Adult granulosa cell tumors of the ovary: a clinicopathological study of 34 patients by the Hellenic Cooperative Oncology Group (HeCOG).

Pectasides D, Papaxoinis G, Fountzilas G, Aravantinos G, Pectasides E, Mouratidou D, Economopoulos T, Andreadis Ch.

Source

Second Department of Internal Medicine, Propaeduetic, Oncology Section, University of Athens, Attikon University Hospital, Haidari, Athens, Greece. pectasid@otenet.gr

Abstract

BACKGROUND:

Granulosa cell tumors (GCT) are rare malignant neoplasms of the ovaries with, usually, indolent biological behavior.

PATIENTS AND METHODS:

The epidemiological, clinical and pathological features of 34 patients with adult GCT, from the registry of the HeCOG, were analyzed retrospectively for their prognostic significance.

RESULTS:

The median age was 51 years with post- to premenopausal ratio=l.8 and median size of the tumor 10 cm. Forty-seven % had a low mitotic index (1-3 mitoses/10 high-power fields, HPFs) and 48% had International Federation of Obstetrics and Gynecology (FIGO) stage IA. After 34.5 months of median follow-up, the estimated 5-year and 10-year progression-free survival (PFS) was 78% and 65%, respectively, while both the 5- and 10-year overall survival (OS) was 89%. The stage and the presence of residual disease after surgery had prognostic significance for OS in the univariate analysis. Out of 19 patients whose disease was completely resected, the median disease-free survival (DFS) was 11 months. Only rupture of the tumor during surgery had prognostic significance for DFS in the univariate analysis. Seven out of 13 evaluable patients with unresectable disease responded to first-line chemotherapy (CT), 6 of them completely, while three patients responded to second-line chemotherapy. All the responders were retreated with platinum-based CT and one of them was platinum-insensitive. All the patients receiving second-line non-platinum CT developed progressive disease (PD).

CONCLUSION:

The only curative treatment of GCT is complete surgical resection of all visible disease, while platinum-based CT is the most effective first-line, as well as second-line treatment.