associated deaths (14.8%) were recorded. By analyzing the pattern of relapse, most of the recurrences were outside the irradiated field (n=43, 57.3%) and the most frequently observed site was visceral (n=16, 21.3%). Among the parameters of the recurrence associated with PRS including the pattern of recurrence, the size of recurrence, SCC-Ag serum levels at recurrence, and secondary radical surgery, only the last one retained an independent predictive role in reducing the risk of death (p=0.037).

Conclusions: The feasibility of secondary radical resection positively impacts on PRS of LACC patients submitted to multimodality primary treatments. The analysis of the factors influencing PRS, in patients with recurrences from early cervical cancer submitted to primary RS, is ongoing.

Biography

Francesco Legge is the Head of Gynecologic Oncology Unit of the Miulli General Regional Hospital. He has gained the national habilitation for Associate Professor (January 2014) and he has a PhD in Molecular Pathology in Gynecologic Oncology (Catholic University of Rome, 2006). His main clinical and scientific interests are focused on clinical and translational research in Gynecologic Oncology. He is author of 118 publications, including 52 papers in international peer-reviewed journals, including *J Clin Oncol*, *Cancer Res*, *Cancer*, *Br J Cancer*, *Gynecol Oncol* with Mean Impact factor of 3.56 and h-index of 20. He has 1294 total citations.

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