## **Prognostic Factors in Endometrial Carcinoma**

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## **Abstract**

Endometrial carcinoma is the third most common carcinoma of the female genital tract in Singapore. Although most endometrial carcinomas are detected while still at low stage, there is still a significant mortality from the disease. It is desirable that patients at high risk of relapse are identified early for consideration for additional treatment. Some information required for management can be obtained from clinical history, gross examination of the uterus and routine microscopy. These are age, stage of disease, histologic type of carcinoma (serous carcinoma and clear cell carcinomas are poor prognostic types), grade and lympho-vascular space involvement. Of less certain significance are tumour size, location and status of peritoneal cytology. Other factors currently being investigated are oestrogen and progesterone receptor status, p53 status, flow cytometric analysis for ploidy and S-phase fraction, and oncogenes such as HER-2/neu (c erbB-2). Although some of these show independent prognostic significance on multivariate analysis, it is still uncertain if the information adds significantly to the information available from routine evaluation.

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Key words: Clear cell carcinoma, Lympho-vascular space involvement, Peritoneal cytology, Ploidy, Uterine serous carcinoma