

Ten-Year Clinical Outcomes of Vulvar Cancer Patients Treated at a Tertiary Care Hospital in Pakistan (2010–2020): A Retrospective Cohort Study

Shaukat Khanum Memorial Cancer Hospital and Research Centre, Radiation Oncology, Lahore, Pakistan.

OBJECTIVE

To evaluate the clinical characteristics, treatment patterns, recurrence patterns, progression-free survival, and overall survival of patients with vulvar cancer treated at a tertiary cancer center in Pakistan.

METHODS

This retrospective cohort study included patients with histopathologically confirmed vulvar cancer treated at Shaukat Khanum Memorial Cancer Hospital and Research Centre between January 2010 and December 2020. Demographic, clinicopathological, treatment, and outcome data were extracted from medical records. Tumors were staged according to the FIGO staging system.

Primary endpoints were overall survival (OS) and progression-free survival (PFS), estimated using the Kaplan–Meier method.

TREATMENT

- Multidisciplinary tumor board guided treatment decisions.
- Surgery included wide local excision/radical vulvectomy with nodal dissection.
- Adjuvant radiotherapy was given for high-risk pathological features.
- Selected patients received concurrent chemoradiotherapy.

RESULTS

- 47 patients were included; 34.0% had FIGO IA–IB and 36.1% had stage III disease.
- 68.1% underwent surgery; 48.9% received concurrent chemoradiotherapy and 40.4% radiotherapy alone.
- 57.4% relapsed, predominantly locoregionally; median follow-up was 38 months.
- Median PFS was 64 months, with 5-year OS of 48.6%.

TABLE 1. Characteristics	
Characteristic	Finding
Median age	56 years
Age range	28–79 years
Squamous cell carcinoma	97.9%
FIGO IA–IB	34.0%
FIGO III	36.1%
FIGO IV	10.6%
Nodal involvement	27.7%
Extracapsular extension	6.4%

TABLE 2. Treatment details	
Treatment	n (%)
Induction chemotherapy	10 (21.3)
Surgery performed	32 (68.1)
Surgery alone	5 (10.6)
Surgery + adjuvant treatment	27 (57.4)
No surgery	15 (31.9)
Concurrent chemoradiotherapy	23 (48.9)
Radiotherapy alone	19 (40.4)
Negative surgical margins	17 (36.2)
Positive surgical margins	10 (21.3)

TABLE 3. Outcomes	
Outcome	Result
Median follow-up	38 months
Follow-up range	1–162 months
Patients with relapse	27 (57.4%)
Locoregional recurrence	14 (29.8%)
Median PFS	64 months
5-year overall survival	48.6%

CONCLUSION

Vulvar cancer in this Pakistani tertiary-care cohort was frequently diagnosed at an advanced stage and was associated with substantial locoregional recurrence and limited long-term survival. These findings highlight the importance of early recognition, timely referral, multidisciplinary management, and improved access to specialized gynecologic oncology services.