



Body mass index as risk factor for lymphedema one year after surgery for endometrial cancer. A prospective longitudinal multicentre study.

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The authors have no conflict of
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Background

- There is a lack of 'gold standard' for measuring lymphedema *
- The incidence of lymphedema vary substantially depending of method of measuring.
- Consequently, risk factors are not uniform and cannot be regarded as valid*



Aim of the study

To determine the impact of BMI on risk factors for lymphedema assessed as crude volume increase $\geq 10\%$ (LLL CV) or as BMI-standardised volume increase $\geq 10\%$ (LLL BMI-SV), one year after surgery for early-stage endometrial cancer (EC).



* [Lindqvist E](#), [Wedin M](#), [Fredrikson M](#), [Kjølhede P](#). *Eur J Obstet Gynecol Reprod Biol*. 2017;211:112-121.

Material and Method

An observational prospective multicentre study conducted in 14 centres in Sweden.

- 114 women with high-risk early-stage EC underwent surgery including pelvic and para-aortic lymphadenectomy
- 117 women with low-risk early-stage EC had surgery without lymphadenectomy

Standardized measurements of circumference of the legs enabling calculation of leg volume. (Sitzia)*

Preoperatively (baseline)

1 year postoperatively

Lymphedema = volume increase \geq 10%: (1 year – baseline)

Crude volume (CV) and BMI-standardized volume (BMI-SV)



$$\text{BMI-standardized volume} = \frac{\text{estimated leg volume} * \text{mean BMI}}{\text{de facto BMI}}$$

*Sitzia J. Eur J Cancer Care(Engl). 1995;4(1):11-6

Results



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Incidence of lymphedema (LLL) according to CV: 12% (28/231), and according to BMI-SV: 9.5% (22/231).
Interrater agreement: 0.91 (95% CI 0.87 - 0.95); Cohen's kappa: 0.55 (95% CI 0.42 – 0.68)

Risk factors	LLL CV* (aOR (95%CI))	LLL BMI-SV* (aOR (95%CI))
Age		1.07 (1.00–1.15)
BMI	0.87 (0.79-0.97)	
Δ BMI (kg/m ²), mean (SD) §	1.91 (1.34-2.71)	
Diuretics	3.27 (1.20-8.92)	
Diabetes Mellitus		5.44 (1.67–17.66)
Lymphadenectomy (LA)		14.42 (3.49–59.62)
Number of lymph nodes removed		1.03 (1.01-1.05)
Location of LA	No LA	1.00 (reference)
	Pelvis only	21.84 (3.93– 21.39)
	Pelvis + para aortic	12.07 (2.92–49.87)
Extent of LA	No LA	1.00 (reference)
	Below AB	22.56 (4.04–125.90)
	Between AB and IMA	25.12 (3.54–178.15)
	Between IMA and LRV	10.70 (2.52–45.40)
	Proximal to the DCIV	14.26 (3.41–59.69)
	Distal to the DCIV	15.89 (1.80–139.99)
Adjuvant oncological treatment	None	1.00 (reference)
	Radiation	15.02 (2.34-96.57)
	Chemotherapy	0.50 (0.15-1.69)
	Chemotherapy + radiation	0.51 (0.09-2.74)

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Conclusions.

BMI is a strong risk factor for LLL that outweigh the effect of obvious risk factors and therefore should be adjusted for when assessing lymphedema.

Adjuvant radiation therapy and LA were independent risk factors for LLL together with age and diabetes mellitus.

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