

**Review Article**

**A REVIEW ON ENDOMETRIAL CANCER:**

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**ABSTRACT**

The estimation of cancer burden is valuable to set up priorities for disease control. The comprehensive global cancer statistics from the International Agency for Research on Cancer indicate that gynecological cancers accounted for 19% of the 5.1 million estimated new cancer cases, 2.9 million cancer deaths and 13 million 5-year prevalent cancer cases among women in the world in 2002. Cervical cancer accounted for 4,93,000 new cases and 2,73,000 deaths; uterine body cancer for 1,99,000 new cases and 50,000 deaths; ovarian cancer for 2,04,000 new cases and 1,25,000 deaths; cancers of the vagina, vulva and choriocarcinoma together constituted 45,900 cases. More than 80% of the cervical cases occurred in developing countries and two-thirds of corpus uteri cases occurred in the developed world. Political will and advocacy to invest in healthcare infrastructure and human resources to improve service delivery and accessibility are vital to reduce the current burden in low- and medium-resource countries.

**INTRODUCTION**

Endometrial cancer refers to several types of malignancies that arise from the endometrium, or lining, of the uterus. Endometrial cancer develops in the lining of uterus. Endometrial cancer is a disease in which malignant (cancer) cells form in the tissues of the endometrium.[1] Uterus is a hollow organ present in the female body to which placenta attaches during pregnancy. The lining of uterus is

constantly regenerating till the menopause is achieved. It is most common in postmenopausal women but can develop in premenopausal women also. [2] The common sign of endometrial cancer are vaginal bleeding or spotting in postmenopausal women, abnormal uterine bleeding and abnormal menstrual periods. Bleeding between normal periods in premenopausal women in women older than 40 year extremely long, heavy, or frequent episodes of bleeding (may indicate premalignant changes), anaemia, caused by chronic loss of blood. (This may occur if the woman has ignored symptoms of prolonged or frequent abnormal menstrual bleeding), lower abdominal pain or pelvic cramping, thin white or clear vaginal discharge in postmenopausal women. Endometrial carcinoma is primarily a disease of menopausal and postmenopausal women with the peak incidence in women aged 55-65 years.[3] Approximately 75% of patients are aged 50 years and older, and 5% are younger than 40 years. Endometrial carcinoma is rare in patients younger than age 30 years. Usually these cancers are detected in early stage and thus prognosis is good. Worldwide this is the most common malignancy in women while in India it occupies third place after cervix and breast.[1-4]