



Microcystic Elongated and Fragmented Pattern Invasion in Endometrial Cancer: Possible Prognostic Value to Precise and Individualized Therapeutic Strategies

Endometriyal Kanserde Mikrokistik Uzamış ve Parçalanmış Patern İstilas: Kesin ve Bireyselleştirilmiş Tedavi Stratejilerinin Olası Prognostik Değeri

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Dear Editor,

We read with a great deal of interest the article entitled "Prognostic Significance of Microcystic Elongated and Fragmented (MELF) Myometrial Invasion Pattern: A Retrospective Study" by Okcu et al.¹

In their cohort, the MELF pattern was observed in 29.8% of the patients, and it was significantly related to lymphovascular space invasion (LVSI), stage, infiltrative pattern, and necrosis. No significant relation was identified with overall or disease-free survival rates. The authors concluded that additional sectioning and immunohistochemical (IHC) analysis should be performed to the excised lymph nodes to identify micrometastases as MELF associated with LVSI and lymph node metastases.

Recently, Qi et al.² demonstrated that the combination of MELF and tumor budding is a histological marker associated with tumor aggressiveness and can be an independent predictor of adverse outcomes. Moreover, Tahara et al.³ reported a strong expression of programmed

death-ligand 1 (PD-L1) in the invasive front of the MELF pattern and concluded that programmed cell death protein 1/PD-L1 immunotherapy demonstrated significant therapeutic effect on the management of patients with endometrial cancer and grade 1 MELF. Furthermore, Rabe et al.⁴ claimed that cytokeratin IHC staining could detect malignant cells in the sentinel lymph nodes of patients with endometrial cancer and MELF.

Finally, in a large cohort study, He et al.⁵ revealed that participants with POLE-mutated tumors and MELF pattern invasion had a 15.1-fold increase in tumor recurrence or progression risk than POLE-wild type tumors. Once again, we thank the authors for their excellent study.

Keywords: Microcystic elongated and fragmented pattern, endometrial cancer, prognostic value, therapeutic strategies

Anahtar kelimeler: Mikrokistik uzamış ve parçalanmış patern, endometriyal kanser, prognostik değer, terapötik stratejiler

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Received: 29 September 2022

Accepted: 11 October 2022

Online First: 02 November 2022

Cite as: Iavazzo C, Fotiou A, Gkegkes ID, Vrachnis N. Microcystic Elongated and Fragmented Pattern Invasion in Endometrial Cancer: Possible Prognostic Value to Precise and Individualized Therapeutic Strategies. Medeni Med J 2022;37:352-353

Ethics

Peer-review: Internally peer-reviewed.

Author Contributions

Surgical and Medical Practices: C.I., A.F., I.D.G., N.V.,
Concept: C.I., A.F., I.D.G., Design: C.I., A.F., I.D.G., Data
Collection and/or Processing: N.V., Analysis and/or
Interpretation: C.I., I.D.G., N.V., Literature Search: A.F.,
I.D.G., Writing: C.I., I.D.G.

Conflict of Interest: The authors have no conflict of
interest to declare.

Financial Disclosure: The authors declared that this
study has received no financial support.

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