THE IMPACT OF PLATINUM-BASED ADJUVANT TREATMENT ON THE OUTCOME OF BORDERLINE OVARIAN TUMORS: A META-ANALYSIS

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Aim: Background: Treatment of borderline ovarian tumors (BOT) remains contentious. Regarding invasive implants, there is no consensus regarding therapy. This article evaluates the benefits of platinum-based adjuvant treatment in patients with BOT.

Methods: Methods: The PubMed and Cochrane Library databases were systematically searched for articles using the terms ((Borderline) OR (low malignant potential) AND (ovarian)) AND ((tumor) OR (cancer)) AND ((follow-up) OR (survival) OR (treatment) OR (chemotherapy) OR (adjuvant treatment)).

Results: Results: We identified 31 articles including 4982 patients. Together 623 patients presented non-invasive-, 184 invasive- and 91 unspecified implants. Central pathological examination was performed in 23 studies. Nine studies included more than 90% stage I patients, while 10 included only advanced stage patients. Nineteen studies reported patients undergoing complete cytoreduction, 10 reported response rates and 9 compared survival outcomes. All studies provided information regarding either mortality or recurrence rates. A meta-analysis of the 13 studies providing separate mortality data for both treatment groups, including 2206 women, favored surgical treatment only (OR = 7.44 95%CI = 3.39-16.32; p < 0.0005). Regarding survival data 4 studies reported no difference between groups. In the adjuvant setting, 4 reported worse outcome and 1 reported a non-significant trend to worse outcome. We were unable to pool the results of all the included studies, as not all studies report the needed data.

Conclusions: Conclusions: We do not find evidence supporting platinum-based adjuvant therapy for BOT, including in patients with invasive implants. Nonetheless, it’s likely that the small sub-group of patients relapsing as high-grade ovarian carcinoma will profit from adjuvant treatment.

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