

Fewer complications after MIRS introduced for endometrial cancer

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laparoscopic surgery (MILS) versus 22.2 percent in group 2. In group 2, 50 percent of women underwent MIRS. A total abdominal hysterectomy was associated with increased odds of severe complications versus MILS (OR, 2.58; 95 percent confidence interval, 1.8 to 3.7) and MIRS (OR, 3.87; 95 percent confidence interval, 2.52 to 5.93) in group 2. However, there was no difference in severe complications for MILS versus MIRS (OR, 1.5; 95 percent confidence interval, 0.99 to 2.27).

"The national introduction of MIRS changed the surgical approach for early-stage endometrial cancer from open surgery to minimally invasive surgery," the authors write. "This change in surgical approach was associated with a significantly reduced risk of severe complications."

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More information: Abstract/Full Text (subscription or payment may be required)

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(HealthDay)—The introduction of minimally invasive robotic surgery (MIRS) is associated with a significantly lower risk for severe complications among patients with early-stage endometrial cancer, according to a study published online Feb. 27 in *JAMA Surgery*.

Siv Lykke Jørgensen, M.D., from Odense University Hospital in Denmark, and colleagues used data from the Danish Gynecological Cancer Database to identify 5,654 women with early-stage endometrial cancer who underwent surgery from Jan. 1, 2005, to June 30, 2015. Outcome comparisons were made among women undergoing surgery before (3,091 patients; group 1) and after (2,563 patients; group 2) introduction of MIRS.

The researchers found that the odds of severe complications were significantly higher in group 1 than in group 2 (odds ratio [OR], 1.39; 95 percent confidence interval, 1.11 to 1.74). In group 1, 14.1 percent of women underwent minimally invasive



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