ASGO Webinar Series #37

Title

What is the best surgical management for early cervical cancer less than 2 cm?

Discussion

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Declaration of interest

No conflict of interest with regard to this topic

Prospective data addressing the outcomes of simple hysterectomy (SH) plus pelvic node dissection for low-risk, early-stage cervical cancer

Studies	Design/Sample size	Inclusion criteria	Main outcomes
ConCerv 2010-2019 USA	Prospective, single-arm, multicenter study (14 sites, 9 countries)/ **40 patients: conization followed by SH** **16 patients: inadvertent SH** **96% MIS**	FIGO stage IA2-IB1 Squamous (any grade)/Adeno (G1/2) Tumor size ≤ 2 cm Depth of invasion ≤ 10 mm No LVSI Negative imaging for metastasis Negative conization margin	**2-year recurrent rate** • Conization + SH: 0% (0/40) • Inadvertent SH: 12.5% (2/16) **Pelvic LN metastasis** 5% **Pelvic LN assessment recommended**
LESSER 2015-2018 Brazil	Randomized phase II non-inferiority trial (3 centers, Northeast Brazil)/ **20 patients: SH** **20 patients: MRH (type B2)** **92.5% Open**	FIGO stage IA2-IB1 Squamous/Adeno/Adenosquamous Tumor size ≤ 2 cm No evidence of advanced disease **20% had tumor > 2 cm on final pathology**	**3-year disease-free survival** SH: 95% MRH: 100% (p=0.30) SH: shorter operative time and urinary catheter removal time

Schmeler KM, *et al*. Int J Gynecol Cancer 2021
Carneiro VCG, *et al*. Int J Gynecol Cancer 2023

Low-risk, early-stage cervical cancer (SHAPE trial)

FIGO stage IA2-IB1

Squamous/Adeno/Adenosquamous

Tumor size ≤ 2 cm

Stromal invasion

- ❖ < 10 mm on LEEP/cone
- ❖ < 50% on MRI

Question 1

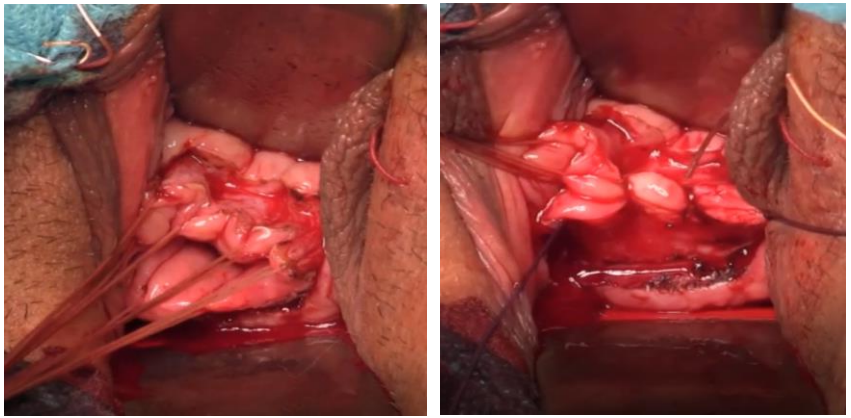
What are acceptable methods for assessment of tumor size and extent of stromal invasion in low-resource settings? Is the clinical estimation of tumor size acceptable? Should conization be done to assess the depth of invasion prior to offering a simple hysterectomy if MRI is not done?

Plante M, *et al*. ASCO 2023

Question 2

If simple hysterectomy (instead of RH) and pelvic LN assessment are performed in low-risk early-stage cervical cancer through the use of a minimally invasive approach, **what is your opinion regarding the techniques to prevent tumor spillage during colpotomy?**

- Is the creation of a vaginal cuff still needed during a simple hysterectomy?



Images from: Kanao H, *et al*. *J Gynecol Oncol* 2019;30:e71

Question 3

Would the results of the SHAPE trial be applicable to **women who undergo an inadvertent simple hysterectomy** with a postoperative diagnosis of cervical cancer?