

# Endometrial Cancer

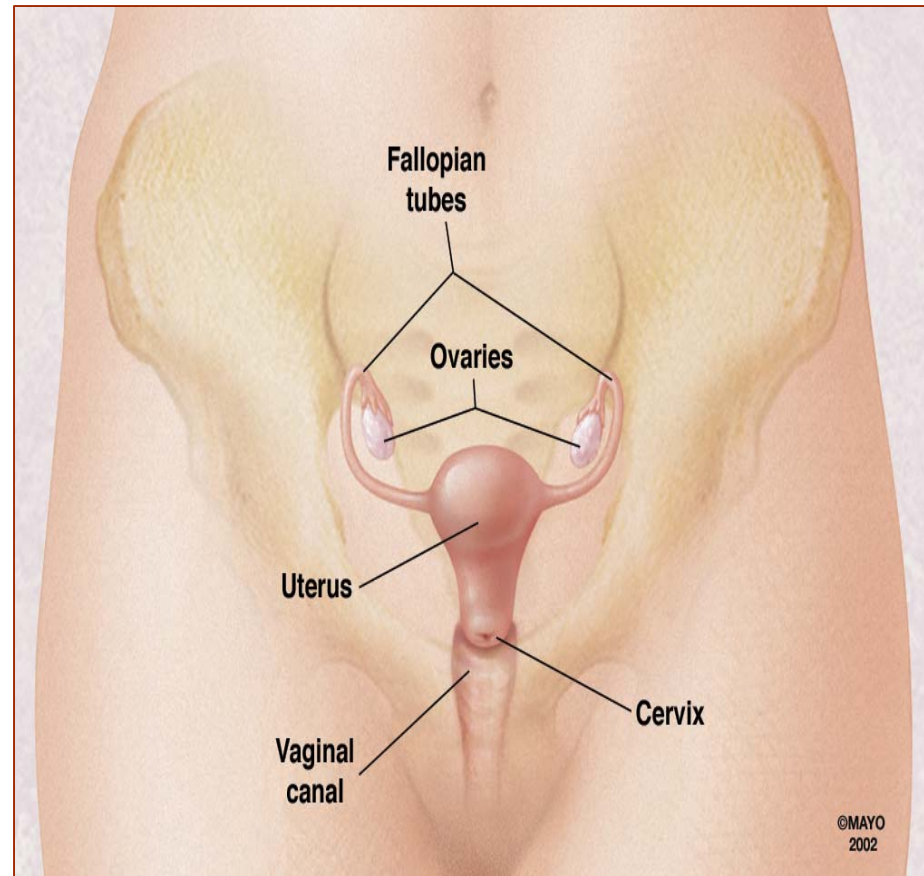
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Division of Gynecologic Oncology

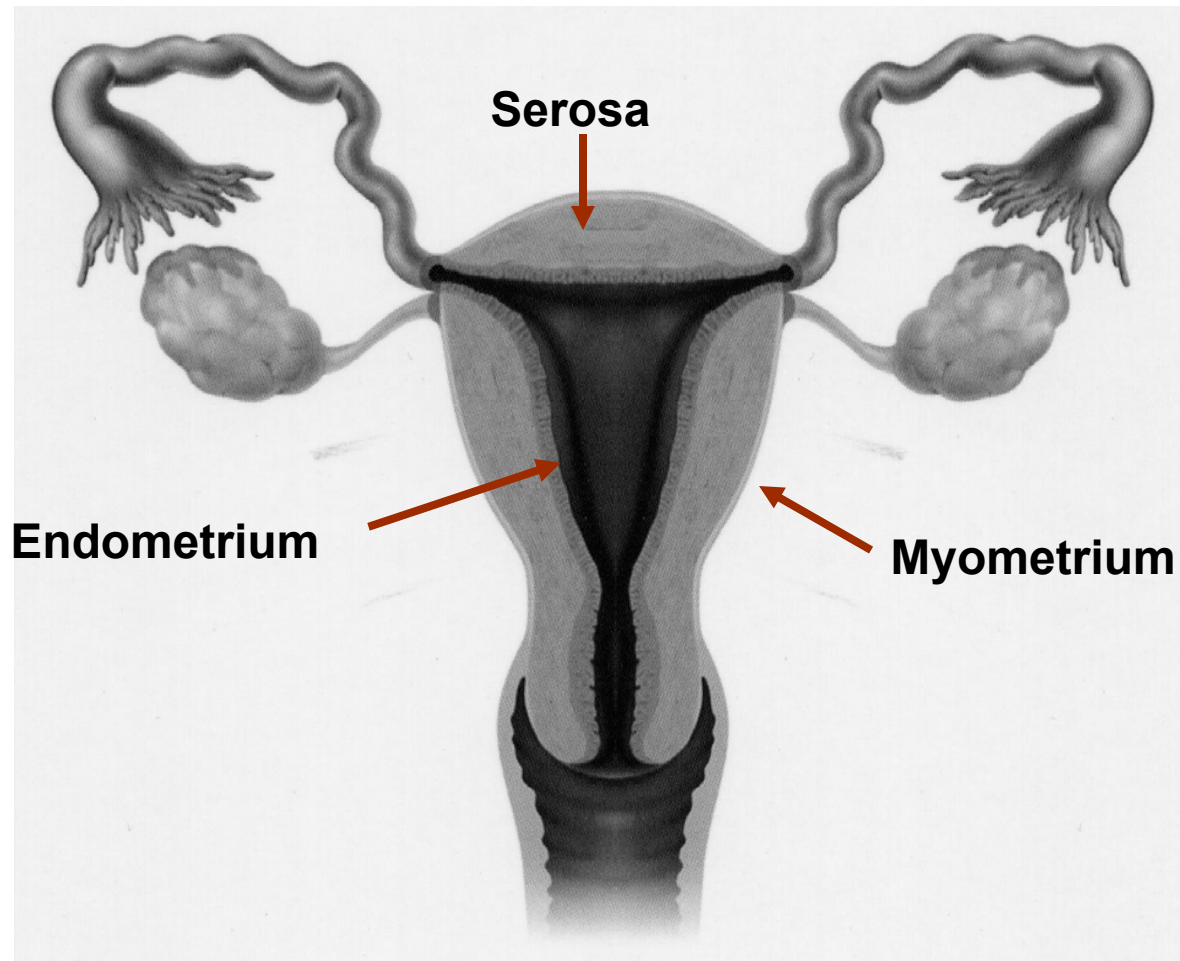


# Gynecologic Malignancies

- Vulva
- Vagina
- Cervix
- Uterus
- Fallopian tubes
- Ovaries



# Uterine Anatomy



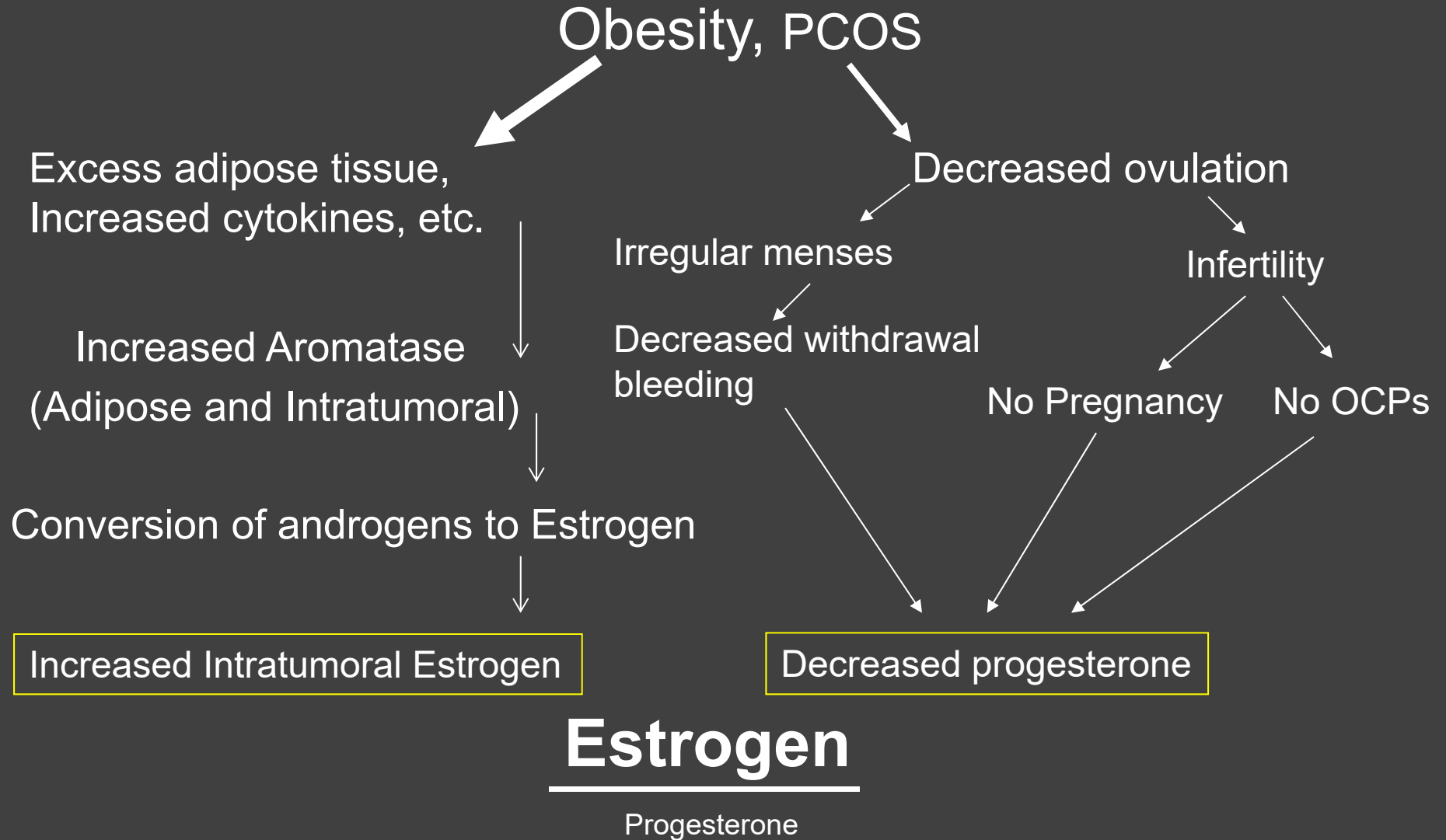
# New Cancer Diagnoses and Estimated Deaths in the U.S.

## 2018 Statistics:

	New	Deaths
Breast	266,120	40,920
<u>Uterus</u>	<u>63,230</u>	<u>11,350</u>
Ovary	22,240	14,070
Cervix	13,240	4,170
Vulva	6,190	1,200

American Cancer Society

# What causes Endometrial Cancer?

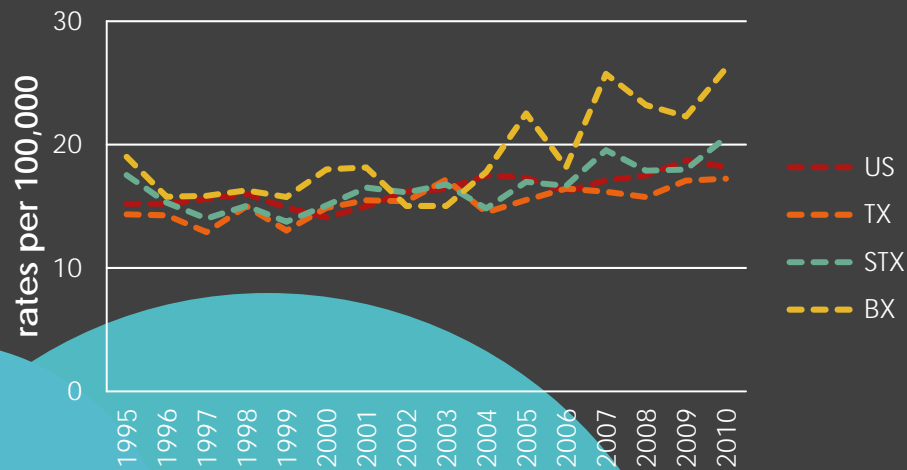


# UT Health San Antonio MD Anderson Cancer Center

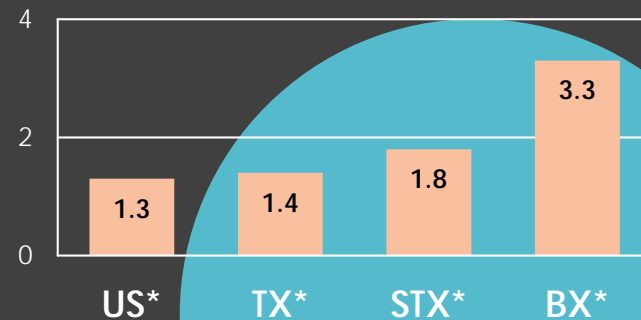
- Goal is to improve the care of our local population
- Understand our unique population
- Use information derived from research examining our local population to drive health care policy
- Use ethnic and culturally sensitive outreach interventions

# Annual incident rates and APC, 1995-2010

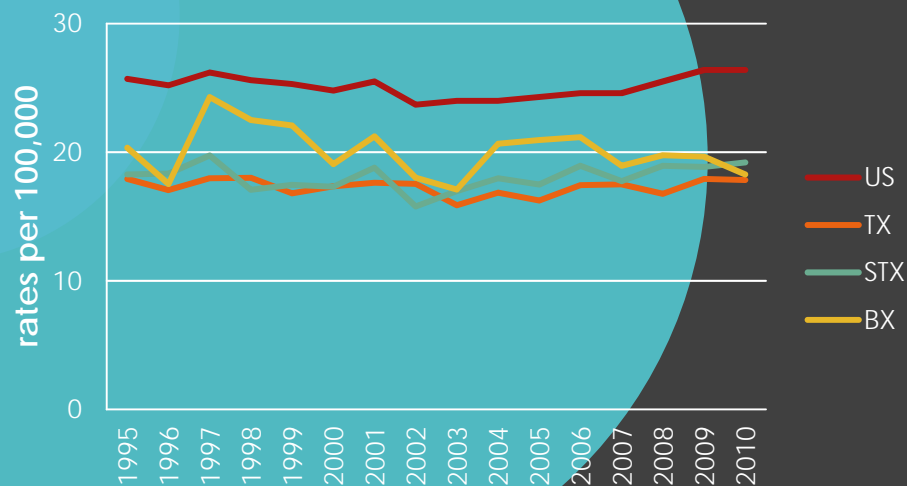
## All age groups, Hispanics



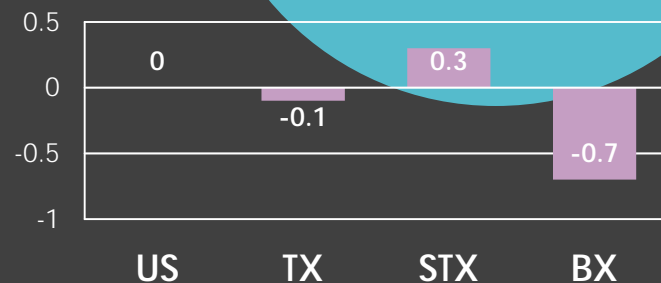
## APC, Hispanics



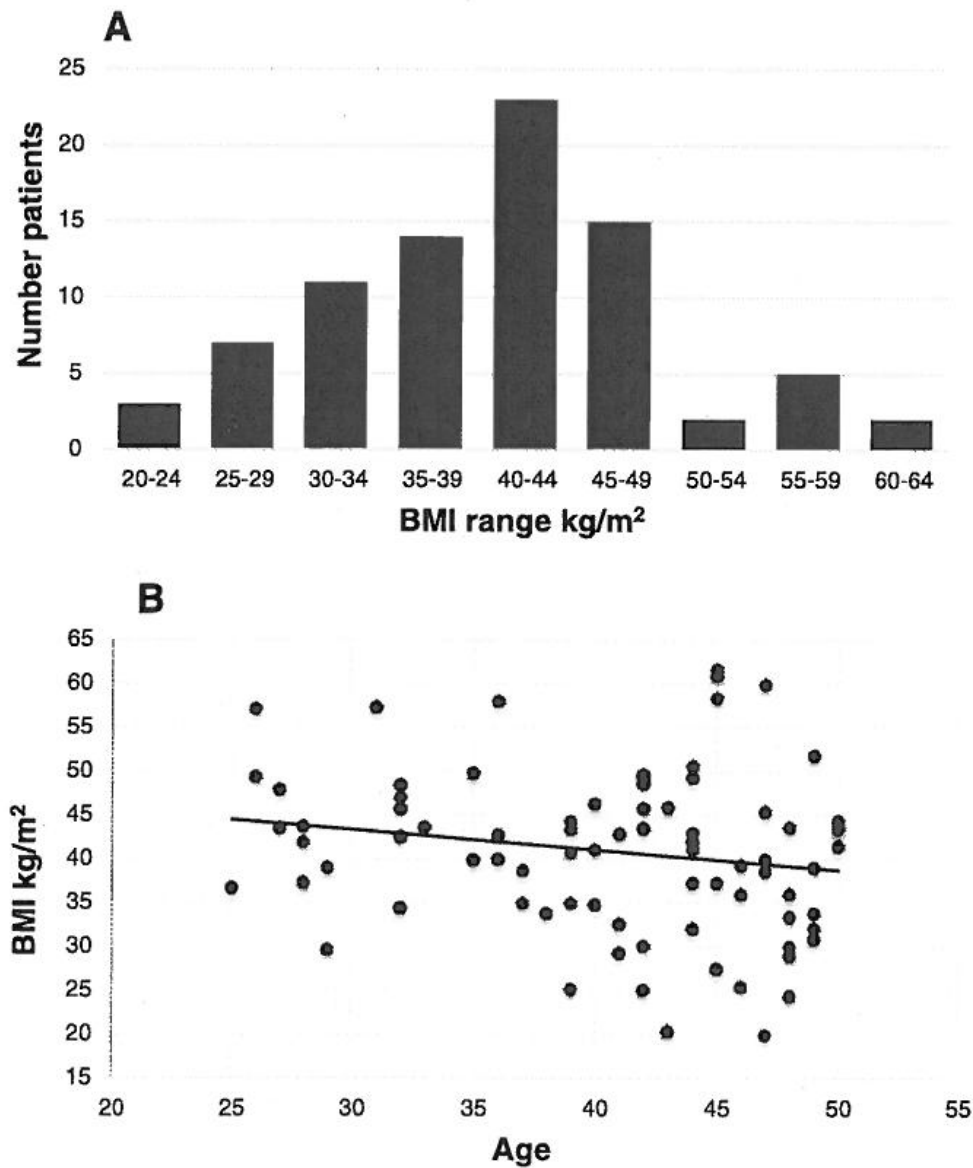
## All age groups, NHW



## APC, NHW



\* The APC is significantly different from zero ( $p < 0.05$ ).



**FIGURE 1.** Obesity characteristics. A, Distribution of BMI in kilograms per square meter for the cohort. B, Relationship between age and BMI in kilograms per square meter.



# The Bad and The Good

## The Bad

Based on Hispanic population growth and the increasing incidence we anticipate an increased incidence of endometrial cancers in Hispanic women in Bexar County and South Texas.

These endometrial cancers result in sterility, surgical morbidity, financial hardship, and cancer associated morbidity and mortality.

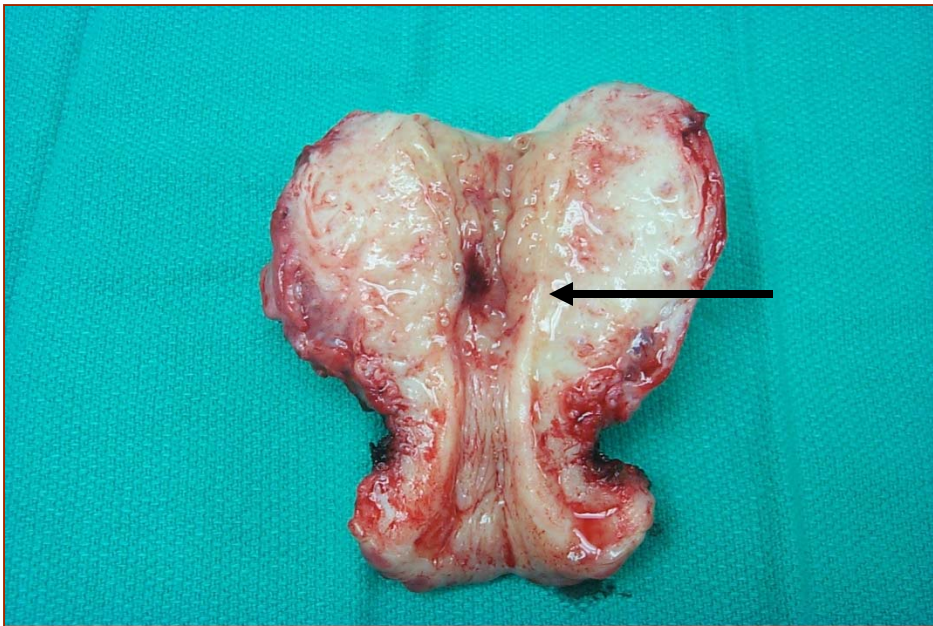
## The Good

Known and modifiable risk factors for endometrial cancer are common in Hispanics residing in Bexar County and South Texas.

Very exciting, cutting edge, research is being conducted at The Mays Cancer Center examining the link between obesity and endometrial cancer.

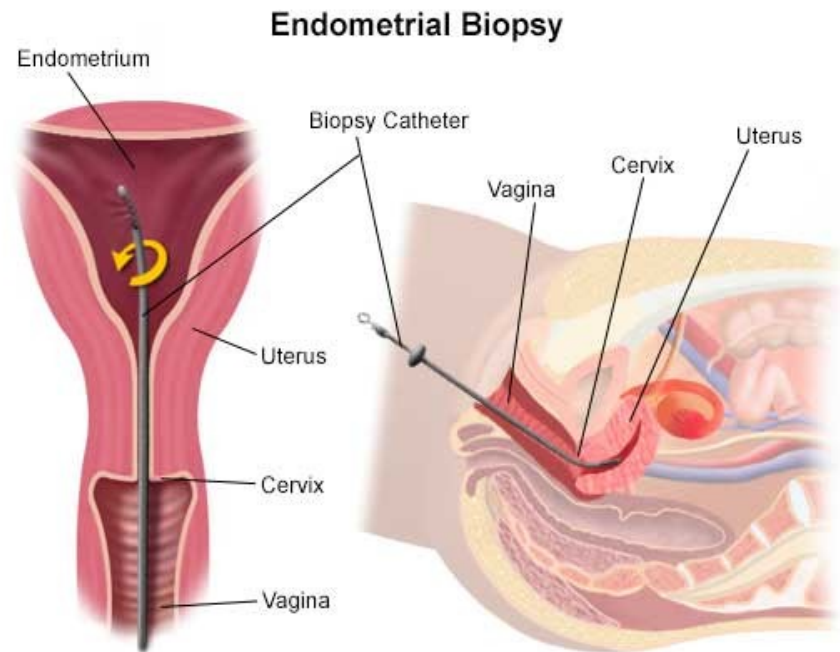
# Clinical Presentation

## Postmenopausal Vaginal Bleeding

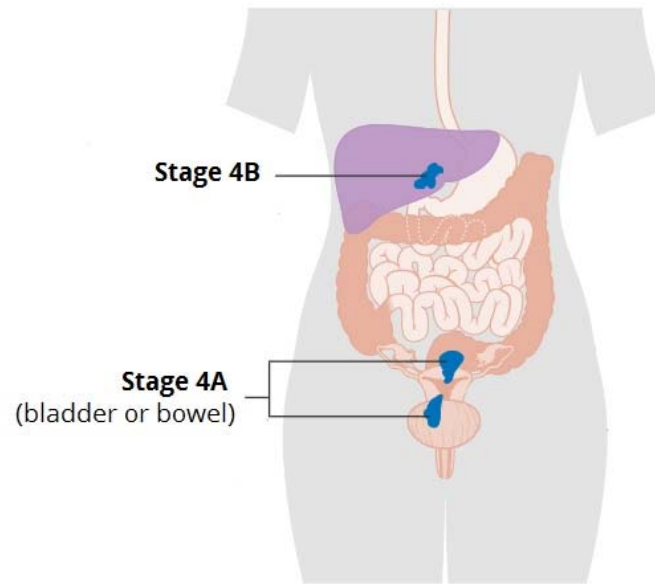
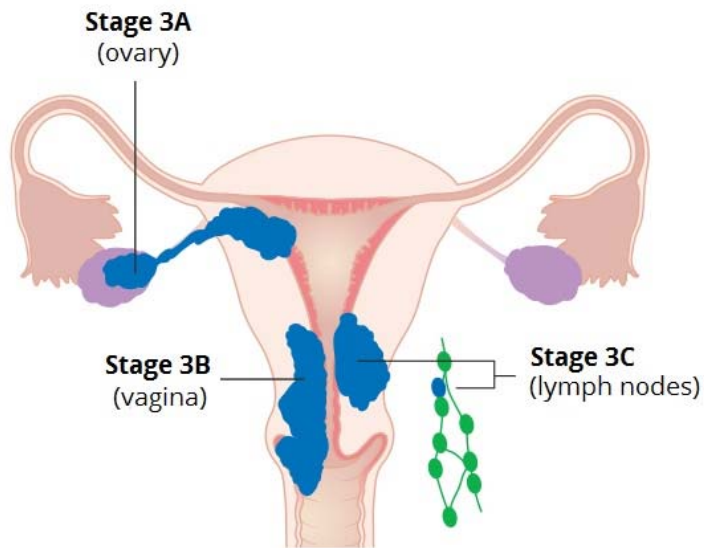
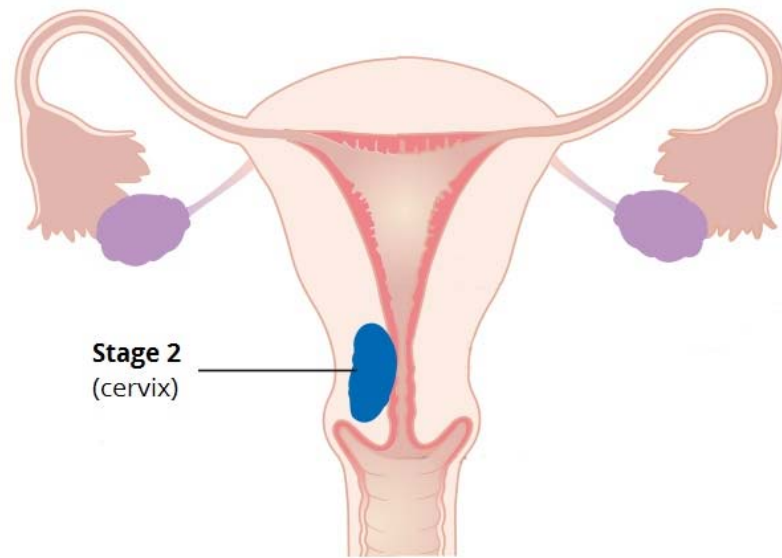
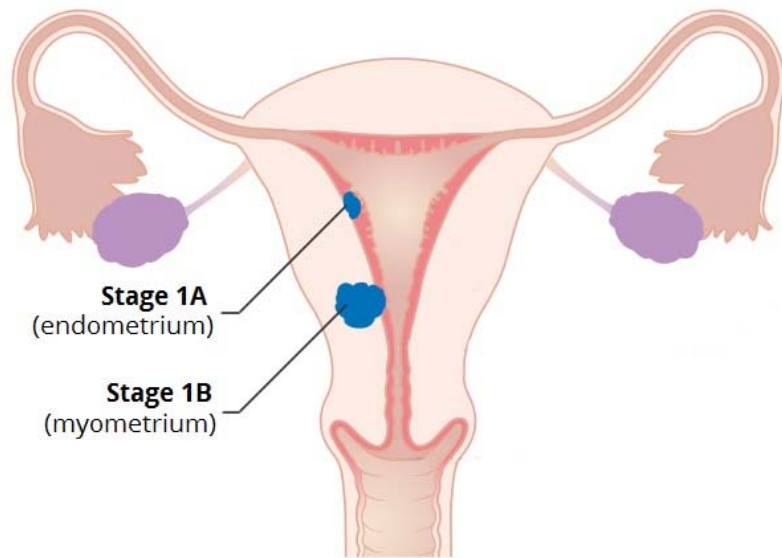


# Diagnosis in the office

Pipelle



# Surgical Staging



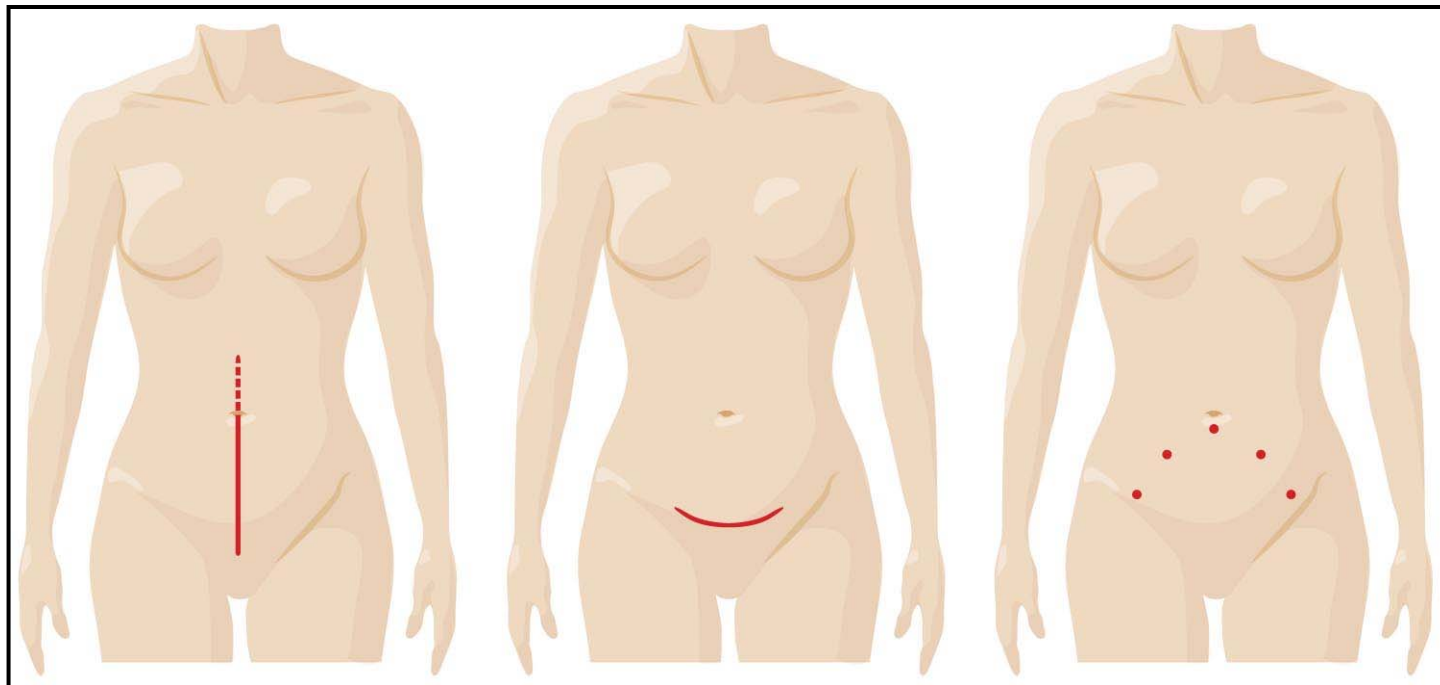
# Stage Distribution and Survival

Stage	Percent %	Survival
I	72	81-96%
II	12	65-87%
III	13	35-50%
IV	3	15-20%

Treatment is hysterectomy with possible removal of tubes and ovaries and removal of local lymph nodes.

Minimally invasive is good for the patient!

Operate via small incisions, but good view



Open Vertical Incision

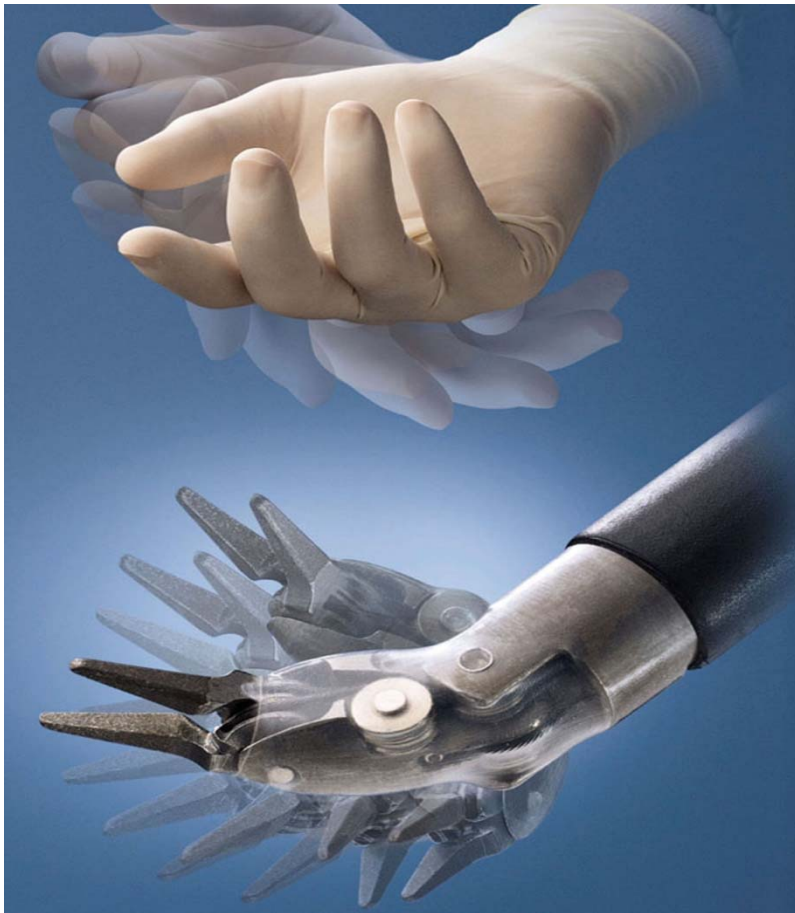
Open Transverse Incision

Laparoscopic Incisions

# da Vinci<sup>®</sup> Surgical System



# Wrist and Finger Movement



Conventional minimally invasive instruments are rigid with no wrists

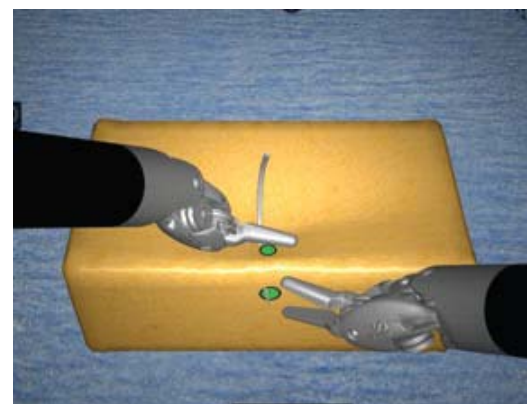
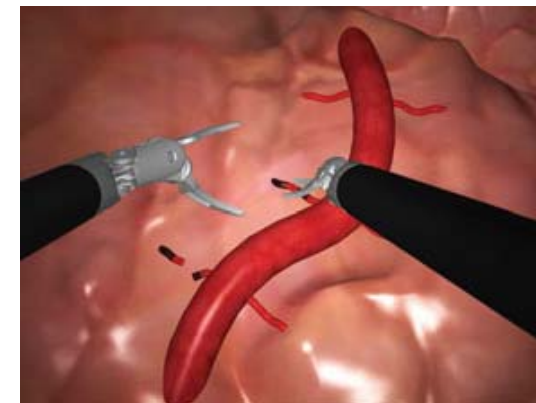
*EndoWrist*<sup>®</sup> Instrument tips move like a human wrist

Allows surgeon to operate with increased dexterity & precision



# Surgical Skills Training

## *da Vinci Skills Simulator*



UT Health MDAnderson  
San Antonio Cancer Center

# Surgical side effects

## Short term

- Pain from surgery
- Nausea and possible vomiting
- Fevers
- Infections
- Wound problems
- Anemia
- Swelling in legs, lymphedema
- Blood clots
- Difficulty urinating, constipation

## Long term

- Sexuality
- Pain with intercourse
- Menopausal symptoms
- Anxiety/fear

# Endometrial Cancer Survivor

- Healthy lifestyle
- “New chance to live”
- Diet
- Exercise
- Regular Health Care
  - Blood pressure
  - Glucose
  - Lipids

