

Systematic review of Gestational Trophoblastic Diseases by an expert panel of pathologists

Timmermans M¹, Delbecq K¹ *, Delvenne P² *, Marbaix E³ *, Noël JC⁴ *, Moerman P⁵ *, Vergote I⁵, Kridelka F², Nisolle M¹, Goffin F¹, On behalf of the GTD.be group.

* Members of the expert panel of pathologists.

1. University of Liège, Hôpital de la Citadelle, Liège, Belgium 2. University of Liège, CHU Sart-Tilman, Liège, Belgium, 3. Catholic University of Louvain, Cliniques universitaires St-Luc, Brussels, Belgium, 4. Free University of Brussels, Hôpital Erasme, Brussels, Belgium 5. Catholic University of Leuven, Gasthuisberg, Leuven, Belgium

Introduction

Gestational trophoblastic diseases (GTD) represent a spectrum of pregnancy-related lesions (complete and partial mole) with potential invasive or malignant behaviour (invasive mole, choriocarcinoma and placental site trophoblastic tumour). In Western populations, the incidence of complete and partial molar pregnancy is 1 and 3 per 1000 births, respectively. In Belgium, 100 complete moles and 10 choriocarcinomas are expected per year.

The low incidence makes these lesions relatively unknown. Subsequently, the management is shown to be inadequate in a high proportion of cases. According to the French experience, 30% of these cases are over or under treated, due to misdiagnosis, short follow-up or inadequate chemotherapy regimen.

During the last World Congress on GTD, in October 2011, many countries (France, UK, The Netherlands, Switzerland, US,...) shared their experiences about treatments and follow-up. The benefit of the centralisation for the management of GTD was clearly shown.

Aim

The aim of this project is to organize a GTD registry in Belgium to improve the pathological diagnosis, follow-up and treatment of these rare diseases.

Materials and methods

A web-based registry (www.BGOG.eu) and two reference centers have been set up, with the support of the Flemish and French-speaking gynecological societies (VVOG and GGOLFB) and the European Organisation for the Treatment of Trophoblastic Disease (EOTTD). The reference center's work is based on a multidisciplinary approach between pathologists, general and oncological gynecologists, radiologists and medical oncologists, all working to determine the right diagnosis and to define adequate follow-up, staging, scoring and treatments.

In practice, once a molar pregnancy is diagnosed,

- the center is contacted by the treating physician to register the patient,
- signed informed consent is obtained ,
- register form is completed by the treating physician,
- a review of the pathology is requested,
- the referring pathologist submits the case to the expert panel of pathologists (*),
- the hCG regression curve is plotted,

In case of gestational trophoblastic neoplasia, a written counselling is provided by the reference center to the referring physician in concordance with the FIGO/WHO and Belgian GTD guidelines. During all the process, the patient remains treated by her physician.

Data are encoded in a secured web-database, with restricted access to the centers.

Conclusion

This Belgian initiative, encouraged by the European network of GTD, is set up to improve health care for GTD patients. The cornerstones of this organization are the systematic

pathological review by an expert panel of pathologists (*) and clinical advice by the reference centers.