

上皮性卵巢癌复发风险评估方法学中国专家共识(2025 年版)

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摘要: 卵巢癌是女性生殖系统常见恶性肿瘤之一, 大多数上皮性卵巢癌患者对化疗敏感, 经标准一线方案治疗后可达到完全或部分缓解。尽管已联合采用手术、化疗及基于生物标志物的维持治疗方案, 绝大多数上皮性卵巢癌患者仍会出现疾病的复发。且复发性卵巢癌患者即便接受进一步的规范化治疗, 后线治疗的耐药率仍逐渐增高, 给临床治疗带来极大挑战。因此, 准确识别和预判高复发风险人群, 对改善卵巢癌患者预后具有积极意义。本共识基于文献证据, 制定卵巢癌复发风险评估的方法学依据, 供临床借鉴参考。

主题词: 卵巢肿瘤; 复发; 风险评估; 专家共识

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Chinese Expert Consensus on Risk Assessment Methodology for Epithelial Ovarian Cancer (Version 2025)

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Abstract: Ovarian cancer is one of the most common malignancies of the female reproductive system. Although most patients with epithelial ovarian cancer (EOC) are sensitive to chemotherapy and achieve complete or partial remission after standard first-line treatment, the vast majority will experience disease recurrence despite combined modalities including surgery, chemotherapy, and biomarker-based maintenance therapy. Furthermore, even with further standardized treatment for recurrent disease, resistance to subsequent chemotherapy lines gradually increases, posing significant challenges for clinical management. Therefore, accurately identifying and predicting patients at high risk of recurrence is crucial for improving the prognosis of ovarian cancer patients. Based on current literature evidence, this consensus establishes a methodological framework for assessing the risk of ovarian cancer recurrence, intended for clinical reference.

Subject words: ovarian neoplasms; recurrence; risk assessment; expert consensus

全球范围内, 卵巢癌 (ovarian cancer, OC) 居女

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性常见恶性肿瘤发病第8位, 约占2020年恶性肿瘤新发病例的3.7%和死亡病例的4.7%^[1]。据2024年国家癌症中心报告, 2022年中国卵巢癌发病率为8.84/10万, 死亡率为4.73/10万^[2]。上皮性卵巢癌 (epithelial ovarian cancer, EOC) 约占卵巢恶性肿瘤的90%^[1], 由于缺乏早期特异性症状和有效的筛查手段, 约70%

分层,且与肿瘤组织中Ki-67的表达相关^[58]。

推荐意见 8: 影像组学联合临床特征构建的预测模型较单一影像学评估或临床模型具有更好的预测性,缺点是临床可操作性与医疗机构的综合实力尤其是影像科医师经验密切相关,临床推广尚待规范化推进(证据等级:C,推荐强度:弱推荐)。

2.3 MiROvaR模型

microRNA组合模型(miRNA-based predictor of risk of ovarian cancer relapse or progression, MiROvaR)是一种基于35种可预测卵巢癌进展或复发风险的miRNA表达谱构建的预后模型^[59],可用于预测EOC早期复发或进展,其风险指数计算公式为:

$$\text{风险指数} = \sum_i W_i X_i + 3.196 \ 617$$

其中 W_i 是权重, X_i 是第*i*个miRNA的对数变换后的miRNA表达,若风险指数 $>0.073 \ 59$ 为复发/进展高风险组, $\leq 0.073 \ 59$ 为低风险组。MiROvaR模型预测的高风险组中位PFS为18个月,低风险组中位PFS为38个月($HR=1.85$)。在两个验证队列中,MiROvaR是一种优异的预测疾病进展模型,采用多变量分析校正相关临床变量后仍有独立预测作用^[59]。该模型在后续研究中进行了验证,高风险患者的主要终点复发率为39%,而低风险患者为9.5%,证明该模型在早期识别卵巢癌复发高风险患者中有较好预测效能^[60]。

推荐意见 9: MiROvaR模型整合循环miRNA分子特征,评估EOC复发风险效能较好,是EOC复发风险分层管理有潜力的预测工具,限于模型检测成本高,临床推广应用难度大,建议进行大规模临床试验(证据等级:C,推荐强度:弱推荐)。

利益冲突:所有作者均声明不存在利益冲突。

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