

BORDERLINE OVARIAN TUMORS AT EARLY STAGES: IMPACT OF THE EXTENSION OF THE SURGICAL TREATMENT ON THE PROGNOSIS OF PATIENTS

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Objective: Compare the evolution of patients with borderline ovarian tumors at early stages depending on the kind of surgical treatment received, either conservative (cystectomy or oophorectomy) or complete surgery (double adnexectomy ± hysterectomy). **Methods and Materials:** Retrospective review of clinical history of 44 patients with borderline ovarian tumors treated at the Hospital Sant Joan de Deu (Esplugues) between 1984 and 2014. **Results:** Up to 45.3% of patients aged between 33 and 45 years at diagnosis, 15.9% were younger than 33 y/o and 38.7% were older than 45. 68.2% were premenopausal and 31.8% were postmenopausal. 65.9% of patients received complete surgery while 34.1% went for conservative surgery (their average ages were 53 and 32 years respectively). 95.5% of tumors were diagnosed at stage I and 4.5% at stage IIC. The surgery was optimal in 100% of cases. 3 of the patients (6.8%) had poor prognostic factors and only 2 (4.7%) received adjuvant chemotherapy. The average follow-up time was 6.5 years. Actually 32 of the patients have been discharged and 12 continue controls; no recurrence has been documented (100% of survival). **Comments:** As expected due to the fact that most of the patients were over 45 at diagnosis, complete surgery was the most frequent treatment. No differences were observed between groups (conservative and complete surgery) regarding to the survival and recurrence rates. **Conclusions:** No differences on short term prognosis were observed between groups, fact that could be useful to perform prospective studies to evaluate if patients with borderline ovarian tumors at early stages could benefit of conservative surgery regardless of age.