Analysis of potential prognostic factors in 111 patients with ovarian cancer

René Hornung, Urs Eppenberger, Edward Wight, Ursula Staub, Urs Haller & Daniel Fink

The aim of this study was to assess the correlation of survival with clinical, surgical, histopathological, and biochemical parameters in patients with ovarian cancer. Age, surgical and histopathological data, the concentrations of estrogen and progesterone receptors, Her-2 neu, p53, U-PA, PAI-1, and Cathepsin D, DNA-and S-phase indexes of 111 ovarian cancer patients have been analyzed and correlated to survival. Progesterone receptors were correlated with prolonged survival. FIGO staging at the time of diagnosis is an independent prognostic factor for the patient's survival. Endometrioid and serous ovarian cancers have a better prognosis than mucinous and clear cell ovarian cancers. Survival of optimally debulked patients was substantially longer than that of not optimally debulked patients. This study shows, that an accurate clinical and surgical staging with an according histopathological assessment combined with optimal cytoreduction is of importance for the prognosis of ovarian cancer patients.

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