Fertility sparing surgery in early stages of cervical cancer

The concept of fertility-preserving surgery in early cervical (stage IA 2 or IB 10) is radical trachelectomy. Trachelectomy is a conservative oncologic operation with aim to preserve fertility in early stages of cervical cancer female patients. Excised structures in trachelectomy are: cervix, upper 1/3 of vagina, parametria and paracolpia, with preservation of uterine corpus. After removing the vaginal fornix and cervix, uterovaginal anastomosis with non-resorptive suture is performed. Indications for trachelectomy are, patients up to 45 years of age who wish to conserve fertility with negative lymph nodes, no distant metastatic disease, FIGO stage cervical cancer staged IA1, IA2, IB1 (tumor size ≤ 2 cm with negative lymph nodes), with adequate cervical length, no evidence of expansion of malignant process on the upper part of the cervical canal, squamous cell carcinoma, rarely cervical adenocarcinoma, negative lymph nodes intraoperatively, no metastatic disease, and clear resected margins. There is an ongoing debate regarding the need for uterine vessels preservation. Some authors have proved that the preservation of the uterine artery is associated with more favorable restoration of the reproductive function. Others claimed that preservation of the uterine vasculature is not necessary for fertility as obstetrical outcomes are similar to those of the historical vaginal radical trachelectomy cohorts.

Biography

Aleksandar Stefanović has completed his Medical School at University of Belgrade in 1977, MD in 1995, PhD in 1996 and Academic Special Studies in Gynecology and Obstetrics in 1994. He has 25 years of clinical experiences, working at Clinic for Gynecology & Obstetrics Clinical Centre of Serbia, as Gynecologist for 18 years. His present position at the clinic is Chairman of Clinic for Obstetrics and Gynecology, Clinical Center of Serbia. He is President of Expert Committee for Cervical Carcinoma Prevention and Control, member of Advisory Board for the implementation of screening and early detection of breast, cervical and colorectal carcinoma program, author of national good practice guidelines for diagnosis and treatment of cervical carcinoma, and member of multidisciplinary team for Gynecologic Oncology, Clinic for Obstetrics and Gynecology, Clinical Center of Serbia. He has about 50 publications in CC/SCI expanded and JCR indexed journals, and active participant of more than 50 international congresses, with total number of publication about 200.

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