Management of stage 1 endometrial carcinoma - Postoperative radiotherapy is not justified in women with medium risk disease

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Fortunately, family physicians worldwide have managed to shine enough light on the world of frontline primary care practice to glimpse the potential enhancement offered by research done in networks of practices. They have done this largely through spirited volunteerism, the help of enlightened collaborators, and raw stubbornness. The paper this week by Thomas et al reports more progress in establishing one of the critical infrastructures for family practice and primary care research: the laboratory known as the practice based research network. As they note, early surveillance systems in the United Kingdom and the Netherlands inspired family physicians in other countries to create during the past 40 years research networks that explored frontline clinical practice.

These networks typically adapt to the characteristics of their practices, leaders, opportunities, and health systems. Just like other human organisations, they require leadership, personnel, communication systems, expert consultation, and time to mature. The descriptions of networks in the United Kingdom, Israel, and France, and the lessons reported in the paper by Thomas et al are consistent with experience elsewhere, from New Zealand to South Africa to Canada. Indeed, there is now a substantial literature that confirms that these networks are feasible and capable of important research that can affect not just a few people but virtually everyone.1–11

What these laboratories need now is broader recognition of their viability, importance, and impact, and acceptance that they merit sustained funding as a continuing infrastructure, akin to a reusable rocket. Such a rocket can carry different payloads at different times. And, over time, just as a space station can be created, a new understanding of how people get sick, how they get well, and how they stay healthy can be discovered using the reusable practice based research network. This journey has been and can continue to be as exciting as exploring outer space or revealing the genetic and molecular mechanisms of life. There must be well trained explorers with curiosity and ambition, and they must have helpers and tools such as measuring devices, classification and coding systems, and information systems.

Management of stage 1 endometrial carcinoma

Postoperative radiotherapy is not justified in women with medium risk disease

Endometrial adenocarcinoma mainly affects postmenopausal women. The mainstay of treatment is hysterectomy with bilateral salpingo-oophorectomy. Most women are diagnosed with stage 1 disease, where the tumour is limited to the body of the uterus. Within this stage the differentiation grade and depth of myometrial invasion are among the most important predictors for the presence of regional (pelvic and para-aortic) lymph node metastases and recurrence.1

In the absence of mature results from randomised trials, debate continues on the merits of pelvic and para-aortic lymphadenectomy and postoperative radiotherapy.

The message of Thomas et al’s paper re-emphasises the message that practice based research networks are one of the critical medical laboratories, now available for everyday use. The pilot phase has involved descriptive and intervention studies, quantitative and qualitative work, surveillance, and hypothesis testing research. It is time to move into full implementation and secure these networks as a place of learning, where doctors and patients in the community are united with science to search for answers that can provide a better basis for daily practice. When this happens in countries around the world, the world will be a better place for all who become patients.

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SD and LG have both worked with several practice based networks, and the Graham Center received a contract from the Agency for Healthcare Research and Quality.

education and debate

Societal responsibilities of clinical trial sponsors

Lack of commercial pay off is not a legitimate reason for stopping a trial

A large long term randomised trial is a substantial commitment by its sponsor, its principal scientific investigators, a complex international organisational structure, and the patients who agree to participate. For trials with commercial sponsorship, the company’s business need—to demonstrate their treatment’s advantage—should not conflict with society’s need to enhance knowledge by conducting trials with

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5 Petersen DG. Complete surgical staging in endometrial cancer provides prognostic information only. Soinn Rea Ólch 2000;10:8-14.