

Clinicopathological characteristics and prognosis analysis of ovarian metastases in colorectal cancer: A single-center experience

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Purpose: This study aimed to improve the management of Ovarian Metastases (OM) in Colorectal Cancer (CRC) by evaluating the clinicopathological characteristics, therapeutic strategies and prognostic factors associated with OM originating from CRC.

Methods: Medical records of patients who were histopathologically diagnosed with OM of CRC origin were reviewed from January 2011 to December 2018 in our medical center. Data related to clinicopathological characteristics, therapeutic strategies and survival time were recorded and analyzed. Survival and prognosis analyses were carried out to identify variables significantly associated with the outcomes.

Results: Forty-six patients were included in the study with a median follow-up of 14 months. Premenopausal (<50 years) and colon cancer patients were more likely to develop OM. Synchronous OM was found in 34 patients and elevated carbohydrate antigen 125 value could be seen in 67.4% of patients. Bilateral ovarian involvement (27/46, 58.8%) and combined extra-ovarian metastases (32/46, 69.6%) were common in included patients. Complete cytoreduction surgery (R0 resection) was finally achieved in 19 of included patients and 41 patients received postoperative chemotherapy. However, the overall prognosis remains poor, with a median survival time of only 12 months. In univariate analysis, histological types ($P=0.002$), peritoneal metastasis ($P<0.0001$), the extent of metastatic lesions ($P=0.0001$) and completeness of cytoreduction surgery ($P<0.0001$) were found to be closely related to prognosis. Finally, completeness of cytoreduction surgery was considered to be the independent determinant of patients' outcome (HR 0.186, 95% CI 0.047–0.727, $P=0.016$) by multivariate analysis.

Conclusions: In multitudinous factors, complete cytoreduction surgery (R0 resection) may provide survival benefits in patients with OM of CRC origin. Thus, it is reasonable to recommend aggressive surgery with curative intent even if extra-ovarian metastases are present.