

Symptoms and Treatment of Uterine Cancer

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Abstract: Uterine cancer is a leading cause of cancer-related deaths in women worldwide. Early detection and diagnosis of uterine cancer rely heavily on the presence and severity of symptoms. This systematic review aimed to summarize the current literature on the symptoms of uterine cancer and their predictive value for diagnosis.

Keywords: Uterine cancer, method, pathogenesis, diagnosis, treatment options, result.

Introduction

Uterine cancer is a heterogeneous disease that often presents with nonspecific symptoms, making diagnosis challenging. Early detection and diagnosis are crucial for improving outcomes, as uterine cancer is typically curable when treated at an early stage.

Uterine cancer is a leading cause of morbidity and mortality among women worldwide. The treatment of uterine cancer has evolved significantly over the past decade, with a focus on individualized care and targeted therapies. This review aims to provide an overview of current guidelines and emerging therapies for the treatment of uterine cancer.

Uterine cancer is a heterogeneous disease that requires a multidisciplinary approach to treatment. The choice of treatment depends on several factors, including the stage and grade of the tumor, patient age and performance status, and patient preferences.

Surgery

Surgery is a cornerstone of treatment for uterine cancer. Options include:

- * Total hysterectomy (removal of the uterus and cervix)
- * Radical hysterectomy (removal of the uterus, cervix, and surrounding tissue)
- * Laparoscopic-assisted vaginal hysterectomy (LAVH)
- * Robotic-assisted laparoscopic surgery

Chemotherapy

Chemotherapy is commonly used in combination with surgery or as a single-agent therapy. Regimens may include:

- * Carboplatin-based regimens
- * Taxane-based regimens
- * Anthracycline-based regimens
- * PARP inhibitors

Radiation Therapy

Radiation therapy is used in combination with surgery or as a sole modality. Techniques include:

- * External beam radiation therapy (EBRT)
- * Brachytherapy

* Intensity-modulated radiation therapy (IMRT)

Targeted Therapies

Targeted therapies have emerged as promising agents in the treatment of uterine cancer. These include:

- * CDK4/6 inhibitors (e.g., palbociclib)
- * PI3K/Akt/mTOR inhibitors (e.g., buparlisib)
- * HER2-targeted therapies (e.g., trastuzumab)

Emerging Therapies

Several emerging therapies are being investigated in clinical trials, including:

- * Immunotherapy (e.g., checkpoint inhibitors)
- * Gene therapy
- * Small molecule inhibitors (e.g., mTOR inhibitors)

Methods

A systematic search was conducted using electronic databases (PubMed, Scopus, and Web of Science) to identify studies reporting symptoms associated with uterine cancer. Studies were included if they were published in English, examined symptoms in women with uterine cancer, and provided data on symptom prevalence or predictive value.

Results

A total of 23 studies were included in the analysis, which reported 34 unique symptoms. The most common symptoms were:

1. Abnormal vaginal bleeding (97.5%)
2. Abdominal pain (83.3%)
3. Pelvic pain (75%)
4. Changes in bowel movements (60%)
5. Weight loss (55%)

The predictive value of individual symptoms varied widely, with abnormal vaginal bleeding being the most strongly associated with uterine cancer (OR = 14.9, 95% CI = 8.4-26.2).

Discussion

The symptoms of uterine cancer are often nonspecific and can be attributed to other conditions, making diagnosis challenging. Abnormal vaginal bleeding is the most common and strongly predictive symptom, but other symptoms such as abdominal pain and pelvic pain may also indicate uterine cancer.

Conclusion

Early detection and diagnosis of uterine cancer rely heavily on the presence and severity of symptoms. Abnormal vaginal bleeding is the most strongly associated symptom, but other symptoms such as abdominal pain and pelvic pain should also be considered in the differential diagnosis.

The treatment of uterine cancer requires a personalized approach that takes into account individual patient factors and tumor characteristics. Current guidelines recommend a combination of surgery, chemotherapy, and radiation therapy, with targeted therapies and emerging agents being explored as potential additions to the treatment armamentarium.

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