

Gynaecological Oncology News

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TeleHealth – Consultations available



Recently, I was asked if I conduct consultations over Skype. I tried it on a few occasions and patients' feedback has been amazingly positive.

Especially patients, who live in rural and remote areas and who would otherwise need to travel for long hours to come and see me, liked the service. I was able to take a medical and surgical history, clarify the expectations of surgery (including risks, possible complications) and discuss the need for additional investigations prior to surgery (if required).

I offer TeleHealth consultations because it potentially can save our patient enormous time and cost of travel. These consultations can be booked similar to face-to-face consultations through my rooms on (07) 3847 3033 between 8 am and 4.30 pm.

HE4 in Endometrial Cancer

HE4 emerges as an increasingly important tumour marker for endometrial cancer. Recently we have shown that HE4 taken prior to surgery predicts the presence of aggressive, high-risk cancer types and elevated HE4 levels prior to surgery also indicate poor long-term prognosis.

Peri-operative serum HE4 and CA125 levels were measured in 373 patients identified from the prospective Australian National Endometrial Cancer Study (ANECs). HE4 and CA125 were quantified in a clinically accredited laboratory at Sullivan and Nicolaides Pathology.

HE4 levels were significantly higher in stage III and IV tumours (compared to early-stage tumours) and in tumours with outer-half myometrial invasion (compared to tumours with no or minimal myoinvasion). HE4 was a better predictor of deep myometrial invasion than any other marker, particularly in patients with endometrioid histology. In addition, elevated HE4 was an independent predictor of recurrence-free survival after adjusting for stage and grade of disease, particularly in the endometrioid subtype.

These findings demonstrate the utility of serum HE4 as a predictive and prognostic biomarker in endometrial cancer in a population-based study. In particular they highlight the utility of HE4 for pre-operative risk stratification to differentiate low and high-risk patients who may need no or aggressive postoperative adjuvant treatment.

False positive HE4 findings are common in patients with renal impairment. If HE4 levels are elevated, please check the renal function.

HE4 needs to be taken 1 week prior to surgery so that a result is available. HE4 cost approximately \$30 which is an out of pocket expense to patients.

Cherish Foundation

The Cherish Foundation was established recently to raise funds for gynaecological cancer research.

The Battle Against Ovarian cancer was a massive success with \$127,000 raised. A video what can be viewed for free through this link: <http://www.youtube.com/watch?v=dWkCvSjnk9c>.

Please feel free to forward it to all family and friends and encourage them also to pass it on.

