

Fertility-Sparing Surgery for Ovarian Mucinous Tumors and Risk of Recurrence

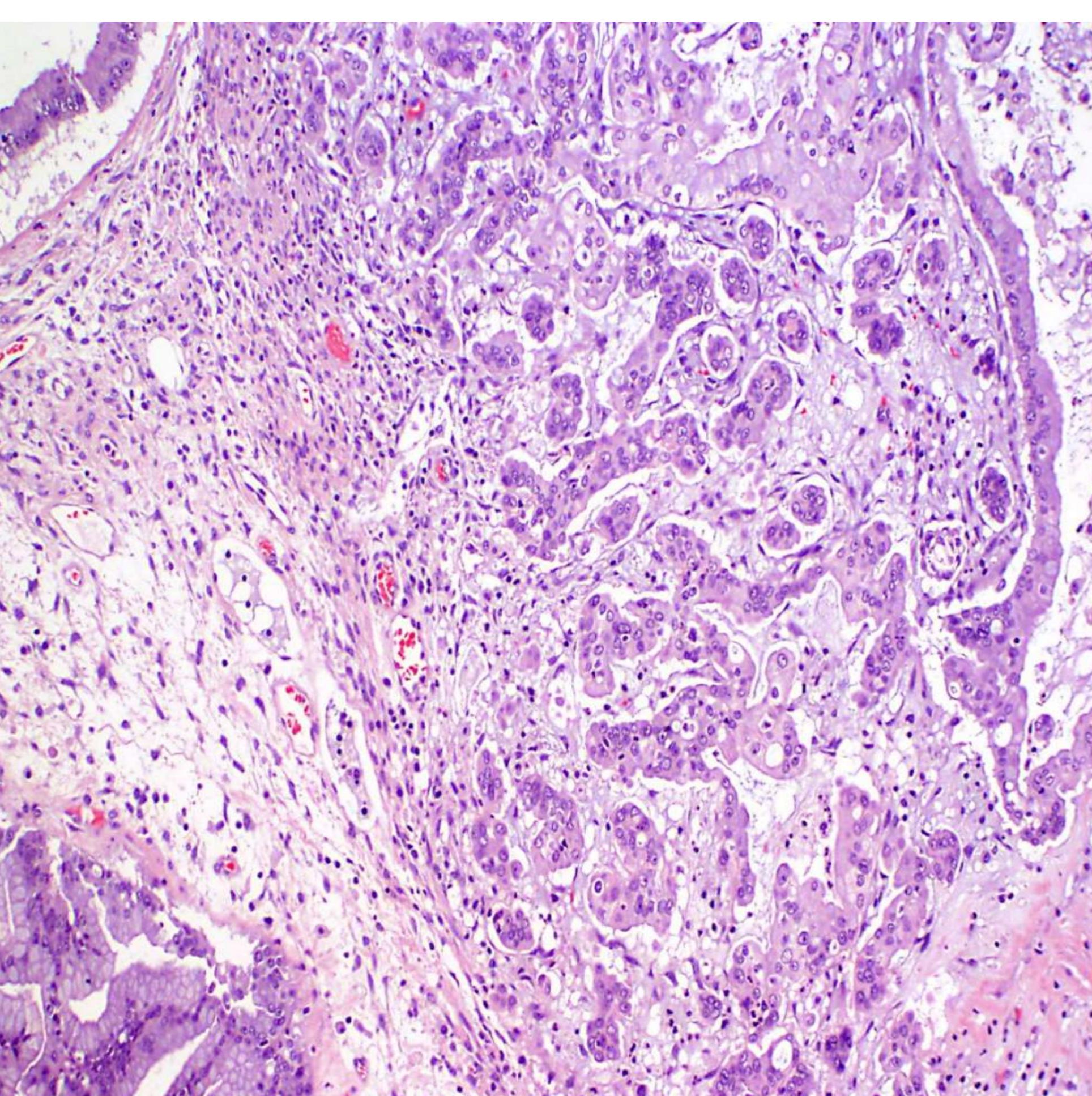
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INTRODUCTION

Ovarian mucinous tumors pose a challenge in young women desiring fertility preservation. Fertility sparing surgery (FSS) is increasingly considered, but concerns about recurrence risk persists. Recent studies have demonstrated that FSS can lead to favorable outcomes in terms of recurrence rates and reproductive success, particularly in cases of benign and borderline tumors.

METHODOLOGY

This retrospective cohort study included patients with histologically confirmed ovarian mucinous tumors who underwent fertility-sparing surgery (FSS) for the period of ten years from 2013-2022. Data collected from medical records and analyzed to determine recurrence rates and oncological outcomes.



OBJECTIVE

- To assess the risk of recurrence after FSS in patients with Ovarian Mucinous tumors.
- To evaluate the time from surgery to recurrence or progression.

TABLE 1. PATIENT CHARACTERISTICS AND OUTCOMES

Characteristic	Value
Mean Age	25.6 years (range 18-40)
Tumor Size	Mean 10.2cm (range 4-30cm)

TABLE 2. HISTOLOGICAL DISTRIBUTION

Type	Value
Mucinous Borderline Tumor	20 (62.5%)
Mucinous Carcinoma	12 (37.5%)

TABLE 3. SURGICAL APPROACH

Technique	Value
Laparoscopy	22 (68.8%)
Laparotomy	10 (31.2%)

RESULTS

- The study include 32 patients with ovarian mucinous tumors.
- Mucinous Borderline tumor in 20 patients .
- Recurrence rate seen in 6 patients.

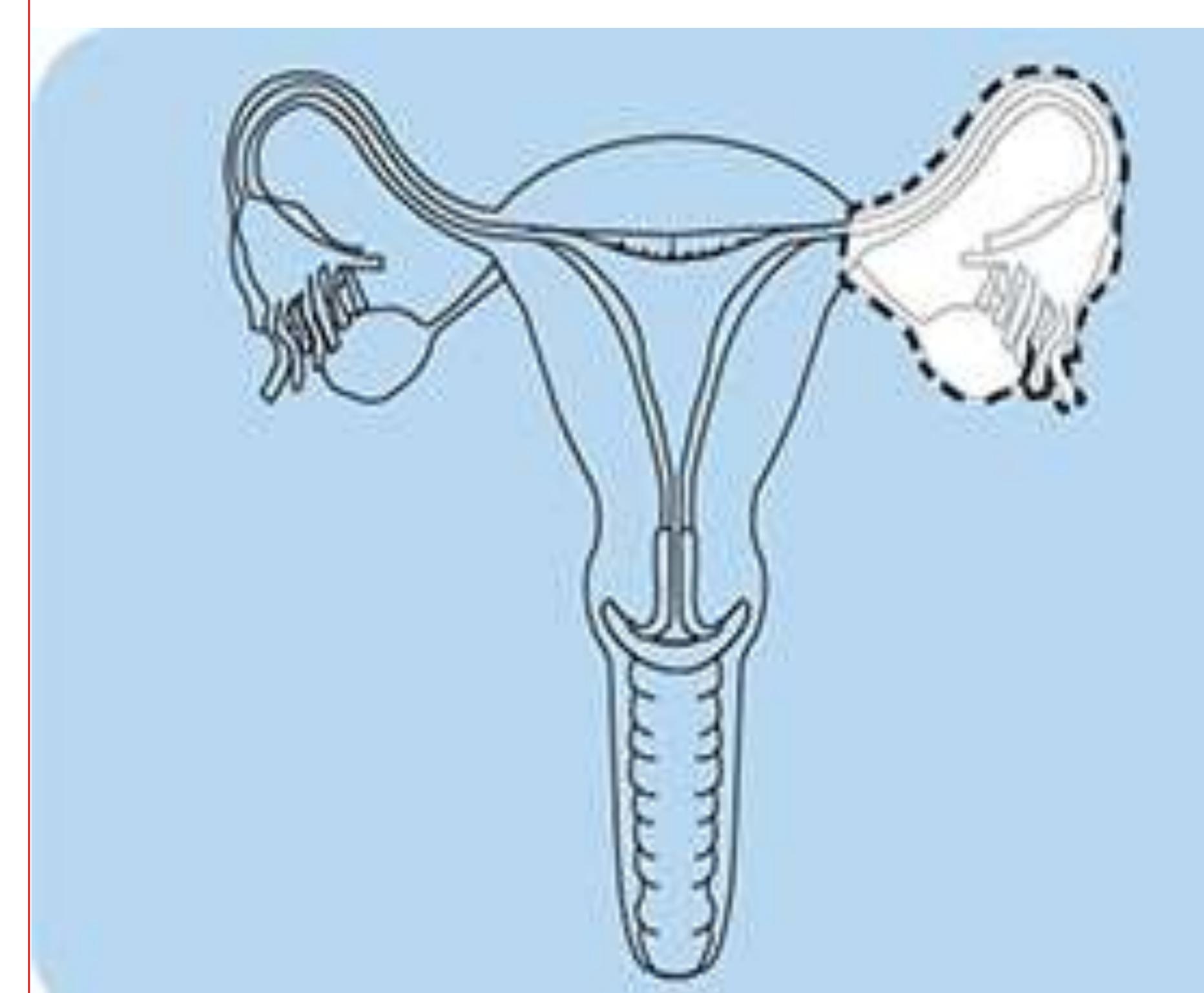
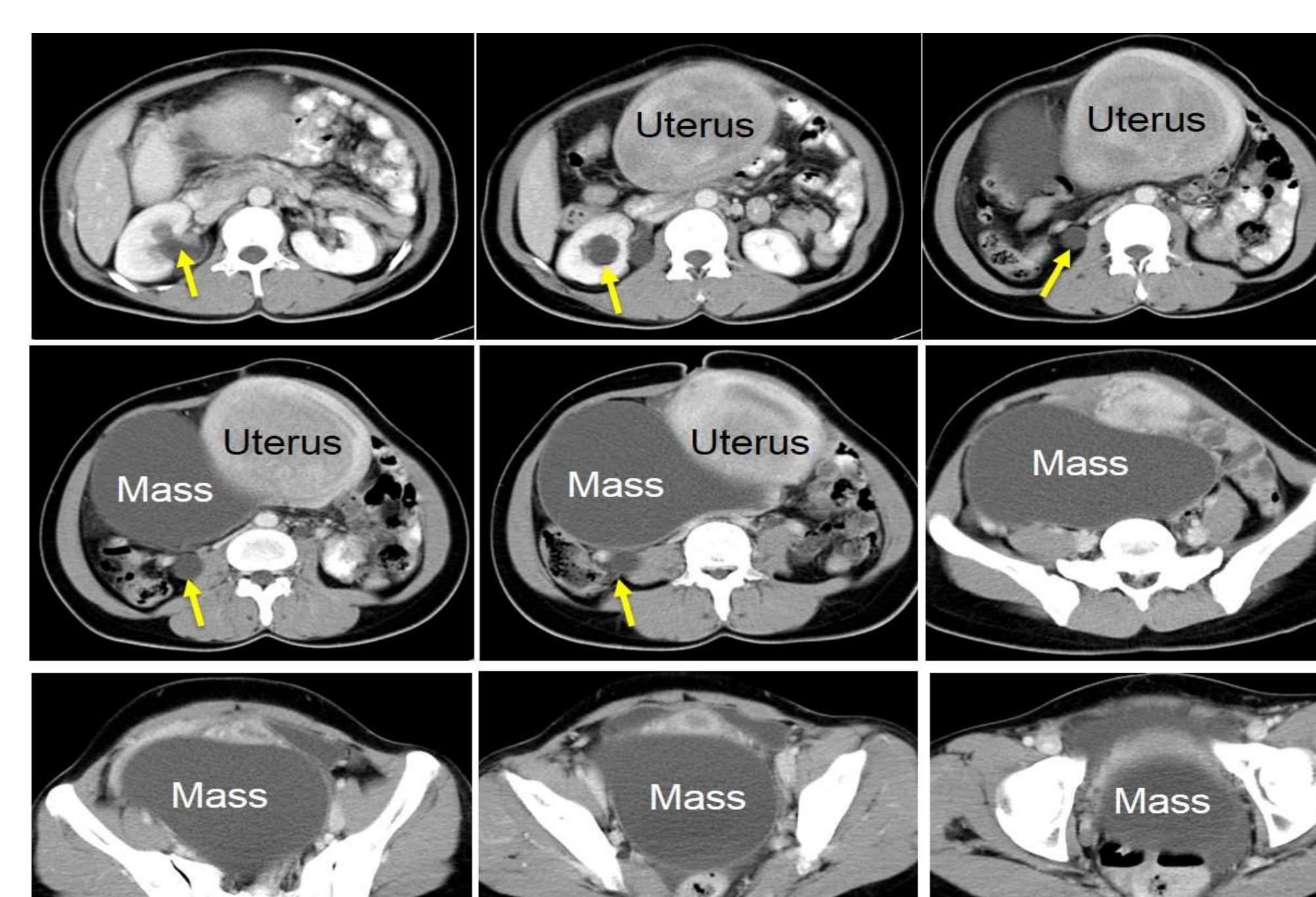


TABLE 3. OUTCOME

Outcome	Value
Recurrence Rate	6 (18.8%)
Mean time to Recurrence	24.5 months
Overall Survival	100% at median followup of 36 months



CONCLUSION

Fertility sparing surgery is a feasible and effective treatment option for selected patients with ovarian mucinous tumors offering acceptable recurrence rates. This approach can be considered for young women desiring fertility preservation, while maintaining oncologic safety. Close follow-up and monitoring are essential to detect potential recurrences.