

Audit of endometrial cancer patients over one year in a DGH

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Objectives

check adherence to the cancer pathway and understand the patient characteristics related to endometrial cancer so better risk assessment tools can be generated.

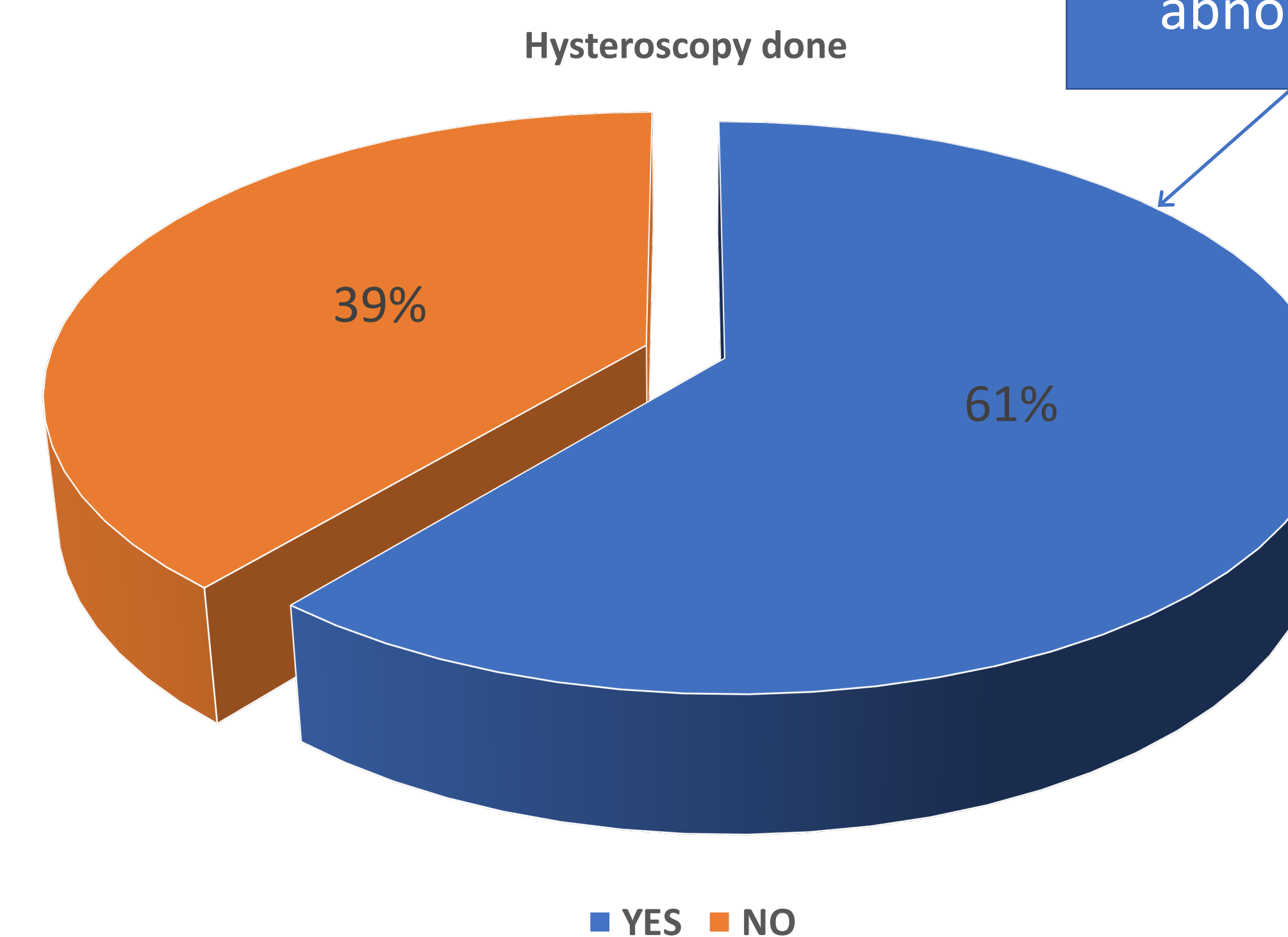
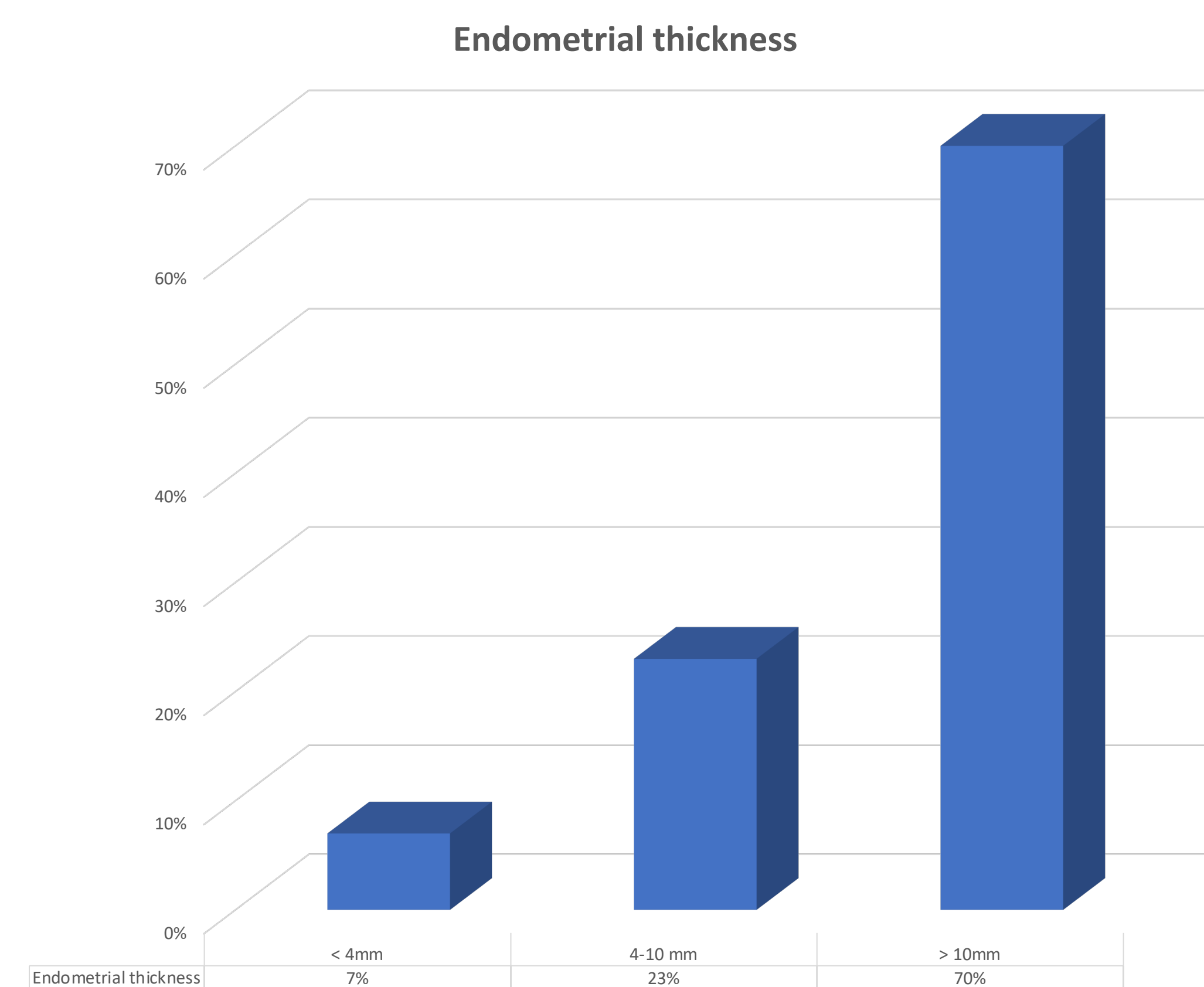
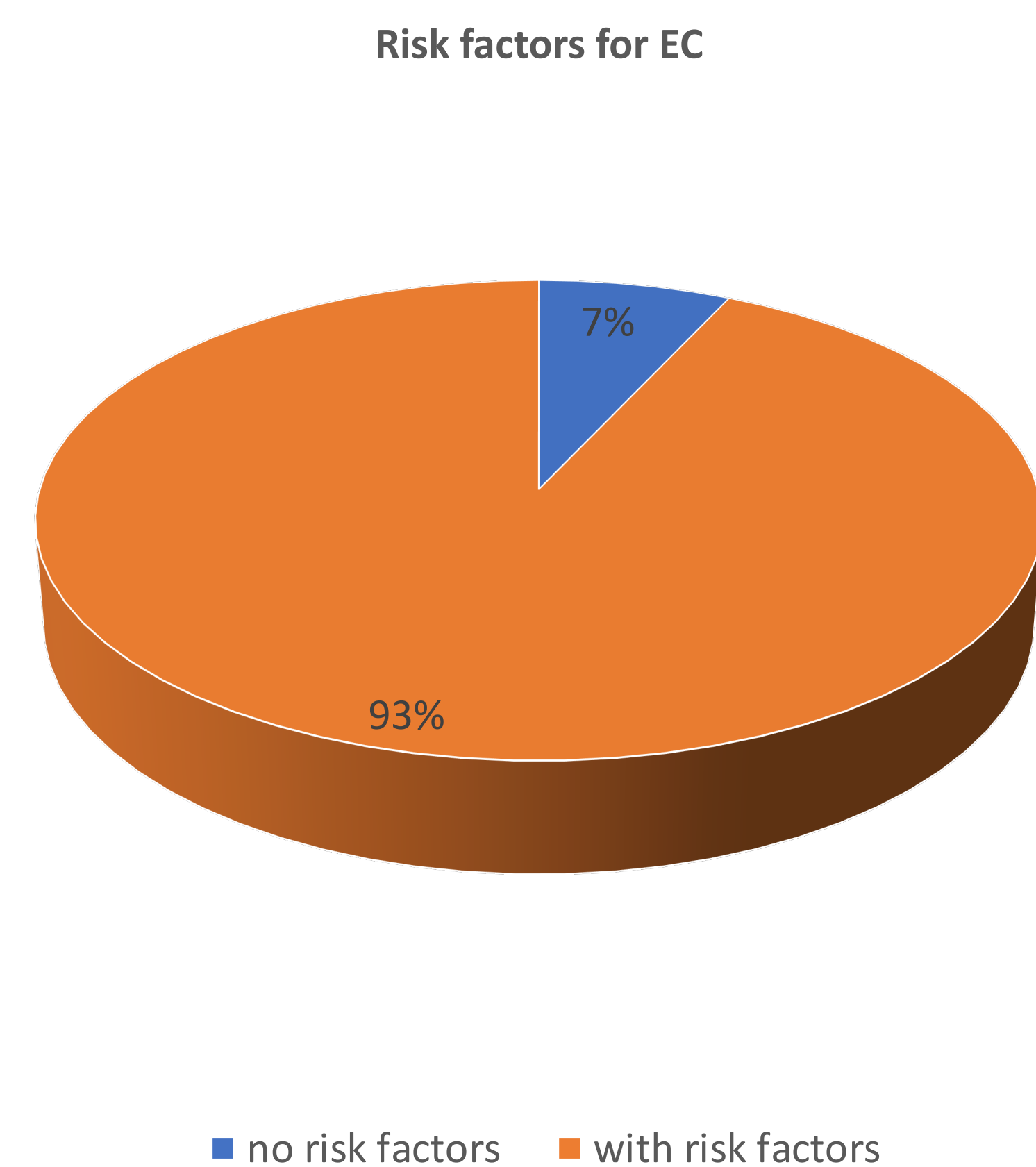
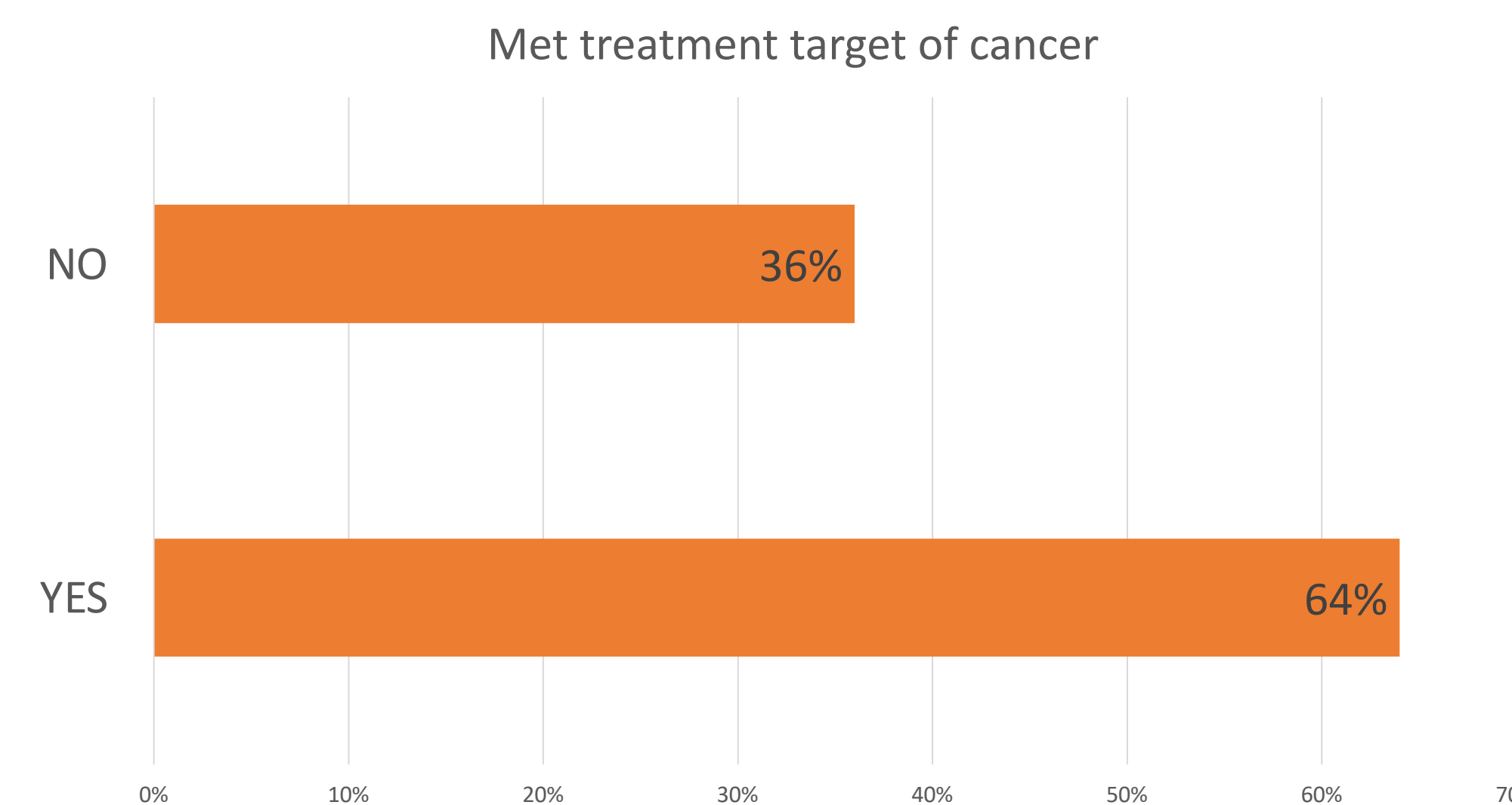
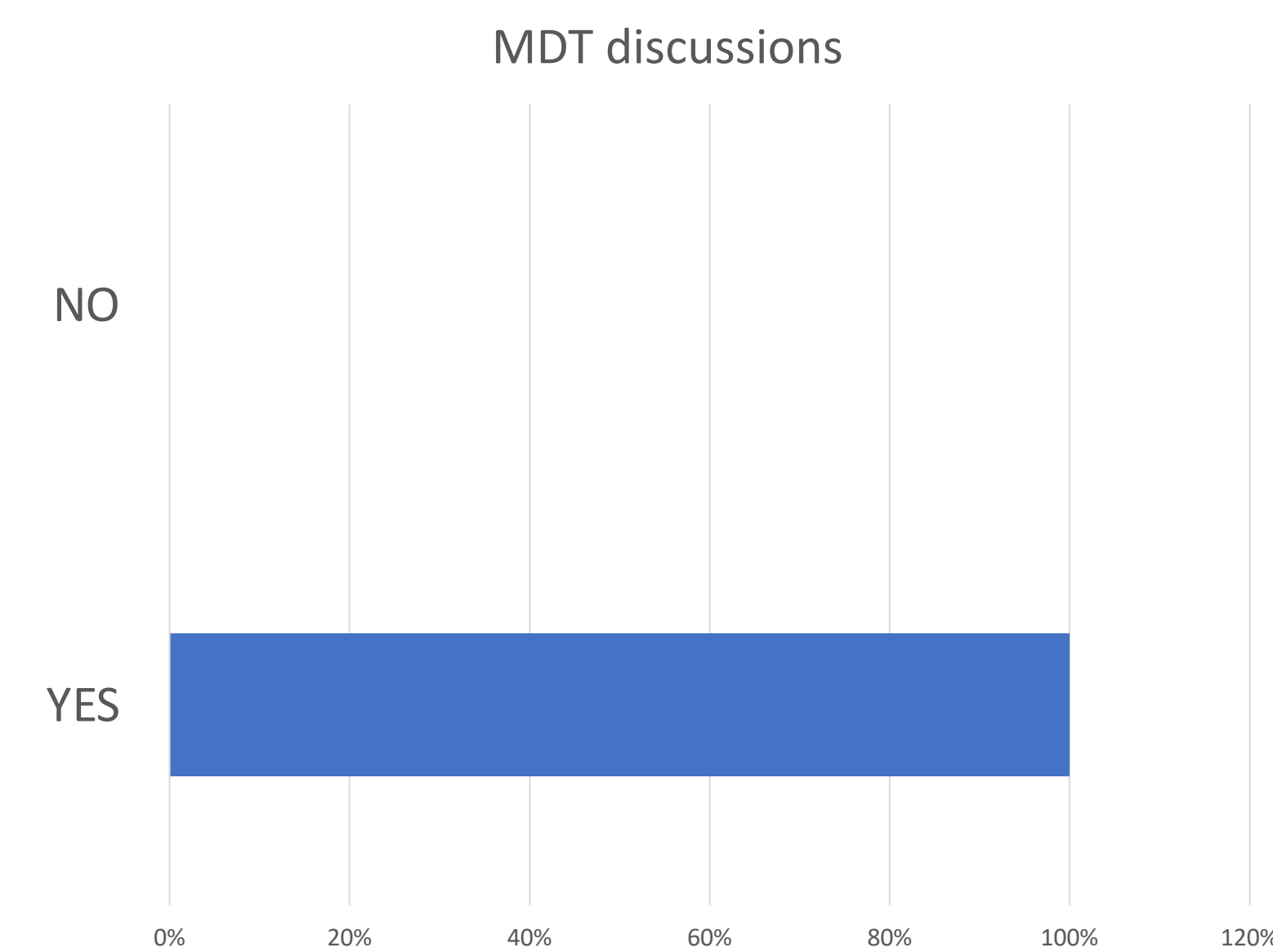
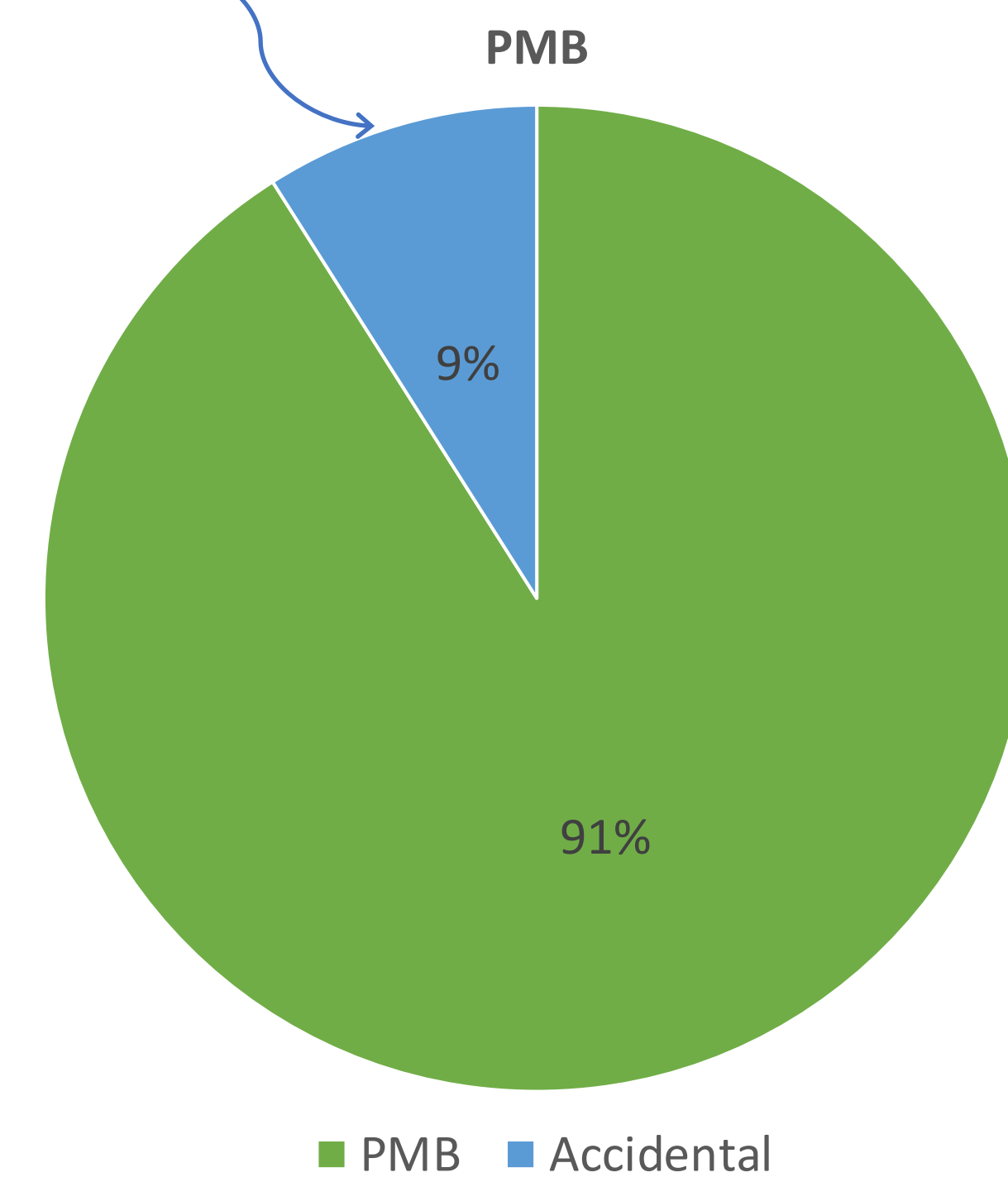
Design & method

retrospective audit, where we collected data of 76 patients who were diagnosed with endometrial cancer over one year within our Health Board using an audit proforma, spread the data over an Excel sheet and got the main figures.

conclusions

- 1) Endometrial cancer is strongly linked to older age and the presence of multiple risk factors, especially high BMI and a thick endometrium.
- 2) Chance of endometrial cancer can still be high with a thin endometrium if there are ultrasound features like irregularity, increased vascularity or polyps or if the patient has multiple risk factors. Therefore, histological assessment is highly recommended in these patients.
- 3) Hysteroscopy combined with endometrial biopsy has a high sensitivity to endometrial cancer; 93% without biopsy and 100% with biopsy in this audit.
- 4) Pipelle endometrial biopsy proved to be a reliable method to diagnose endometrial cancer in incidental finding of a thick endometrium.
- 5) The post menopausal bleeding pathway should include patients characteristics as a triaging method besides the ultrasound scan to avoid missing patients with cancer and decrease the number of patients who get a late treatment.

All these cases were diagnosed by pipelle biopsy



Hysteroscopic appearance of endometrium was abnormal in all cases !