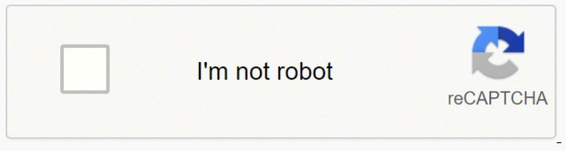

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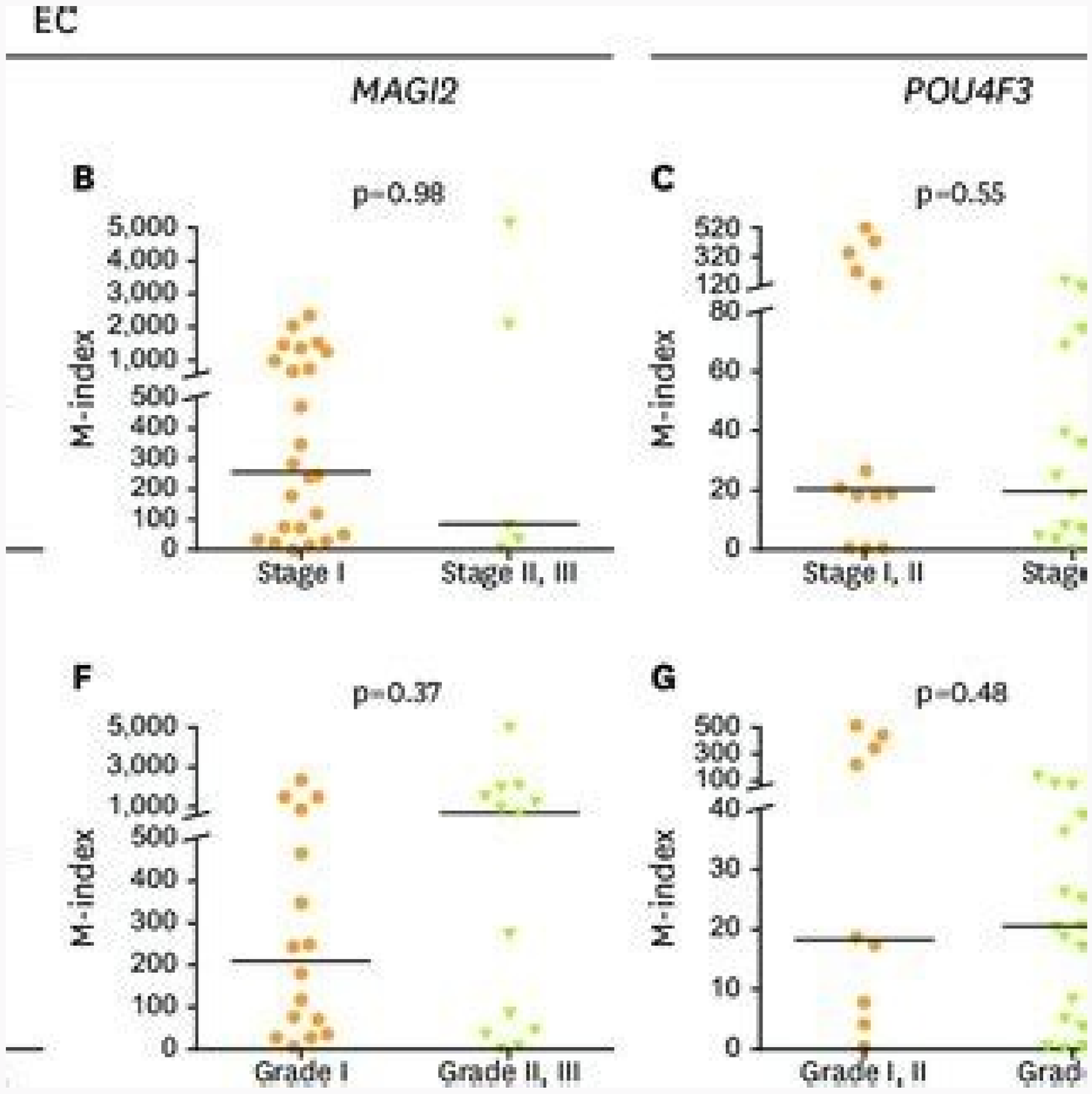

Data feature

able	Clinical Data		Literature
	Count	Percentage (%)	Count
der			N/A
	34,393	43.58	
ale	44,519	56.42	
range			N/A
	29	0.03	
0	954	1.21	
0	3,377	4.28	
0	8,487	10.76	
0	16,698	21.16	
0	20,212	25.61	
0	17,913	22.70	
0	10,036	12.72	
	1,188	1.50	
an Type	39		38
nosis Type	244		244
arker Type	166		153

1	23	4 (17%)
2	66	7 (11%)
1	23	5 (22%)
2	66	9 (14%)

	Patients	Events *N*, (%)
1	20	4 (20%)
2	62	5 (8%)
1	20	4 (20%)
2	62	7 (11%)

ıly histotype 1 population were considered.

Age	Nature of specimen	Diagnosis	Stage / Grade	Gross features	Myometrial invasion	Follow up
65	Modified radical hysterectomy +BSO	UPSC	IIIC2, N1MO	Necrotic growth. extension to cervix	>50%	CT, 1yr, NED
50	CSS	Clear cell	IB,G 3	Cavity filled with polypoid growth.	>50%	2yr, NED
54	CSS	UPSC	IB,G1	Thickened endomerium	>50%	1yr, NED
60	CSS	Clear cell	IIIC1, N1MO	Polypoidal growth at fundus	<50%	RT,1yr NED
67	CSS	Clear cell	IIIC2, N1M0	Cavity filled with growth	>50%	CT,1yr NED
68	CSS	Clear cell	I A,G3	Growth filling the entire cavity	<50%	2yr, NED, Recur (Rx brachy) THN 1yr NED
51	CSS	Clear cell	IA,G3	UT size 10WK,3 luminal growth	No invasion	
64	CSS	Clear cell	IIIC1 N1M0	Growth filling endo cavity	>50%	RT,1yr NED
46	CSS	UPSC	IA,G3	Soft friable growth in cavity	<50%	
70	TAH+BSO, Omentectomy	Clear cell	IVB, N1M1	5*4 CM mass in cavity	>50%	CT
65	TAH+BSO	UPSC	IVB, N1M1	Growth filling cavity	>50%	CT
61	Modified radical hysterectomy	UPSC	II,G2	Growth invades CX	<50%	1yr, NED
50	TAH+BSO	Clear cell	IIG3	Growth filling cavity	>50%	1yr, NED
53	CSS	Adenosquamous	IB, G3	Growth filling cavity	>50%	2yr, THN REC-RT
40	CSS	Adenosquamous	IA, G2	Growth filling cavity	<50%	1yr, NED
58	CSS	Clear cell	IIIC2, N1M0	Growth filling cavity	>50%	RT,1yr, NED
73	CSS	UPSC	IB,G3	Growth filling cavity	>50%	1yr NED
52	CSS	adenosquamous	IIIC1 N1M0	2 polypoidal growth in cavity	<50%	RT, 2yr, NED
65	Modified radical hysterctomy	Clear cell	II, N0M0	Fluid in cavity, growth towards CX	>50%	1yr, NED
36	CSS	UPSC	IIIC2, N1M0	Extensive growth in cavity involving vagina	>50%	CT, 2yr NED

CONCLUSION

This study series shows that the incidence of type II EC is less than that of type I. Among the type II Endometrial cancers, the histological type was mainly clear cell carcinomas. The diagnosis of this entity is important due to the aggressiveness and the poorer survival rates of type II EC. Early and accurate diagnosis and proper post-surgical evaluation and treatment is mandatory.

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Conflict of interest: None declared
Ethical approval: The study was approved by the Institutional Ethics Committee

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Staging informatio

n	Node-positive cases identified	Node-p cases
000	100	
0	0	1(
180	34	
450	72	
585	89	

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