MELF PATTERN OF MYOMETRIAL INVASION OF ENDOMETRIOID ENDOMETRIAL ADENOCARCINOMA. A PROGNOSTIC FACTOR
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INTRODUCTION: Myometrial invasion (MI) in endometrioid endometrial adenocarcinoma (EEA) is a prognostic factor associated with survival and recurrence. It is classified according the depth of infiltration into one half or less, or more than one half of myometrium thick. Recently a characteristic pattern of myometrial involvement has been described as MELF according the characteristics of the infiltrating gland: Microcystic, Elongated and Fragmented. The aim of this report is to correlate the presence of MELF MI with other morphological characteristics of EEA. MATERIAL AND METHODS: The hysterectomy specimens performed for EEA at our Institution from December 2011 until July 2016 have been reviewed. Those cases of synchronic endometrioid tumors involving endometrium and ovary have been excluded. When MI was detected, the slides were screened looking for MELF pattern defined as: Microcystic glands lined by a flattened cells with squamoid appearance. Elongated glandular structures lined by and endothelial-like cells. Fragmented cluster or detached cells in an edematous or myxoid stroma. RESULTS: A total of 71 cases were reviewed. MELF was detected in 17 of 48 (35%) tumors with MI. Patients with MELF were slightly younger. MELF pattern was mainly present in tumors grade 2 or 3, with deep myometrial invasion, pelvic lymph nodes involvement and stage higher than I. In all cases but one (94%) the MELF pattern was focal. CONCLUSION: MELF is a characteristic myometrial invasion pattern in EEA that correlates with other morphologic features of bad prognosis such as high grade, deep myometrial invasion and pelvic lymph node involvement.