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Survival and operative outcome analysis of robotic assisted versus laparoscopic surgical staging for endometrial cancer: A preliminary report

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Objective: To evaluate the overall survival outcomes of patients with endometrial cancer managed by robotic and laparoscopic surgery. The second aim was to study the peri-operative outcomes.

Methods: A retrospective study was conducted at two academic centers.

Main outcomes: overall and disease free survival. Secondary outcomes: hospital stay, operative time, blood loss, complications, conversion to open surgery, re-admission and adjuvant therapy. Survival data were estimated using the Kaplan-Meier and Cox regression analysis, and compared using the log-rank test. t-test and chi-squared or Fisher's exact test were used when indicated.

Results: 404 women met the study criteria. 170 of these had robotic and 234 women had laparoscopic surgical staging.Both groups were comparable in terms of age, body mass index (30 vs. 32), co-morbid medical conditions, previous abdomino-pelvic surgery, histology, and surgical stage. Higher tumor grade was noted in the robotic group.

Median follow-up was 24 months (range 4-43 months) for the robotic assisted group and 57.5 months (range 4 to 103 months) for the laparoscopic group. No significant differences in overall survival (92.9% vs. 92.8%), 2-year disease free survival (90% vs. 93%) and tumor recurrence was found in both groups. Operative time (226 min vs. 181 min), estimated blood loss (109 ml vs. 192 ml) and hospital stay was statistically different (1.9 vs. 2.3 days).

Peri-operative complications and adjuvant radiotherapy was similar in both groups.

Conclusions: Robotic surgery yields equivalent survival results when compared to laparoscopic management for endometrial adenocarcinoma.

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