Vol. XXVI, n. 5, 2005 ISSN: 0392-2936

european journal of gynaecological oncology

an International Journal

Editors-in-Chief

A. Onnis

P. Bősze

Montréal (Canada) Budapest (Hungary)

Associate Editor

M. Marchetti

Montréal (Canada)

Assistant Editor

J. Wilson

San Diego - CA (USA)

Editorial Board

Allen H.H., London, Ontario (Canada) Anteby S.O., Jerusalem (Israel)

Audet-Lapointe P., Montreal (Canada)

Ayhan A., Ankara (Turkey)

Balat O., Graziantep (Turkey)

Barber H.K., New York, NY (USA)

Basta A., Krakow (Poland)

Bender H.C., Dusseldorf (Germany)

Benedetti Panici P.L., Rome (Italy) Charkviani T., Tbilisi (Georgia)

De Oliveira C.F., *Coimbra (Portugal)*

Dexeus S. Jr., Barcelona (Spain)

Di Paola G.R..

Buenos Aires (Argentina)

Di Re F., Milan (Italy)

Di Saia P., Orange, CA (USA)

Fuller A.F. Jr., Boston, MA (USA)

Geisler H.E., Indianapolis, IN (USA)

Gerbaulet A., Villejuif (France)

Gorins A., Paris (France)

Heintz A.P.M..

Utrecht (The Netherlands)

Ioannidou-Mouzaka L.,

Athens (Greece)

Jordan J.A.,

Birmingham, England (UK)

Karseladze A.I., Moscow (Russia)

Klastersky J., Bruxelles (Belgium)

Kubista E., Vienna (Austria)

Kudelka A.P., Houston, TX (USA)

Maggino T Pada (Itala)

Maggino T., Padua (Italy)

Markowska J., Poznan (Poland)

Marth C., *Innsbruck* (Austria)

Massuger Leon F.A.G.,

Nijmegen (The Netherlands)

Menczer J., Savyon (Israel)

Monsonego J., Paris (France)

Pinotti A., São Paulo (Brazil)

Piver S.M., Buffalo, NY (USA)

Rakar S., Ljubljana (Slovenia)

Raju K.S., London, England (UK)

Shepherd J.H.,

London, England (UK)

Stelmachów J., Warsaw (Poland)

Ungár L., Budapest (Hungary)

Vermorken J.B., Edegem (Belgium)

Vîrtej P., Bucharest (Romania)

Wang P.-H., Taipei (Taiwan)

Winter R., Graz (Austria)

Yokoyama Y., Hirosaki (Japan)

Publishing Organization (M. Morsani):

I.R.O.G. CANADA, Inc. - 4900 Côte St-Luc - Apt # 212 - Montréal, Qué. H3W 2H3 (Canada) Tel. +514-4893242 - Fax +514-4854513 - E-mail: canlux@mgroup-online.com - www.irog.net

Editorial Office (M. Critelli):

Galleria Storione, 2/A - 35123 Padua (Italy) - Tel. (39) 049 8756900 - Fax (39) 049 8752018

EUROPEAN JOURNAL OF GYNAECOLOGICAL ONCOLOGY (ISSN 0392-2936) publishes original peer reviewed works in the fields of female genital cancers and related subjects and also proceedings of gynecologic oncology society meetings all over the world. The Journal is covered by CURRENT CONTENTS, SCISEARCH, RESEARCH ALERT, INDEX MEDICUS, MEDLINE, EMBASE/Excerpta Medica, CURRENT ADVANCES IN CANCER RESEARCH, BIOSIS.

European Journal of Gynaecological Oncology

www.irog.net

General Information

The EUROPEAN JOURNAL OF GYNAECOLOGICAL ONCOLOGY (ISSN 0392-2936) publishes original peer reviewed work, preferably brief reports, in the fields of female genital cancers and related subjects – prevention, early detection, epidemiology, pathology, diagnosis, management – and also proceedings of Gynaecologic Oncology Society meetings all over the world.

The Journal is covered by CURRENT CONTENTS, SCISEARCH, RESEARCH ALERT, INDEX MEDICUS, MEDLINE, EMBASE/Excerpta Medica, CURRENT ADVANCES IN CANCER RESEARCH, BIOSIS.

AIMS AND SCOPE

The EUROPEAN JOURNAL OF GYNAECOLOGICAL ONCOLOGY is dedicated to publishing editorial articles in the "Distinguished Expert Series" and original research papers, case reports, letters to the Editor, book reviews and newsletters.

The Journal was founded in 1980 – the second gynaecologic oncology hyperspecialization journal in the world. Its aim is the diffusion of scientific, clinical and practical progress and knowledge in female neoplastic diseases in an interdisciplinary approach among gynaecologists, oncologists, radiotherapists, surgeons, chemotherapists, pathologists, epidemiologists and so on.

ANNOUNCEMENTS regarding meetings, postgraduate courses and symposia will be accepted six months before publication and will be published free of charge.

BOOK SAMPLES for review should be sent to the Editorial offices in Montréal or in Padova.

COPYRIGHT: the Journal has been registered with the Copyright Clearance Center, Inc. Reproductions are not allowed without the written consent of the Publisher. All photocopy fees should be paid to the Copyright Clearance Center, Inc., 21 Congress Street, Salem, MA 01970, USA stating the ISSN number, the volume and the first and last page numbers of each article copied.

ADVERTISING INFORMATION: advertising orders and inquiries may be sent to: I.R.O.G. CANADA Inc., Publisher, 4900 Côte St. Luc, Apt. 212, Montréal (Quebec) Canada H3W 2HS, Tél. 514.4893242-4893640, Fax 514.4854513, E-mail: canlux@mgroup-online.com - www.irog.net

RESPONSIBILITY: although every effort is made by the editorial staff and the printer to eliminate misleading or inaccurate information, the publisher accepts no responsibility for the consequences of faultful or incorrect information. The authors recognize that the editor and publisher have no responsibility and are indemnified against any liability or claim that may result from the publication of misleading or incorrect data.

SUBSCRIPTION INFORMATION

The Journal is published bimonthly (January, March, May, July, September and November); one volume per year. Subscriptions start from January and are automatically renewed if not cancelled by the end of September.

Subscriptions include six issues per year plus supplements, monographs and all official communications of Meetings, Courses, Symposia and all scientific activities of Gynaecologic Oncology Societies all over the world.

Subscriptions are entered with prepayment only. The annual subscription is \$390 US for Institutions, \$200 US for Individuals. For airmail add \$30, for receipt add \$10 US. Single copy prepaid cost \$95 US.

Send subscription requests with cheque or credit card payment (Amex - Visa - Diner's - Master Card) to I.R.O.G. CANADA Inc., 4900 Côte St. Luc, Apt. 212, Montréal, Québec H3W 2H3 Canada. **Only US Funds are accepted**. No bank transfers.

Claims for missing issues can be honoured up to six months. Changes of address: allow six weeks for all changes to become effective. All communications should include both old and new addresses (with postal codes) – better if accompanied by a mailing label from a recent issue – and should be sent to the printer: La Garangola, Via E. Dalla Costa 6, 35129 Padova (Italy) or by Fax +39.049.7806580. Claims should be made within six months of publication date.

Duplicate copies will not be sent to replace those undelivered through failure to notify of change of address.

Single copies and back issue and volume information is available from the printer, La Garangola, Padova, Tel. +39.049.8075557, Fax +39.049.7806580. Certain back issues may only be available as photocopies of the originals.

All other business correspondence including orders for offprints and advertising space and **any communication and requests should be addressed to** I.R.O.G. CANADA Inc., 4900 Côte St. Luc, Apt. 212, MONTRÉAL, QUÉBEC H3W 2H3 (Canada), tel. (514) 4893242, fax (514) 4854513.

IN ALL LEGAL MATTERS THE COURT OF MONTREAL IS COMPETENT.

European Journal of Gynaecological Oncology

www.irog.net

Instructions to Authors

SUBMISSION OF MANUSCRIPTS

Papers should be submitted to A. ONNIS Editor-in-Chief of the EUROPEAN JOURNAL OF GYNAECOLOGICAL ONCOLOGY, 4900 Côte St. Luc, Apt. 212 MONTREAL, QUÉBEC H3W 2H3 (Canada) - Tel. +514-4893242 - Fax +514-4854513, or Galleria Storione 2/A - 35123 PADOVA (Italy) - Fax +39-049-8752018.

Editorial articles for publication in the "Distinguished Expert Series" should be submitted to P. Bősze, Editor-in-Chief of this section, Department of Gynecology, Saint Stephan Hospital, 1096 Budapest, Nagyvárad tér 1, Telephone (36-1) 275 2172, Fax (36-1) 275 2172, E-mail: bosze@axelero.hu

When a manuscript is submitted, an acknowledgement card is sent to the corresponding author within two or three weeks.

Submitted papers are reviewed by the Editor-in-Chief and his Peer Referees. Authors may be required to modify the manuscript according to the reviewers' suggestions.

Manuscripts accepted for publication will be copyedited by the editorial staff for typographical and grammatical mistakes and to guarantee clarity and conciseness.

Publication time will be the shortest possible based on scientific and publishing needs. Manuscripts submitted for publication cannot be returned.

Published papers will become property of the Journal and copyrighted under I.R.O.G. CANADA Inc.

After six months no grievances will be accepted regarding published articles.

All statements are the responsibility of the authors. Product dosages, indications and methods referred to in the papers reflect the author's experience. No responsibility is assumed by the Editor-in-Chief or the Publisher for any damage from use of any products, operation methods or instructions contained in the published materials.

Trade names, trademarks, etc. are protected by the law and regulations. The Editor-in-Chief and the Publisher cannot accept any legal responsibility for any errors or omissions that may be made in press, particularly for information about drug dosage and application thereof contained in the Journal. Consult the prescribing information before administering any drug.

MANUSCRIPT REQUIREMENTS

The Journal follows the "Uniform requirements for manuscripts submitted to biomedical journals" published in the New England Journal of Medicine 1991, 324, 424-8 and in the British Medical Journal 1991, 302.

Three *manuscripts*, typed and double spaced should be submitted with an electronic disk, formatted in Word for Macintosh or Windows, version 6.0. Manuscripts without an electronic disk will not be accepted. A cover letter signed by all authors must state that all authors who have participated in the work take responsibility for the manuscript which has never been published or submitted for publication elsewhere. Without a cover letter the publication will not be possible. Name, address and phone/fax numbers of the *Corresponding Author*, responsible for revision and approval of the proofs, should be indicated. Full-length articles should not exceed 8 printed pages including tables and references.

After the *title page* (full title and names of authors, institutions, eventual acknowledgement for financial support, running title of no more than 60 characters or spaces), original works should be arranged in the conventional order: *Summary* (purpose of investigation, methods, results, conclusion - about 150 words), *Key words*, *Content* (a 20-word summary), *Introduction, Materials and Methods, Results, Discussion, Conclusion, Acknowledgement* (if any), *References, Tables, Legends*.

Authors should supply a complete address for reprint requests.

In the text only standard abbreviations can be used and must be avoided in the title. The full term for which an abbreviation stands should precede its first use in the summary and text unless it is a standard unit of measurement.

Authors must give their complete professional identifications and affiliations, including all academic titles and positions.

Letters to the editor should be brief (500 words or less) and offer objective, constructive and educational criticism of published material. The editor reserves the right to publish.

Figures: Two original copies (not negatives) of each figure are requested. Each figure should have a label on the back indicating its number, author's name and top of the figure. Do not write on the back of the figures and do not mount them on cardboard. If sending colour pictures advise if they must be printed in colour or black and white (colour costs ten times more).

Legends should be typed on a separate page with Arabic numerals corresponding to the illustrations.

Tables should be titled, typed in double space on separate pages and numbered in Arabic numerals in the order of their first citation in the text. Do not use internal rules. Only standard, universally understood abbreviations should be used.

References should be numbered consecutively in the order in which they are first mentioned in the text. Identify references in the text, tables, and legends by Arabic numerals in parentheses.

Use the style of the examples below, which are based with slight modifications on the format used by the U.S. National Library of Medicine in *Index Medicus*. The titles of journals should be abbreviated according to the style used in *Index Medicus*.

References must be verified by the Author(s) against the original documents.

Examples of correct forms of references are given below:

Articles in Journals: Authors' surname and initials (if more than six names, give six followed by "et al."), Title, Abbreviated Journal Title, Year of Publication, Volume, Issue and first page.

Books: Authors' surname and initials, title of the book and title of chapter, in: Title, Editor(s), Place, Publisher, Year, Page.

Acknowledgments will be limited to appropriate professionals who were contributors to the paper.

PROOFS revised by the editorial staff will be sent to the corresponding author and should be checked and returned within ten days. The corresponding author is responsible for detecting typesetting errors. After this deadline *the proofs will be considered approved*. Only essential corrections should be made; extensive changes will be charged to the authors.

BUSINESS MATTERS

The Journal has no commercial advertisements.

Authors will be expected to contribute to the printing expenses, tables, figures and postage. For every published article a copy of the Journal will be provided free of charge. Only payments in US dollars will be accepted. No bank transfers.

Reprints should be requested with the form enclosed with the acceptance letter. No free reprints will be supplied.

DISTINGUISHED EXPERT SERIES	
Conservative management of epithelial ovarian cancer S. Dexeus, R. Labastida, D. Dexeus - <i>Barcelona</i> , SPAIN Several indications and options of conservative treatment for epithelial ovarian carcinoma are analysed. Fertility-sparing surgery is limited to serous, mucinous and endometrioid tumours, Stage IA, grade 1 and also in some specific	473
cases of grade 2.	
REVIEW ARTICLES	
Endometrial cancer: asymptomatic endometrial findings. Characteristics of postmenopausal endometrial cancer M. Marchetti, C. Vasile, S. Chiarelli - <i>Padua, ITALY</i>	479
Endometrial cancer is year by year diagnosed more frequently. Diagnosis must be careful particularly in cases correlated estrogen.	
Breast density changes associated with hormone replacement therapy in postmenopausal women. Effects on the specificity and sensitivity of mammographic screening A. Patella, R. Marziani, A. Schippa, S. Benedetti, S. Mossa, B. Mossa - Rome, ITALY Postmenopausal hormonal replacement therapy associated with increased mammographic density and reduction in sensitivity and specifity of mammographic results increase false-positive false-negative outcomes.	485
MULTICENTRIC RESEARCH	
Factors predicting persistence of high-risk human papillomavirus (HPV) infections in women prospectively followed-up in three New Independent States (NIS)* of the former Soviet Union S. Syrjänen, I. Shabalova, N. Petrovichev, V. Kozachenko, T. Zakharova, J. Pajanidi, J. Podistov, G. Chemeris, L. Sozaeva, E. Lipova, I. Tsidaeva, O. Ivanchenko, A. Pshepurko, S. Zakharenko, R. Nerovjna, L. Kljukina, O. Erokhina, M. Branovskaja, M. Nikitina, V. Grunberga, A. Grunberg, A. Juschenko, M. Cintorino, R. Santopietro, P. Tosi, K. Syrjänen - <i>Turku, FINLAND</i> Factors predicting persistent HPV infections were analysed in a prospectively followed-up cohort of 543 women using univariate and multivariate analysis.	491
ORIGINAL ARTICLES	
Radical hysterectomy for cervical carcinoma in pregnant women - a case of decidua mimicking metastatic carcinoma in pelvic lymph nodes R. Hogg, L. Ungár, P. Hazslinszky - <i>Budapest, Hungary</i> Intraoperative histology can guide the surgical treatment of women with carcinoma of the cervix.	499
Differential gene expression assessed by cDNA microarray analysis in breast cancer tissue under tamoxifen treatment M. del Carmen Garcia Molina Wolgien, I.D.C.G. da Silva, F.E. Villanova, A. Yumi Otsuka, R.C. Borra, L.F. Lima Reis, A.F. Carvalho, E.C. Baracat, L.H. Gebrim - São Paulo, BRAZIL Tamoxifen is able to modulate tumor growth by down-regulating genes involved in mechanisms such as cell cycle control, tumor invasion and metastasis.	501
Epidemiology of malignant breast tumors in the province of Sassari (Sardinia, Italy) in the period 1992-2002	505
A. Cossu, M. Budroni, G. Capobianco, D. Pirino, G. Palmieri, S. Dessole, F. Tanda, R. Cesaraccio, P.L. Cherchi - <i>Sassari, ITALY</i> The incidence of malignant breast tumors in the province of Sassari in the period 1992-2002.	303
Primary peritoneal malignant mixed müllerian tumor associated with colonic adenocarcinoma R. Shaco-Levy, N. Sion-Vardy, B. Piura - <i>Beer-Sheva, ISRAEL</i>	509

Case report of primary peritoneal MMMT associated with colonic adenocarcinoma with discussion of clinical aspects, pathology and pathogenesis.

Adenofibromasarcoma originating from a mural nodule of ovarian serous cystadenoma K. Takeuchi, S. Kitazawa, M. Deguchi, T. Maruo - <i>Kobe, JAPAN</i> The first case of adenofibrosarcoma originating from a mural nodule of ovarian serous cystadenoma is described.	511
The first case of adenomorosaccoma originating from a mural nodule of ovarian serous cystadenoma is described.	
Biphasic sarcomatoid carcinoma or carcinosarcoma of the breast: prognosis and therapy J. Cornette, W.A.A. Tjalma, P. Buytaert - <i>Edegem, Belgium</i> Biphasic sarcomatoid carcinoma of the breast is a rare tumour. An overview is presented with the focus on therapy and prognosis.	514
Further studies on leptin and leptin receptor expression in myometrium and uterine myomas A. Markowska, M. Rucinski, K. Drews, L.K. Malendowicz - <i>Poznań, Poland</i> Expression of the leptin gene was demonstrated both in myomas and in the surrounding myometrium but not in the myometrium of healthy women.	517
Ingenol derivatives inhibit proliferation and induce apoptosis in breast cancer cell lines A. Vigone, G.C. Tron, D. Surico, G. Baj, G. Appendino, N. Surico - <i>Novara, ITALY</i> Laboratory analysis of the antitumour effects of a library of ingenol derivatives in breast cancer cell lines.	526
Syndrome of inappropriate secretion of anti-diuretic hormone following carboplatin-paclitaxel administration in a patient with recurrent ovarian cancer Y. Yokoyama, T. Shigeto, M. Futagami, H. Mizunuma - <i>Aomori, Japan</i> A syndrome of inappropriate secretion of anti-diuretic hormone onset following carboplatin and paclitaxel administration for ovarian cancer is described.	531
Koilocytosis and squamous (pre)neoplasia as detected in population-based cervical screening: practice and theory M.E. Boon, L.M. Boon, M.J.A. de Bosschere, BS.M. Verbruggen, L.P. Kok - <i>Groningen</i> , <i>The Netherlands</i> Koilocytosis can be detected in the screening process for cervical cancer. The presence of koilocytosis in cervical smears may serve to identify patients with an increased risk for cervical cancer.	533
Clinical audit of patients with cervical cancer in Slovenia - Data analysis for the year 2003 M. Uršič-Vrščaj, S. Rakar, A. Možina, I. Takač, Z. Šubic, T. Kodrič, S. Smrkolj - <i>Lenart, Slovenia</i> The data gathered in 2003 on patients with cervical cancer who regularly attended their gynecologist were analyzed, thereby allowing further training of all involved and improvement of their work efficiency.	537
Postmenopausal bleeding and vaginal nodules as the first presenting sign of adenocarcinoma of the gall-bladder	543
O. Triolo, F. Antico, A. Mancuso, V. Salimbeni, P.A. Nicòtina - <i>Messina, ITALY</i> A case with vaginal nodules and postmenopausal bleeding as the first presenting sign of an adenocarcinoma of the gallbladder is described.	0 10
Hysterectomy in a malignant molar pregnancy and a healthy baby M. Gojnic, V. Dugalic, S. Vidaković, M. Papic, K. Jeremic, M. Pervulov, S. Milicevic - <i>Messina, ITALY</i> A case of a 19-year-old primipara with a twin pregnancy where one embryo was molar is reported.	545
Metastatic disease in the breast from nonmammary neoplasms V. Smyrniotis, Th. Theodosopoulos, A. Marinis, K. Goula, J. Psychogios, A. Kondi-Pafiti - <i>Athens</i> , <i>Greece</i> Metastatic involvement of the breast from nonmammary neoplasms is a relatively rare condition.	547
Cervical carcinoma and pregnancy in a young primipara M. Gojnic, V. Dugalic, S. Vidaković, M. Papic, K. Jeremic, M. Pervulov, S. Milicevic - <i>Belgrde, Serbia AND Montenegro</i> A 20-year-old primipara at the 18th week of gestation came under our care. The case was resolved by surgery.	551
	_
Gherlin expression in women with polycystic ovary syndrome - a preliminary study J. Skommer, K. Katulski, E. Poręba, B. Męczekalski, R. Slopień, R. Plewa, A. Goździcka-Józefiak, A. Warenik-Szymankiewicz - <i>Poznań</i> , <i>Poland</i> Using real-time PCR we detected that polycystic ovaries showed almost ten times lower expression of gherlin in RNA than normal ovaries.	553

472 Contents

Breast cancer in the elderly P. Podolski, L. Markulin Grgić, V. Kukura, Z. Budišić, F. Šantek - Zagreb, CROATIA Differences in tumor characteristics and treatment modalities between breast cancer patients over and under 65 years of age were evaluated.	557
Incidence of endometrial carcinoma in patients with endometrial hyperplasia L. Novac, T. Grigore, N. Cernea, M. Niculescu, S. Cotarcea - <i>Craiova, Romania</i> Information about abnormal bleeding of the endometrium and suspicious symptoms of hyperplasia could avoid endometrial carcinoma or a preneoplastic state by progesterone treatment.	561
Saline contrast hysterosonography in infertile patients and in women with abnormal uterine bleeding S. Milingos, G. Kallipolitis, K. Stefanidis, J. Sklia, N. Makris, D. Loutradis, A. Antsaklis, S. Michalas - Athens, Greece Saline contrast hysterosonography is a very good tool in preoperative management of intrauterine and intramural pathology and gives us the opportunity for a better hysteroscopic intervention.	564
CASE REPORTS	
Pedunculated aggressive angiomyxoma arising from the vaginal suburethral area: Case report and review of literature B. Piura, R. Shaco-Levy - Beer-Sheva, ISRAEL A patient with a pedunculated aggressive angiomyxoma arising from the vaginal suburethral area is described and the pertinent literature is reviewed.	568
Sequential recurrences of ovarian granulosa cell tumour 10 and 11 years after initial diagnosis as haemoperitoneum and subhepatic mass: A case report and review of the literature N. Givalos, T. Liakakos, A. Machairas, H. Gakiopoulou, G. Karatzas - Athens, GREECE A case of an ovarian granulosa cell tumor twice recurring ten and 11 years after initial diagnosis as a haemoperitoneum and subhepatic mass, respectively, is reported together with a review of the literature.	572
Leiomyosarcoma of the vulva: a case report G. Androutsopoulos, G. Adonakis, P. Ravazoula, V. Tsapanos, G. Kourounis - <i>Rion, Greece</i> A case of vulvar leiomyosarcoma and review of the literature are presented.	577
Breast cancer and borderline ovarian carcinoma in young patients - case report M. Gojnic, V. Dugalic, S. Vidaković, M. Papic, K. Jeremic, M. Pervulov, S. Milicevic - Belgrade, SERBIA AND MONTENEGRO Routine examination of girls in secondary schools revealed suspicious ultrasound findings in two out of 180 examinees. Fibrocystic breast dysplasia together with borderline ovarian tumors were resolved with surgery.	579

EUROPEAN JOURNAL OF GYNAECOLOGICAL ONCOLOGY

Vol. XXVI, Number 5, 2005

ISSN: 0392-2936

I.R.O.G. CANADA, Inc.

Publisher office: 4900 Côte St. Luc - Apt. 212 - Montréal, Québec H3W 2H3 (Canada) - Tél.: (514) 4893640-4893242 - Fax: (514) 4854513 E-mail: canlux@mgroup-online.com - www.irog.net

ALL RIGHTS RESERVED

No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopies, recordings, nor any information storage and retrieval system without written permission from the copyright owner.

Printed in Italy